

PLEASE TYPE OR PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM.

1. SURNAMES OR FAMILY NAMES ( Exactly as in Passport )  <hr/> 2. FIRST NAME AND MIDDLE NAME ( Exactly as in Passport )  <hr/> 3. OTHER NAMES ( Maiden, Religious, Professional, Aliases )  <hr/> <div style="display: flex;"> <div style="width: 50%;">           4. DATE OF BIRTH   <hr/> </div> <div style="width: 50%;">           8. PASSPORT NUMBER   <hr/> </div> </div> <div style="display: flex;"> <div style="width: 50%;">           5. PLACE OF BIRTH  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"><u>City, Province</u></div> <div style="width: 45%;"><u>Country</u></div> </div> <hr/> </div> <div style="width: 50%;">           DATE PASSPORT ISSUED            ( Day, Month, Year )   <hr/> </div> </div> <div style="display: flex;"> <div style="width: 50%;">           6. NATIONALITY   <hr/> </div> <div style="width: 50%;">           7. SEX  <input type="checkbox"/> Male  <input type="checkbox"/> Female         </div> </div> <div style="display: flex;"> <div style="width: 50%;">           DATE PASSPORT EXPIRES            ( Day, Month, Year )   <hr/> </div> </div>			<b>DO NOT WRITE IN THIS SPACE</b>  B-1/B-2 MAX      B-1 MAX      B-2 MAX  OTHER _____ MAX  MULT OR _____  MONTHS _____  L.O. CHECKED _____  ISSUED /REFUSED ON _____ BY _____  UNDER SEC. _____ INA  REFUSAL REVIEWED BY _____	
9. HOME ADDRESS ( Include apartment no., street, city, province, and postal zone )  <hr/> 10. NAME AND STREET ADDRESS OF PRESENT EMPLOYER OR SCHOOL ( Postal box number unacceptable )  <hr/> <div style="display: flex;"> <div style="width: 50%;">           11. HOME TELEPHONE NO.   <hr/> </div> <div style="width: 50%;">           12. BUSINESS TELEPHONE NO.   <hr/> </div> </div> <div style="display: flex;"> <div style="width: 33%;">           13. COLOR OF HAIR   <hr/> </div> <div style="width: 33%;">           14. COLOR OF EYES   <hr/> </div> <div style="width: 33%;">           15. COMPLEXION   <hr/> </div> </div> <div style="display: flex;"> <div style="width: 15%;">           16. HEIGHT   <hr/> </div> <div style="width: 85%;">           17. MARKS OF IDENTIFICATION   <hr/> </div> </div>				
18. MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated If married, give name and nationality of spouse.				
19. NAMES AND RELATIONSHIPS OF PERSONS TRAVELING WITH YOU (NOTE: A separate application must be made for a visa for each traveler, regardless of age.)			24. PRESENT OCCUPATION ( If retired, state past occupation )  <hr/> 25. WHO WILL FURNISH FINANCIAL SUPPORT, INCLUDING TICKETS?  <hr/> 26. AT WHAT ADDRESS WILL YOU STAY IN THE U.S.A.?  <hr/> 27. WHAT IS THE PURPOSE OF YOUR TRIP?  <hr/> 28. WHEN DO YOU INTEND TO ARRIVE IN THE U.S.A.?  <hr/> 29. HOW LONG DO YOU PLAN TO STAY IN THE U.S.A.?  <hr/>	
20. HAVE YOU EVER APPLIED FOR A U.S. VISA BEFORE, WHETHER IMMIGRANT OR NONIMMIGRANT? <input type="checkbox"/> No <input type="checkbox"/> Yes      Where? _____  When? _____      Type of visa? _____ <input type="checkbox"/> Visa was issued <input type="checkbox"/> Visa was refused				
21. HAS YOUR U.S. VISA EVER BEEN CANCELED? <input type="checkbox"/> No <input type="checkbox"/> Yes      Where? _____  When? _____      By Whom? _____				
22. Bearers of visitors visas may generally not work or study in the U.S. DO YOU INTEND TO WORK IN THE U.S.? <input type="checkbox"/> No <input type="checkbox"/> Yes If YES, explain.				
23. DO YOU INTEND TO STUDY IN THE U.S.? <input type="checkbox"/> No <input type="checkbox"/> Yes If YES, write name and address of school as it appears on form I-20.			30. HAVE YOU EVER BEEN IN THE U.S.A.? <input type="checkbox"/> No <input type="checkbox"/> Yes      When? _____  For how long? _____	
<b>NONIMMIGRANT VISA APPLICATION</b>			COMPLETE ALL QUESTIONS ON REVERSE OF FORM	

