

A) Fill out one for Each Applicant (including children)

1) Full Name	2) National ID # (if any)	3) Date of Travel	4) Current Occupation		
5) Name of Current Employer or School		6) Employer/School Address (include zip code)			
7) Current Job Description			8) Yearly Pay		
9) Home address in your home country (including zip code)					
10) Address in US where the applicant will stay (including zip code)					
11) Name of Person Applicant is staying with:		12) That person's home number:	13) That person's cell number:		
14) Marital Status (married, single, widowed, divorced)		15) Spouse's Name (if any)	16) Spouse's Birth Date		
17) Father's Name:	18) Father's Date of Birth				
19) Mother's Name:	20) Mother's Date of Birth				
21) List All professional, social, charitable organizations, tribes, and/or clans that you belong(ed), contribute(d), or work(ed) for					
22) Have you ever lost your passport or had it stolen?					
23) Who is paying for your travel expenses?					
24) Are any of the following family members in the US?					
Relationship	Yes/No	Immigra. Status	Relationship	Yes/No	Immigra. Status
Husband/Wife			Fiance/Fiancee		
Father/Mother			Son/Daughter		
Brother/Sister			Other Relative		

B) Additional Information for Males Between the Age of 16 to 45 years old

1) Please list the last three employers (starting with current) and any other employments that are related.

Name	Address	Tel. No.	Job Title	Supervisor	Dates of Emplo.

2) List ALL (except elementary) current and past Educational Institutions (starting w/ current).

Name	Address	Course of Study	Dates of Attend.

3) List all current and prior military services (if none state none).

Country	Branch	Rank/Position	Specialty (Specialties)	Dates of Service

4) List all Countries that ever issued a passport to the Applicant.

5) List all Countries ever visited including dates of visits.

6) Has the Applicant ever lost a passport or had one stolen?

7) Does Applicant have skills or training, including firearms, explosives, nuclear, biological, or chemical experience?

8) Has the Applicant participated in armed conflict either as a participant or victim? If so please provide details.

9) Please provide travel arrangements, including arrival/departure dates, flight information, locations of visit.

10) Provide the name and phone number of the contact person in the US Organization (if any):

F) Additional Information of the Principal Worker

1) Highest Degree Earned

School Name	Degree	Major	Year	Other Relevant Education

2) List the name of all immediate subordinates who work for the investor in the US

3) For each employment listed in item B-1, please provide the following information

Employer Name:		Start Date		End Date:	
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Detailed Job Description:

Employer Name:		Start Date		End Date:	
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Detailed Job Description:

Employer Name:		Start Date		End Date:	
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Detailed Job Description:

Employer Name:		Start Date		End Date:	
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Detailed Job Description:

Employer Name:		Start Date		End Date:	
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Detailed Job Description:

Employer Name:		Start Date		End Date:	
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Detailed Job Description:
