

## Immigration Consultation

## **Personal Information**

Name:		
	First:	Middle:
Other names used (including ma		
<b>Current Address in U.S.</b>		
Number and Street:		
City:		Zip:
Last Address Outside of U.S.		
Number and Street:		
City:	State:	Zip:
Contact Information:		
Home Phone:		Work Phone:
Hours we can call:		Hours we can call:
Fax Number:		Pager/Cell Phone:
Social Security No.:		Citizen of:
Date and Place of Birth:		Passport Information:
Date of Birth:		Passport Country:
City or Town:		Passport Number:
State or Province:		Expiration Date:
Country:		
What type of immigration assi	stance are you so	eeking?
	Family In	formation
Husband or Wife: □ In the U	J.S. □ Out	tside of U.S.   Unmarried
Spouse's Name:		
•	First:	Middle:
		er):
Date and Place of Birth:		Social Security Number:
Date and Place of Marriage:		Alien ("A") Number:
Citizen of:		Immigration Status:
Applying with you?		Expiration Date:

Children:										
		and Daughters: Ex Date & Country of Birth				Immigration Status		Expiration Date		Applying w/ you?
Parents:										
Name		C	Country o	of Birth		Citizen	of	Immi	gratio	n Status
Your Father:										
Your Mother*:										
Spouse's Father:										
Spouse's Mother*:										
*Use Mothers Maiden N	Vame									
Previous Marriages Name	s: (□ 0 Date Marri	of Cour		cable) Kids?		son for nination	Date Term	e of ination		ntry of nination
Yours:					of M	Iarriage	of M	Iarriage	of M	Iarriage
Spouse's:										
			Immig	ration	Histo	ry				
Current Immigration	Status	:	Date St	tatus Ex	pires:		Alien	("A") N	umbei	r: _
Date of First Entry	into U.S	S.:	Last Er	ntry into	U.S.:		I-94 N	lumber:		
Circle every type of	-		•				-	the date	es:	
Immigration Status	3	Date(s)				gration S			Date	e(s)
B Visitor:						ader/Inves				
F Student:  J Exchange Visitor:					H-1B K Fia	Professioncée:	mai:			
L Manager:						incee. itstanding	Ability	,·		
L Manager. T/N Canadian Work	er.				Other	_	1101111	•		

Write Y or S for each one th	at you or your spo	ouse have ever applied	for or been the beneficiary
Y (you) or	Date Filed	Sponsor Att	torney Result
S (Spouse)			
Green Card			
Immigrant Petition	<del></del>		
Labor Certification			
Asylum			
Amnesty			
Have you or your spouse ever spouse even been under remov (attach a separate sheet if no	val, deportation, or o		
	Employ	ment History	
Current Employer (or Em-	alovon Dotitionina	on Vour Poholf	
Current Employer (or Emp Employer:	. •		
A 11			_
Job Title:			_
Date of Hire:			
May we contact your emplo	•	• •	J
If yes, whom may we contact	<del>-</del>		
Name	Title	Department	Phone Number
Employment in Last Five Y	Years (anywhere i	n the world)	
Job Title	Employer	Country	Duration
Job Qualifications			
	or cartifications v	ou possess, from any	state or country:
List the professional licenses	of certifications y		
List the professional licenses			
List the professional licenses	of certifications y		
List the professional licenses	of certifications y		

## **Educational Background**

Please list <u>all</u> your <b>Level</b> College/University: College/University: College/University: College/University: Other Schooling:	education anywhere in School/Country	Degree & Major	Number of Years	Graduate?
		IER INFORMATION		
•		· · · · · · · · · · · · · · · · · · ·	in the world (even if the had <u>any</u> problems with	
If yes, please expla	in <b>in detail</b> :			
	med to be a citizen of	the United States?		
If yes, please explain	in <b>in detail</b> :			
Have you ever used	l another name for imi	migration purposes or	for any other reason?	
If yes, please expla	in <b>in detail</b> :			
				<del> </del>

Have you ever been denied a visa to come to the United States?	
If yes, please explain in detail:	
During what years, if any, have you filed an Income Tax Return with the IRS?	
If you ever had an Employment Authorization Card issued by the INS, give number(s) and valid dates:	lity
Is there anything, not already covered in this form, that you feel we should know? (Please u last page if you need more space.)	se the
STATEMENT OF TRUTHFULNESS  "By signing below, I certify that all of the information contained in this form is true and correct to the best of my knowledge"	et
Signature Date	

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