

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 (Alien) 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) E-Mail		
11) Height (feet)	12) Weight (pounds)	13) Eye Color	14) Hair Color (if bald state so)	15) Race	
16) Father's full name		17) Father's Date, City and Country of Birth		18) City and Country of Residence	
19) Mother's full name (maiden)		20) Mother's Date, City and Country of Birth		21) City and Country of Residence	
22) Current spouse's full name (maiden)		23) Place of Current Marriage		24) Date of Current Marriage	
25) Former spouse's full name (maiden)		26) Former spouse's Date, City and Country of Birth		27) Date and Place of Marriage	
28) 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
29) 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
30) 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
31) Show below last occupation abroad if not shown above				From	To
Full name and address of employer			Occupation	month/year	month/year
32) List all the beneficiary's children's full name, birth dates and birth countries. Include step children and label them as step children. Also include adult children.					

- 33) Has the beneficiary been removed or deported or had any other immigration problems? (if yes, please provide information):
- 34) Has an immigration (green card) application been filed for the beneficiary in the past? (if yes, please provide information):
- 35) Has the beneficiary been arrested, charged, or had any dealings with police or had other criminal problems?
- 36) Has the beneficiary been previously employed in the US? (If yes, please provide information):
- 37) Please list all previously issued US visas.
- 38) Please list all previously refused US visas.
- 39) Has the beneficiary previously applied for employment authorization in US? If so, when and where? Was it approved?
- 40) List all organizations, clubs, that beneficiary has belonged to in the past or belongs to currently. On separate sheet please
- 41) Has Beneficiary served in a military? (if yes, provide, name of military (army, navy...), dates location and nature of service.

Part B - Petitioner's Information:

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 name		17) Father's Date, City and Country of Birth		18) City and country of residence	
19) Mother's full name (maiden)		20) Mother's Date, City and Country of Birth		21) City and country of residence	
22) Former spouse's full name (maiden)		23) Former spouse's Date, City and Country of Birth		24) Date and Place of Marriage	
25) Petitioner's residence last five years. List present address first				From	To
Street and Number		City	State/Country	Zip Code	month/year
					Present
26) Petitioner's last address outside the United States of more than one year				From	To
Street and Number		City	State/Country	Zip Code	month/year
27) Petitioner'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
28) Show below last occupation abroad if not shown above				From	To
Full name and address of employer			Occupation	month/year	month/year

29) Has the Petitioner ever filed another immigration petition? If yes, provide name, place, date and result of the filing.

30) Name all of your dependents including persons you have previously sponsored or co-sponsored for green 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)

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| 1. Passports for all individuals applying. | |
| 2. 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 | |
| 4. 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 | |
| 8. Court or Government Issued Document showing name change (if any) | |

Petitioner's Documents

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| 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, Naturalization Certificate, etc.) | |
| 14. Petitioner's Birth Certificate | |
| 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

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| 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, acupuncturist, 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. | |