Law Office	of William	Jang,	PLLC

EB-4 (Religious) Information Sheet

(512) 323-2333

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	A. Principal Beneficiary (Worker)						
1) Full Name		2) City and Country of Birth		3) Has Worker been in U.S.?			
4) All Other Names Used (including maiden name)		5) A Number (if a	any)	6) Social Security No. (if any)			
7) If not in US, Desi	red Consular (City)	8) Name and addres	ss in native language, if not native language is not roman.				
9) Home Phone	10) Cell Phone	11) Office Phone	12) Fax	13) E-Mail			
,	,			,			
14) Father's full nam	ne	15) Father's Date, City and Country of E		of Birth	16) City and Country of Residence		
17) Mother's full nar	me (maiden)	18) Mother's Date, City and Country of Birth		of Birth	19) City and Country of Residence		
20) Current spouse'	s full name (maiden)	21) Place of Current	t Marriage		22) Date of Current Marriage		
23) Former spouse's	s full name (maiden)	24) Former spouse's	s Date, City and (Country of Birth	25) Date and Place of Marriag		
26) Beneficiary's res	sidence last five vear	s. List present addre	ss first		From	То	
	d Number	City	State/Country	Zip Code	month/year	month/year	
Otreet an		City	State/Country	Zip Code	montri/year	Present	
27) Beneficiary's las	t address outside the	e United States of mo	ore than one year	r	From	То	
Street an	d Number	City	State/Country	Zip Code	month/year	month/year	
28) Beneficiary's Emp	lovment last five years	(if none, so state). List	present employme	ent first.	From	То	
	Full name and addr		<u> </u>	Occupation	month/year	month/year	
						Present	
29) Show below last occupation abroad if not shown above			·	From	То		
Full name and address of employer			Occupation	month/year	month/year		
30) Current US Address (if any)		31) Current Foreign Address (if any))		
32) Activity to be performed by beneficiary in the US Church.		33) Position Being Offered		34) Proposed Wages/Salary			

	and Annelisentie On	erree (if we we whe				
	ipal Applicant's Spo			-		
1) Full Name		2) City and Country of Birth		3) Has Beneficiary been in U.		
			•			
4) All Other Nemes Llood (including main						
 All Other Names Used (including main 	ien name)	5) A Number (if a	any)	6) Social Security Number (if any		
7) If not in US, Desired Consular (City)	8) Name and addres	ss in native langu	age, if not native l	anguage is not r	oman.	
		0		0 0		
0) Eath and full name	10) Eatharla Data	Nite and Occuptore	f Distle		(D.))	
9) Father's full name	10) Father's Date, C	ity and Country C	DI BIRN	11) City and Cou	ntry of Residence	
12) Mother's full name (maiden)	13) Mother's Date, C	Citv and Country	of Birth	14) City and Cou	intry of Residend	
, ,		- · , · · · · · · ,		, - ,	.,	
				(17) Data and Diago of Married		
15) Former spouse's full name (maiden)	16) Former spouse's L	Date, City and Cour	ntry of Birth	17) Date and Place of Marriag		
	<u> </u>					
	<u> </u>					
18) Beneficiary's Employment last five years	(if none, so state). List	present employme	ent first.	From	То	
Full name and addr	ess of emplover		Occupation	month/year	month/year	
				j 	Present	
					†l	
				 	╂─────┦	
19) Show below last occupation abroad	f not shown above			From	То	
Full name and addr			Occupation	month/year	month/year	
			Occupation	montrivycar	montal/year	
C) Cł	nildren's Informatio	n - if none pleas	e write none			
1) Full Name	Accompanying?	City of Birth	Country of Birth	SS # (if any)	A # (if any)	
I) I uli Name	Accompanying		Country of Birth	55 # (ii aliy)	A # (ii aliy)	
Is any of your children currently	employed or ever b	een emploved in	the past? If so ple	ease list all empl	lovment.	
				-		
3) Has any	of your children ever	r been married or	have any childrer	n?		
	Quanting to Dringi	nel Deneficient	and Eamily			
D) Questions to Principal Beneficiary and Family						
1) Has anyone been removed or deporte	d or had any other in	mmigration proble	ems? (if yes, pleas	e provide inform	nation):	
2) Has an immigration (green card) appli	cation been filed for	any one? (if yes	nlease provide in	formation).		
2) Has an immigration (green card) application been filed for any one? (if yes, please provide information):						
3) Has anyone been arrested, charged, or had any dealings with police or had other criminal problems? (if yes provide details):						
Has anyone been previously employed in the US? (If yes, please provide information):						
5) Please list all previously issued visas:						
6) Please list all previously refused visas:						
7) Has anyone previously applied for employment authorization? If so, when and where? Was it approved?						
ין המס מהישטה פוטיוטעסוי מפרוט טרופוטיווטרו מענוטרבמנטרו: השט, יירוטר מוע יירוטרט ג מפרט ג מפרטיטע:						
8) List all organizations, clubs, that anyo	ne has belonged to in	n the past or belo	ongs to currently.			
	v		- /			
0) Has anyong conved in a militany? (if w	a provida nome of	militory (ormy -		on and nature a	f convice)	
9) Has anyone served in a military? (if yes, provide, name of military (army, navy), dates location and nature of service).						
10) List all prior periods of stav in the United States as R visa/status holder.						

1) Name of the Church 2) Church Phone Number 3) Church Fax Number 3) Church Address 3) Church Paston/Elder/Deacon and Title (contact person) 4) Contact Person's Day Time Phone Number 5) Contact's E-mail Address 6) Church Website Address 7) Number of Members 9) Annual Gross Income 10) Annual Net Income 11) Year Established 12) EIN # 13) List the position and duties of all individuals currently working at the Petitioning Church Position 12) EIN # 14) Number of R Religious Worker or EB-4 Religious Worker that has worked within the last 5 years at the Church. 15) Number of R Religious Worker or EB-4 Religious Worker petitions filed by the Church in the last 5 years. Check List 12. Copy of I-94 and Passports for all individuals applying 2. Copy of I-94 and Passports for all individuals applying 2. Copy of I-94 and Passports for all individuals applying 2. Copy of I-94 and Passports for all individuals applying 3. Cocy of Growment Document Proving family relationship (Birth Certificate, Marriage Certificates, etc.) 3. Resume (with datalis of prior experiance including jab duties) 4. Corlicate of prior membership and work in the same denomination (at least 2 years) 5. Certificate of Employment, Income Tax Documents, and other documents evidencing prior work 5. Copy of Oroclega Degrees and Transcripts 7. On the same damomination (at least 2 years) 5. Copy of Oroclega Degrees and Transcripts 5. Copy of Coolega Degrees and Transcripts <th colspan="7">E - Petitioning Church</th>	E - Petitioning Church						
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