Law Office of William Jang, PLLC (512) 323-2333

FB2A (Spouse of Permanent Residents) Information Sheet (3/17)

	Р	art - 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	s Used (including maio	len name)	5) A (Alien) Number (if any)		6) Social Security Number (if any)	
7) If not in US, Desired Consular (City)		8) Name and addre	ess in native lan	guage, if not nati\ I	/e language is no	t roman.
9) Home Phone	10) Cell Phone	11) Office Phone	12) E-Mail			
3) Home I Home	10) Cell I Holle	11) Office I florie	12) L-IVIAII			
11) Height (feet)	12) Weight (pounds)	13) Eye Color	14) Hair Color	(if bald state so)	15) Race	
16) Father's full na	me	17) Father's Date, City and Country of Birth			18) City and Country of Residence	
19) Mother's full na	ame (maiden)	20) Mother's Date, City and Country of Birth			21) City and Country of Residence	
22) Current spouse	a's full name (maiden)	22) Place of Courset Marriage			24) Date of Current Marriage	
22) Current spouse	es full flame (maiden)	23) Place of Current Marriage			24) Date of Current Marriage	
25) Former spouse	e's full name (maiden)	26) Former spouse	's Date, City and	d Country of Birth	27) Date and Pla	ace of Marriage
					_	_
28) Beneficiary's re Street and Number		s. List present address first City State/Country Zip Code		Zip Code	From month/year	To month/year
Otroot and Ivambol		Oity	State/ Goarting	Zip Gode	monthly your	Present
29) Beneficiary's la	st address outside the	Linited States of m	ore than one ve	l ear	From	То
29) Beneficiary's last address outside the Street and Number		City	State/Country		month/year	month/year
						-
30) Beneficiary's Em Full name and add	ployment last five years ress of employer	(if none, so state). Lis	t present employ	ment first. Occupation	From month/year	To month/year
T dil Hallio dila dad	rode of employer			Осоцранон	monany oan	Present
31) Show below las	st occupation abroad i	f not shown above			From	То
Full name and add	•		Occupation	month/year	month/year	
	·			•		•
32) List all the bend children. Also inclu	eficiary's children's full de adult children.	name, birth dates a	and birth countri	es. Include step o	children and label	tnem as step

33) Has the benefic	iary been removed o	r deported or had ar	ny other immigra	ation problems? (if yes, please pro	vide information):
34) Has an immigra	ation (green card) app	olication been filed for	or the beneficiar	y in the past? (if	yes, please provi	de information):
35) Has the benefic	iary been arrested, cl	harged, or had any	dealings with po	lice or had other	criminal problems	s?
36) Has the benefic	iary been previously	employed in the US	? (If yes, please	e provide informa	tion):	
37) Please list all pr	eviously issued US v	isas.				
	·					
	eviously refused US					
39) Has the benefic	iary previously applie	d for employment a	uthorization in U	JS? If so, when a	and where? Was i	t approved?
40) List all organiza	tions, clubs, that bend	eficiary has belonge	ed to in the past	or belongs to cur	rently. On separa	te sheet please
41) Has Beneficiary	served in a military?	(if yes, provide, nar	me of military (a	rmy, navy), date	es location and na	ature of service.
		Part B - Petit	ioner's Informa	ntion:		
1) Full Name			2) City and Country of Birth		3) Prior relation to Spouse, if any	
4) All Other Names Used (including maiden name)			5) A Number (if any)		6) Social Security Number (if any)	
7) Home Phone	8) Cell Phone	9) Office Phone	10) E-Mail			
11) Height (feet)	12) Weight (pounds)	13) Eye Color	14) Hair Color	(if bald state so)	15) Race	
16) Father's full nar	l ne	17) Father's Date,	Lity and Country of Birth		18) City and country of residence	
19) Mother's full na	20) Mother's Date,)) Mother's Date, City and Country of Birth			21) City and country of residence	
22) Former spouse	's full name (maiden)	23) Former spouse	e's Date, City and	d Country of Birth	24) Date and Pla	ace of Marriage
				<u>a coaminy or 2min</u>		aco or marriago
25 Petitioner's resid	lence last five years.	List present address first			From	То
Street and Number		City	State/Country	Zip Code	month/year	month/year
						Present
26) Petitioner's last	address outside the l	L United States of mo	re than one yea	r	From	То
Street and Number		City	State/Country		month/year	month/year
27) Petitioner's Emplo	oyment last five years (i	L f none, so state). List	present employm	l ent first.	From	То
Full name and addr		,		Occupation	month/year	month/year
						Present
28) Show holow loo	t occupation abroad i	f not chown chove			From	То
Full name and addr		Occupation	month/year	month/year		
	. ,			,		-

29) Has the Petitioner ever filed another immigration petition? If yes, provide name, place, date and result of the	ne filing.			
30) Name all of your dependents including persons Petitioner has previously sponsored or co-sponsored for g	reen card.			
31) Has the Petitioner ever been convicted of any offenses against a minor? If so provide information.				
Part C - Needed Documents				
Beneficiary's Documents (and accompanying children)				
Passports for all individuals applying.				
Birth Certificate (or other Government Issued Document showing birth record) of all applicants				
3. Prior applications and approval notices and denial notices, I-94, I-20, etc.of all applicants				
Criminal Documents (if any) of all applicants				
5. Six Passport Photographs of all applicants FOR ADJUSTMENT ONLY				
6. Divorce Decree or Death Certificate or Annulment Decree ending all prior marriages.				
7. Medical Examination in a sealed envelope for all applicants. FOR ADJUSTMENT ONLY				
Court or Government Issued Document showing name change (if any)				
Petitioner's Documents				
9. Employment Verification Letters from the Petitioner's employers.				
10. Petitioner' Bank Statements (last three months)				
11. Income Tax Returns (last three years)				
12. W-2, 1099, Paystubs, and Checks (last year)				
13. Proof of U.S. Citizenship (Birth Certificate, Naturalizaiton Certificate, etc.)				
14. Petitioner's Birth Certifciate				
15 Two Passport Photographs of the Petitioner - FOR ADJUSTMENT ONLY				
16. Divorce Decree or Death Certificate or Annulment Decree ending all prior marriages.				
Documents Showing that the Petitioner and Beneficiary's relationship				
17. Marriage Certificate				
19. Pictures of Petitioner and Beneficiary together				
20. Letters, e-mails, telephone records showing communications between the Petitioner and Beneficiary				
21. Any documents showing joint residence of the Petitioner and Beneficiary, such as:				
a. employment or school documents				
b. medical documents (including: dentist, chiropractor, pharmacist, accupuncturist, etc.)				
c. deeds or leases				
d. utility bills and other 3rd party statements/bills (electric, water, cable, phone, credit card, bank etc.)				
e. insurance documents (health, life, property, etc.)				
f. children's birth certificates				
g. social media and other internet printouts (facebook, amazon shipping history, etc.)				
h. driver's licenses and other ID's showing address				

i. any other documents showing address and date, and names of Petitioner and/or Beneficiary.