

# GENERAL IMMIGRATION QUESTIONNAIRE

## I. INFORMATION REGARDING APPLICANT

Name: \_\_\_\_\_  
(Last), (First), (Middle)

Other names: \_\_\_\_\_ Sex:  Male  Female  
(Maiden, Religious, Professional, Aliases)

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
(Mo/Day/Yr) (City), (State/Province/Region), (Country)

Citizenship: \_\_\_\_\_ U.S. Social Security No. \_\_\_\_\_  
(Country)

Permanent address abroad: \_\_\_\_\_  
\_\_\_\_\_

E-Mail: \_\_\_\_\_ Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

U.S. address (mailing): \_\_\_\_\_ U.S. address (physical): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone (home): \_\_\_\_\_ Facsimile: \_\_\_\_\_  
(cell): \_\_\_\_\_ (work): \_\_\_\_\_

If in the U.S., complete the following:

Date of arrival: \_\_\_\_\_ I-94 No.: \_\_\_\_\_  
(Mo/Day/Yr)

Current nonimmigrant status: \_\_\_\_\_ Expires: \_\_\_\_\_  
(Mo/Day/Yr)

Place where last entered U.S.: \_\_\_\_\_ Means of travel into U.S.: \_\_\_\_\_

Did you talk with a Border or Pre-Flight Inspector on entry into U.S.? \_\_\_\_\_

Were any of your or your spouse's parents born in the United States?  Yes  No

If so, when? \_\_\_\_\_

Were any of your or your spouse's grandparents born in the United States?  Yes  No

If so, when? \_\_\_\_\_

Are either you or your spouse an American Indian born in Canada of at least 50 percent Native blood-line?  Yes  No

Are either you or your spouse eligible for a Native American tribal document?  Yes  No

**II. MARITAL INFORMATION**

Marital status:  Married  Widowed  Divorced  Separated  Single

Will spouse accompany you to U.S.?  Yes  No

Spouse's Name: \_\_\_\_\_  
(Last), (First), (Middle)

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
(Mo/Day/Yr) (City), (State), (Country)

Citizenship: \_\_\_\_\_ U.S. Social Security No. \_\_\_\_\_

Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_

| Spouse's former spouse name | Country of citizenship | Date of divorce/death |
|-----------------------------|------------------------|-----------------------|
|                             |                        |                       |
|                             |                        |                       |
|                             |                        |                       |
|                             |                        |                       |

Is spouse currently working in the U.S.?  Yes  No

If yes, does he or she have authorization to work full-time?  Yes  No

If no, does he or she wish to work in the U.S.?  Yes  No

Married previously?  Yes  No

Your first former spouse's name: \_\_\_\_\_  
(Last), (First), (Middle)

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
(Mo/Day/Yr) (City), (State), (Country)

Citizenship: \_\_\_\_\_ Date of divorce/death: \_\_\_\_\_ Place of divorce: \_\_\_\_\_

Your second former spouse's name: \_\_\_\_\_  
(Last), (First), (Middle)

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
(Mo/Day/Yr) (City), (State), (Country)

Citizenship: \_\_\_\_\_ Date of divorce/death: \_\_\_\_\_ Place of divorce: \_\_\_\_\_

**III. PRESENT BROTHERS, SISTERS AND CHILDREN, INCLUDING STEPCHILDREN**

Do you have any children who are U.S. citizens or U.S. nationals?  Yes  No

Do you have any brothers/sisters who are U.S. citizens or U.S. nationals?  Yes  No

Do you have any children who are not U.S. citizens/nationals who are within four years of the age of 21 who may eventually want to live permanently in the U.S.?  Yes  No

**IV. RESIDENCES LAST FIVE YEARS (present address first)**

| Street Address/Apt. #                            | City/State | Country | From (Mo/Yr) | To (Mo/Yr) |
|--|------------|---------|--------------|------------|
|  |            |         |              | present    |
|  |            |         |              |            |
|  |            |         |              |            |
|  |            |         |              |            |
| Last address outside of U.S. more than one year: |            |         |              |            |
|  |            |         |              |            |

**V. PRESENT/PAST MEMBERSHIP IN GROUPS OF ANY KIND, INCLUDING MILITARY, SINCE YOUR 16th BIRTHDAY (if more space is required, use back of sheet)**

| Group Name | City/State | From (Mo/Yr) | To (Mo/Yr) |
|------------|------------|--------------|------------|
|            |            |              |            |
|            |            |              |            |
|            |            |              |            |
|            |            |              |            |
|            |            |              |            |
|            |            |              |            |

**VI. INFORMATION REGARDING U.S. EMPLOYER**

Company name: \_\_\_\_\_

Address: \_\_\_\_\_

Type of business: \_\_\_\_\_

Position full-time?  Yes  No      Number of hours per week: \_\_\_\_\_

Wages per week: \$ \_\_\_\_\_ Other compensation? \_\_\_\_\_ Value: \$ \_\_\_\_\_

Company contact: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

**VII. POSITION OFFERED IN THE U.S.**

Job title: \_\_\_\_\_

Job duties: \_\_\_\_\_

\_\_\_\_\_

Location of place of employment: \_\_\_\_\_

Minimum education/degree required to perform the job duties: \_\_\_\_\_

Field of study: \_\_\_\_\_

Do other persons with your job have this education/degree?  Yes  No

Special requirements/skills needed to perform the position (*i.e.*, knowledge of certain types of computer software, foreign language, etc.):

Minimum years of experience required to perform the job duties: \_\_\_\_\_

Title of immediate supervisor: \_\_\_\_\_ Number of people you will supervise: \_\_\_\_\_

### VIII. APPLICANT'S EDUCATION

| School Name/Address | Field of Study | From (Mo/Yr) | To (Mo/Yr) | Degree |
|---------------------|----------------|--------------|------------|--------|
|                     |                |              |            |        |
|                     |                |              |            |        |
|                     |                |              |            |        |
|                     |                |              |            |        |

List professional licenses: \_\_\_\_\_

### IX. APPLICANT'S PRIOR WORK EXPERIENCE

Present Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Employed: From \_\_\_\_\_ to \_\_\_\_\_ Job title: \_\_\_\_\_

#### Last occupation abroad:

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Employed: From \_\_\_\_\_ to \_\_\_\_\_ Job title: \_\_\_\_\_

### X. IMMIGRATION-RELATED QUESTIONS

Have you or your spouse ever been under immigration proceedings?  Yes  No

Exclusion  Deportation  Rescission  Judicial proceedings

Have you or your spouse ever been denied entry to the United States?  Yes  No

Have you or your spouse ever been caught while attempting to enter the United States illegally?  Yes  No

Ever applied for a U.S. **nonimmigrant visa** before?  Yes  No

If yes, Classification: \_\_\_\_\_ Where: \_\_\_\_\_ When: \_\_\_\_\_

Outcome?  Issued  Refused

Has your U.S. visa ever been canceled?  Yes  No

## XI. GROUNDS OF EXCLUSION

1. Have you ever in or outside the United States:

Been arrested, cited, charged, indicted, fined or imprisoned for breaking or violating any law or ordinance, **including** traffic violations?  Yes  No

If you answered YES to any of the above, give the following information:

| Date | Place (City, State, Country) | Nature of Offense | Outcome |
|------|------------------------------|-------------------|---------|
|      |                              |                   |         |
|      |                              |                   |         |
|      |                              |                   |         |
|      |                              |                   |         |

2. Have you ever received public assistance in the U.S. from any source, including the U.S. Government or any state, county, city or municipality (other than emergency medical treatment), or are you likely to receive public assistance in the future?  Yes  No

3. Have you ever:

a. Within the past 10 years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future?  Yes  No

b. Engaged in any unlawful commercialized vice, including but not limited to illegal gambling?  Yes  No

c. Knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the U.S. illegally?  Yes  No

d. Illicitly trafficked in any controlled substance or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance?  Yes  No

4. Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to, any person or organization that has ever engaged or conspired to engage in sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity?  Yes  No

5. Do you intend to engage in the U.S. in:

a. Espionage?  Yes  No

b. Any activity a purpose of which is opposition to, or the control or overthrow of, the Government of the United States, by force, violence or other unlawful means?  Yes  No

c. Any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information?  Yes  No

6. Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?  
 Yes  No
7. Did you, during the period March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion?  
 Yes  No
8. Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin, or political opinion?  Yes  No
9. Have you ever been deported from the U.S., or removed from the U.S. at government expense, excluded within the past year, or are you now in exclusion or deportation proceedings?  Yes  No
10. Are you under a final order of civil penalty for violating section 274C of the Immigration Act for use of fraudulent documents, or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the U.S., or any other immigration benefit?  Yes  No
11. Have you ever left the U.S. to avoid being drafted into the U.S. Armed Forces?  Yes  No
12. Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver?  Yes  No
13. Are you now withholding custody of a U.S. citizen child outside the U.S. from a person granted custody of the child?  Yes  No
14. Do you plan to practice polygamy in the U.S.?  Yes  No
15. Have you ever participated, ordered, or helped in the following: torture, genocide, killing of any person, injuring any person, engaging in forced sexual contact with any person, denying a person's religious beliefs?  
 Yes  No
16. Have you ever participated in any: military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?  Yes  No
17. Have you ever served in any prison, jail, prison camp, detention facility, labor camp or helped detain anyone?  
 Yes  No
18. Have you ever used a weapon against a person, or sold or transported weapons?  Yes  No
19. Have you ever received any type of military, paramilitary, or weapons training?  Yes  No

I, \_\_\_\_\_, certify that the information provided on this questionnaire is true and correct to the best of my knowledge.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature