

A. Principal Beneficiary (Worker)

1) Full Name		2) City and Country of Birth		3) Has Beneficiary been in U.S.	
4) All Other Names Used (including maiden name)		5) A Number (if any)		6) Social Security Number (if any)	
7) If not in US, Desired Consular (City)		8) Name and address 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 name		15) Father's Date, City and Country of Birth		16) City and Country of Residence	
17) Mother's full name (maiden)		18) Mother's Date, City and Country of Birth		19) City and Country of Residence	
20) Current spouse's full name (maiden)		21) Place of Current Marriage		22) Date of Current Marriage	
23) Former spouse's full name (maiden)		24) Former spouse's Date, City and Country of Birth		25) Date and Place of Marriage	
26) Beneficiary's residence last five years. List present address first					
				From	To
Street and Number	City	State/Country	Zip Code	month/year	month/year
					Present
27) Beneficiary's last address outside the United States of more than one year					
				From	To
Street and Number	City	State/Country	Zip Code	month/year	month/year
28) Beneficiary's Employment last five years (if none, so state). List present employment first.					
			From	To	
Full name and address of employer		Occupation	month/year	month/year	
					Present
29) Show below last occupation abroad if not shown above					
			From	To	
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 company.		33) Position Being Offered		34) Proposed Wages/Salary	

B) Principal Applicant's Spouse (if none please write none)

1) Full Name		2) City and Country of Birth	3) Has Beneficiary been in U.S.	
4) All Other Names Used (including maiden name)		5) A Number (if any)	6) Social Security Number (if any)	
7) If not in US, Desired Consular (City)	8) Name and address in native language, if not native language is not roman.			
9) Father's full name	10) Father's Date, City and Country of Birth		11) City and Country of Residence	
12) Mother's full name (maiden)	13) Mother's Date, City and Country of Birth		14) City and Country of Residence	
15) Former spouse's full name (maiden)	16) Former spouse's Date, City and Country of Birth		17) Date and Place of Marriage	
18) Beneficiary's Employment last five years (if none, so state). List present employment first.			From	To
Full name and address of employer		Occupation	month/year	month/year
				Present
19) Show below last occupation abroad if not shown above			From	To
Full name and address of employer		Occupation	month/year	month/year

C) Children's Information - if none please write none

1) Full Name	Accompanying?	City of Birth	Country of Birth	SS # (if any)	A # (if any)
2) Is any of your children currently employed or ever been employed in the past? If so please list all employment.					
3) Has any of your children ever been married or have any children?					

D) Questions to Principal Beneficiary and Family

1) Has anyone been removed or deported or had any other immigration problems? (if yes, please provide information):
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):
4) 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?
8) List all organizations, clubs, that anyone has belonged to in the past or belongs to currently.
9) Has anyone served in a military? (if yes, provide, name of military (army, navy...), dates location and nature of service).

E) Information about the US Petitioning Entity					
1) Name of the Entity			2) Entity Address		
3) Manager/Officer's Name and Title (contact person)			4) Type of Business		
5) Entity Phone	6) Entity Fax	7) Entity Contact Person's E-mail Address			
8) Year Established	9) Gross Income	10) Net Income	11) Website Address	12) EIN#	13) # of Workers
F) Information about Affiliated Entity outside of US (if any)					
1) Name of the Entity			2) Entity Address		
3) Manager/Officer's Name and Title (contact person)			4) Type of Business		
5) Entity Phone	6) Entity Fax	7) Entity Contact Person's E-mail Address			
8) Year Established	9) Gross Income	10) Net Income	11) Website Address	12) EIN#	13) # of Workers
G) Needed Documents:					Check List
Beneficiary and Family:					
1. Copy of I-94 and Passports for all individuals applying.					
2. Copy of Government Document proving family relationship (Birth Certificate, Marriage Certificates...)					
3. Resume (with details of prior experience including job duties, hours worked, periods of employment.)					
4. Certificate of Employment, Income Tax, W-2, Letters and others proving prior related experience					
5. University/College Degrees and Transcripts					
6. Evidence of at least three years of teaching or researching in the field					
7. Evidence of qualifying employment offer (at least one of the following):					
a. offer of tenured or tenure-track teaching position					
b. offer of research position having no fixed terms, with an expectation of permanent employment and documented accomplishments in the research field.					
8. Evidence of recognition internationally as outstanding in a academic field (such as):					
a. evidence of international awards, prizes, etc. in the academic field					
b. membership in organization in the academic field that requires outstanding achievements of its					
c. published materials in professional publications written by others about the principal beneficiary's work					
d. evidence of participation as a judge or peer reviewer of other's work in the same or relevant academic					
e. evidence of original scientific, or scholarly research contributions of to the academic field					
f. evidence of authorship of scholarly articles or books in the field with international distribution					
g. peer-reviewed presentations at academic symposia					
h. testimonials (letters) from experts/organizations in the academic field					
i. citation index with number of entries citing the principal beneficiary's work as authoritative					
j. publication with footnote reference to principal beneficiary's work					
k. other evidence of international recognition as outstanding in an academic field					
9. Licenses and Permits (if job requires such),					
10. Copies of all prior applications and approval notices and denial notices, I-20, DS-2019, etc.					
11. Criminal Documents (if any)					
12. Copy of Prior Employment Authorization Card(s) (if any).					
13. Six passport photographs of the principal beneficiary and family members.					
14. Medical Examination from a Physician designated by US CIS					
US Entity:					
15. Certificate & Articles of Formation or of Incorporation (if Petitioner is a corporation or LLC)					
16. Share Certificate or Unit Certificate (if Petitioner is a corporation or LLC)					
17. Partnership Agreement (if Petitioner is a partnership)					
18. Assumed Name Certificate (if any)					
16. Copies of Lease Agreement and Assignment of Lease					
17. Organizational Chart					

18. Pictures of the Business/Office/Factory	
19. Copies of Bank Statements (last three months)	
20. Copies of Employer's Quarterly Reports	
21. Copies of Receipts and Invoices	
22. Copies of Advertisements	
23. Latest Tax Returns	
24. Latest Financial Statements ie: Income Statement/Balance Sheet	
25. Business Plan or Company Brochure (three copies)	