

**Part A - Beneficiary (Person being sponsored)**

|  |                |  |               |                                   |                 |               |
|--|----------------|--|---------------|-----------------------------------|-----------------|---------------|
| 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 # (if any)     |                 |               |
| 7) Desired Consular Office (City)  |                | 8) Name and Address in native language, if 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) Former spouse's full name (maiden)   |                | 21) Former spouse's Date, City and Country of Birth                      |               | 22) Date and Place of Marriage    |                 |               |
| 23) Beneficiary's residence last five years. List present address first.   |                |  |               |                                   |                 |               |
| Street and Number  |                | City   | State/Country | Zip Code                          | From month/year | To month/year |
|  |                |  |               |                                   |                 | Present       |
|  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
| 24) Beneficiary's last address outside the United States of more than one year.  |                |  |               |                                   |                 |               |
| Street and Number  |                | City   | State/Country | Zip Code                          | From month/year | To month/year |
|  |                |  |               |                                   |                 |               |
| 25) Beneficiary's Employment last five years (if none, so state). List present employment first.                                 |                |  |               |                                   |                 |               |
| Full name and address of employer  |                |  | Occupation    | From month/year                   | To month/year   |               |
|  |                |  |               |                                   | Present         |               |
|  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
| 26) Show below last occupation abroad if not shown above.  |                |  |               |                                   |                 |               |
| Full name and address of employer  |                |  | Occupation    | From month/year                   | To month/year   |               |
|  |                |  |               |                                   |                 |               |
| 27) List all the beneficiary's children's names, birth dates and birth countries.  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
| 28) Has the beneficiary been removed or deported, or had any other immigration problems? (if yes, please provide information)    |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
| 29) Has an immigration (green card) application been filed for the beneficiary in the past? (if yes, please provide information) |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
| 30) Has the beneficiary been arrested, charged, or had any dealings with police or had other criminal problems?                  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
| 31) Has the beneficiary been previously employed in the U.S.? (If yes, please provide information)                               |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |
| 32) Please list all previously issued visas and status:  |                |  |               |                                   |                 |               |
|  |                |  |               |                                   |                 |               |

33) Please list all previously refused visas and status:

34) Has the beneficiary previously applied for employment authorization? If so, when and where? Was it approved?

35) List all organizations and clubs that the beneficiary has belonged to in the past or belongs to currently.

36) Describe how the Petitioner and the Beneficiary met. Was a marriage broker involved?

37) Has anyone violated the terms of their immigration status or violated any immigration laws? (if yes, provide details)

38) Does anyone have or have had any communicable diseases or dangerous physical or mental disorder or drug/alcohol problems (if so please provide information):

39) Has beneficiary been in a military? (if yes provide, name of military (army, navy...) dates location and nature of service).

**Part B - Petitioner**

|   |               |   |               |                                   |                 |               |
|---|---------------|---|---------------|-----------------------------------|-----------------|---------------|
| 1) Full Name  |               | 2) City and Country of Birth                        |               | 3) Related to fiancé(e)?          |                 |               |
| 4) All Other Names Used (including maiden name)   |               | 5) A Number (if any)                                |               | 6) Social Security # (if any)     |                 |               |
| 7) Home Phone   | 8) Cell Phone | 9) Office Phone                                     | 10) Fax       | 11) E-mail                        |                 |               |
| 12) Father's full name  |               | 13) Father's Date, City and Country of Birth        |               | 14) City and Country of residence |                 |               |
| 15) Mother's full name (maiden)   |               | 16) Mother's Date, City and Country of Birth        |               | 18) City and Country of residence |                 |               |
| 18) Former spouse's full name (maiden)  |               | 19) Former spouse's Date, City and Country of Birth |               | 20) Date and Place of Marriage    |                 |               |
| 21) Petitioner's residence last five years. List present address first.                         |               |   |               |                                   |                 |               |
| Street and Number   |               | City  | State/Country | Zip Code                          | From month/year | To month/year |
|   |               |   |               |                                   |                 | Present       |
|   |               |   |               |                                   |                 |               |
|   |               |   |               |                                   |                 |               |
|   |               |   |               |                                   |                 |               |
| 22) Petitioner's last address outside the United States of more than one year.                  |               |   |               |                                   |                 |               |
| Street and Number   |               | City  | State/Country | Zip Code                          | From month/year | To month/year |
|   |               |   |               |                                   |                 |               |
| 23) Petitioner's Employment last five years (if none, so state). List present employment first. |               |   |               |                                   |                 |               |
| Full name and address of employer   |               |   | Occupation    | From month/year                   | To month/year   |               |
|   |               |   |               |                                   | Present         |               |
|   |               |   |               |                                   |                 |               |
|   |               |   |               |                                   |                 |               |
|   |               |   |               |                                   |                 |               |
| 24) Show below last occupation abroad if not shown above.                                       |               |   |               |                                   |                 |               |
| Full name and address of employer   |               |   | Occupation    | From month/year                   | To month/year   |               |
|   |               |   |               |                                   |                 |               |

**Part C - Needed Documents:**

**Beneficiary (and accompanying children):**

- |   |  |
|---|--|
| 1. Copy of I-94 and Passports for all individuals applying  |  |
| 2. Birth Certificate (or other Government issued Document showing birth record) of all applicants         |  |
| 3. Copies of all prior applications and approval notices and denial notices, I-20, etc. of all applicants |  |
| 4. Criminal Documents (if any) of all applicants  |  |
| 5. Passport Photographs of all applicants   |  |
| 6. Divorce Decree of the Beneficiary  |  |
| 7. Court or Government issued Document showing name change (if any)                                       |  |

**Petitioner:**

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|---|--|
| 8. Employment Verification Letters from the Petitioner's employers                  |  |
| 9. Petitioner' Bank Statements (last three months)                                  |  |
| 10. Income Tax Returns (last three years)   |  |
| 11. W-2, Paystubs, and Checks (last year)   |  |
| 12. Proof of U.S. Citizenship (Birth Certificate, Naturalizaiton Certificate, etc.) |  |
| 13. Passport Picture  |  |
| 14. Divorce Decree  |  |

**Documents showing that the Petitioner and the Beneficiary met and Documents showing relationship:**

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|--|--|
| 15. Plane Tickets, Flight Itenary, Boarding Passes, Passports  |  |
| 16. Pictures of the Petitioner and the Beneficiary together  |  |
| 17. Letters, e-mails, telephone records  |  |
| 19. If the couple have not physically met in the last two years, evidence of extreme hardship or cultural practice |  |