## OFFICE OF REFUGEE RESETTLEMENT

INFORMATION REQUIRED FOR BACKGROUND CHECK															
		INFUR	IVIA I	IOI	1 KE	QUI	IKED								
CHILD'S NAME:							CHILD'S A# (to be completed by facility):								
CDONICODIC INI	CODATABLE	NAT.										DATE OF	DIF	ATT T	
SPONSOR'S INFORMATION:  Last Name			Firet	Einst Name					Nama	(Suffix)		DATE OF Month	BIR	Day	Year
Last Name	Last Name			First Name				Middle	ıvanıc	(Sullix)		MIDITUI		Day	1 cai
SEX: MALE ( ) FEMALE				Race				Eye Color			SOCIAL SECURITY NUMBER (optional)*				
Height			Weight				Hair Color				Т	(optional)			
PLACE OF BIRTH: (Use two letter code for State)															
City County						Т	State		(	Country					
	County														
OTHER NAMES	S USED ANI														
Name		From			To			Name				om		To	
RESIDENCES II	VI ACT E V		th Yea	r	Montl	n Yea	ar				M	onth Year		Mont	h Year
	h/Year	Street Ad	dress							City	Com	ntry)		State	Zip Code
TROM: Mon	ii/ I cai	Apt. #							City (Country)			iti y)			Zip Code
TO: Mont	h/Year														
FROM: Mont	h/Year	Street Address							City (	City (Country)			State	Zip Code	
TO: Mont	h/Year	Apt. #													
FROM: Mont	h/Year	Street Address								City (Country)				State	Zip Code
		Apt. #													
TO: Mont	h/Year														
FROM: Mont	h/Year	Street Address Apt. #							City (Country)			ntry)		State	Zip Code
TO: Mont	h/Year														
UNITED STATE			sponso	r is a	U.S. C	itizen	, but was	not born	in the	U.S., pro	vide i	nformation	abou	it one or m	ore of the
following proofs		).													
Naturalization Certificate															
Court City			У	Stat   Certif   e				icate Number			Mo	Month/Day/Year Issued			
						e									
Citizenship Certi	ificate (Whe	re was the	certific	cate is	ssued?	)									
City	•					Stat   Certificate Number						Mo	nth/I	Day/Year I	ssued
						e									
State Department Form 240 – Report of Birth Abroad of a Citizen of the United States															
Give the date the form   Month/Day/Year   Explanation															
was prepared and give															
an explanation if															
needed.															
U.S. Passport  This was be side as a support of passed Newsberg March (Dec (New Land))															
This may be either a current or previous U.S. Passport Number Month/Day/Year Issued Passport															
<b>DUAL CITIZENSHIP</b> - If subject is <i>(or was)</i> a dual citizen of the United States and another country, provide the name of that country in the space to the right.															
c. ALIEN If subject is an alien, provide the following information:															
the United	City	State Date Entered U.S. Alien Registration Number Country of Citized Month Day					шленашр								
States					Ye								ĺ		

## OFFICE OF REFUGEE RESETTLEMENT

* The provision o	f the Social Security Number is	not mand	atory. However, if not provide	d, ORR may be unable to complete t	he background check necessary
for the reunificati	on procedure.				