31. (a) HAVE YOU OR ANYONE ACTING FOR YOU EVER INDICATED TO A U.S. CONSULAR OR IMMIGRATION EMPLOYEE A DESIRE TO IMMIGRATE TO THE U.S.? (b) HAS ANYONE EVER FILED AN IMMIGRANT VISA PETITION ON YOUR BEHALF? (c) HAS LABOR CERTIFICATION FOR EMPLOYMENT IN THE U.S. EVER BEEN REQUESTED BY YOU OR ON YOUR BEHALF?

(a) ☐ No ☐ Yes

(b) ☐ No ☐ Yes

(c) ☐ No ☐ Yes

32. ARE ANY OF THE FOLLOWING IN THE U.S.? (If YES, circle appropriate relationship and indicate that person's status in the U.S., i.e., studying, working, U.S. permanent resident, U.S. citizen, etc.)

HUSBAND/WIFE \_\_\_\_\_ FIANCE/FIANCEE \_\_\_\_\_ BROTHER/SISTER \_\_\_\_\_

FATHER/MOTHER \_\_\_\_\_ SON/DAUGHTER \_\_\_\_\_

33. PLEASE LIST THE COUNTRIES WHERE YOU HAVE LIVED FOR MORE THAN 6 MONTHS DURING THE PAST 5 YEARS BEGIN WITH YOUR PRESENT RESIDENCE.

Countries

Cities

Approximate Dates

**34. IMPORTANT: ALL APPLICANTS MUST READ AND CHECK THE APPROPRIATE BOX FOR EACH ITEM.**

A visa may not be issued to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable to you?

- Have you ever been afflicted with a communicable disease of public health significance, a dangerous physical or mental disorder, or been a drug abuser or addict? ☐ Yes ☐ No

- Have you ever been arrested or convicted for any offense or crime, even though subject of a pardon, amnesty, or other such legal action? ☐ Yes ☐ No

- Have You ever been a controlled substance (drug) trafficker, or a prostitute or procurer? ☐ Yes ☐ No

- Have you ever sought to obtain or assist others to obtain a visa, entry into the U.S., or any U.S. Immigration benefit by fraud or willful misrepresentation? ☐ Yes ☐ No

- Were you deported from the U.S.A. within the last 5 years? ☐ Yes ☐ No

- Do you seek to enter the United States to engage in export control violations, subversive or terrorist activities, or any unlawful purpose? ☐ Yes ☐ No

- Have you ever ordered, incited, assisted, or otherwise participated in the persecution of any person because of race, religion, national origin, or political opinion under the control, direct or indirect, of the Nazi Government of Germany, or of the government of any area occupied by, or allied with, the Nazi Government of Germany; or have you ever participated in genocide? ☐ Yes ☐ No

A YES answer does not automatically signify ineligibility for a visa, but if you answered YES to any of the above, or if you have an question in this regard, personal appearance at this office is recommended. If appearance is not possible at this time, attach a statement of facts in your case to this application.

35. I certify that I have read and understood all the questions set forth in this application and the answers I have furnished on this form are true and correct to the best of my knowledge and belief. I understand that any false or misleading statement may result in the permanent refusal of a visa or denial of entry into the United States. I understand that possession of a visa does not entitle the bearer to enter the United States of America upon arrival at port of entry if he or she is found inadmissible.

DATE OF APPLICATION \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

If this application has been prepared by a travel agency or another person on your behalf, the agent should indicate name and address of agency or person with appropriate signature of individual preparing form.

SIGNATURE OF PERSON PREPARING FORM \_\_\_\_\_  
(if other than applicant)

**DO NOT WRITE IN THIS SPACE**

37 mm x 37 mm

PHOTO

Glue or staple  
photo here