



**U.S. Department of State**  
 Bureau of Population, Refugees and Migration  
**SPECIAL IMMIGRANT VISA BIODATA FORM**

OMB APPROVAL NO. 1405-0015  
 EXPIRES: 12/31/2008  
 ESTIMATED BURDEN: 20 MIN.

Special immigrant visa applicants who qualify for and request resettlement assistance from the Department of State must complete this form for each family member and submit it via email as a scanned attachment to the National Visa Center at NVCSIV@state.gov .

**A. CASE INFORMATION** *(To be completed by NVC)*

|                 |               |                      |
|-----------------|---------------|----------------------|
| NVC Case Number | Assigned Post | Post POC Information |
|-----------------|---------------|----------------------|

**B. CASE MEMBER**

|   |  |   |
|---|--|---|
| 1. Case Size <i>(Yourself plus family members traveling with you)</i> | 2. Are you the principal applicant (PA)?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 3. If not, what is your relationship to the PA? <i>(Husband, wife, son, daughter)</i> |
|---|--|---|

|   |   |
|---|---|
| 4. Name as it Appears on your Passport <i>(Last, First, Middle)</i> | 5. Sex<br><input type="checkbox"/> Male <input type="checkbox"/> Female |
|---|---|

|                   |                                      |  |
|-------------------|--------------------------------------|--|
| 6. Marital Status | 7. Date of Birth <i>(mm-dd-yyyy)</i> | 8. Place of Birth <i>(City, Country)</i> |
|-------------------|--------------------------------------|--|

|                |               |              |
|----------------|---------------|--------------|
| 9. Nationality | 10. Ethnicity | 11. Religion |
|----------------|---------------|--------------|

12. Physical Address

13. Phone Number(s)

14. Email

15. Last Occupation/Skill

16. Education Level/Field of Study

17. Native Language

18. Other Language(s)

|  |  |
|--|--|
| 19. English Speaking Ability <i>(Good, Some, None)</i> | 20. Health Problems <i>(Condition, Treatment, Urgency, Comments)</i> |
|--|--|

