

Name exactly as written in Passport _____
Last (Family) Name *First Name*Date of Birth (MM/DD/YR) _____ Gender: Male Female

Country of Birth _____ Province of Birth _____

Country of Citizenship _____ Social Security Number (if available) _____

Are you Currently in the U.S.: Yes No**IF YOU ARE CURRENTLY INSIDE THE U.S.:**

Date of Last Arrival (MM/DD/YR) _____ I-94 Arrival/Departure Record Number _____

Passport Number _____ Country of Issuance _____

Date Passport Issued _____ Date Passport Expires _____

Current Nonimmigrant Status _____ Expiration Date or D/S _____

SEVIS ID number if in F-1 or J-1 status _____

Do you currently have an Employment Authorization Document? Yes No (If Yes, please provide copy of front of EAD card.)**IF YOU ARE CURRENTLY OUTSIDE THE U.S., AT WHAT U.S. CONSULATE (OR PORT OF ENTRY IF CANADIAN) WOULD YOU APPLY FOR A VISA:**Type of Office (select only one box): Consulate Pre-Flight Inspection Port of Entry

Office Address: City _____ Country _____

FOR ALL H-1B BENEFICIARIES:

Current Residential Address: (do not list a post office (P.O.) Box):

Street Number & Name _____

Apt, Suite, or Floor and Number _____

City or Town _____ State/Country _____ ZIP/Postal Code _____

Best/Complete Phone Number _____ Best Email Address _____

Please indicate all previous nonimmigrant status held in the U.S. (F, J, TN, etc.). _____

Are you subject to the section 212e two-year home residency requirement? Yes No

If Yes, has the requirement been completed or waived? Please include details and any notices of waiver approval. _____

Has an immigrant petition (for permanent resident status) ever been filed on your behalf? Yes No

If Yes, please provide details, including date petition approved, denied or whether currently pending; in addition, please provide copies of any notices. _____

Have you every been denied nonimmigrant (temporary) status in the U.S.? Yes No

If Yes, please provide details. _____

I certify that the above information is true and correct to the best of my knowledge.

Signature _____ Date _____

DEPENDENTS (Spouse and Children Under the Age of 21)

Do you have any dependents who will be included in this application? Yes No If yes, how many? _____

Provide the following information for each dependent:

Name (Last/Family, First) _____

Relationship: Spouse Child Date of Birth _____

City and Country of Birth _____ Country of Citizenship _____

If presently in the U.S.:

Current Immigration Status _____ I-94 Number and Expiration Date _____

Date of Most Recent Arrival in the U.S. _____ Visa Expiration Date _____

Name (Last/Family, First) _____

Relationship: Spouse Child Date of Birth _____

City and Country of Birth _____ Country of Citizenship _____

If presently in the U.S.:

Current Immigration Status _____ I-94 Number and Expiration Date _____

Date of Most Recent Arrival in the U.S. _____ Visa Expiration Date _____

Name (Last/Family, First) _____

Relationship: Spouse Child Date of Birth _____

City and Country of Birth _____ Country of Citizenship _____

If presently in the U.S.:

Current Immigration Status _____ I-94 Number and Expiration Date _____

Date of Most Recent Arrival in the U.S. _____ Visa Expiration Date _____

Are any of the dependents currently an applicant for an immigrant visa or adjustment of status to permanent residence? Yes No

If yes, please provide details. _____

Has any dependent ever been arrested or convicted of any criminal offense since last entering the United States? Yes No

If yes, please provide details. _____

Has any dependent done anything that violated the terms of the nonimmigrant status he/she currently holds? Yes No

If yes, please provide details. _____

Is any dependent now in exclusion or deportation proceeding? Yes No

If yes, please provide details. _____

Has any dependent been employed in the U.S. since last admitted or granted an extension or change of status? Yes No

If yes, please provide details. _____

I certify that the above information is true and correct to the best of my knowledge.

Signature _____ Date _____