



IRAQI CITIZENS AND NATIONALS EMPLOYED BY U.S. FEDERAL CONTRACTORS, GRANTEES AND COOPERATIVE AGREEMENT PARTNERS

A completed DS-7655 is needed for each Iraqi citizen and national employed under a Department of State prime contract, prime grant or prime cooperative agreement including for Iraqis employed under related contracts, subcontracts or subgrants issued for work performed in IRAQ. Please attach a digital passport-size photo of the employee and type responses in the space provided below.

Employee

1. Family/Tribal Name

(Please list all variations)

2. First and Middle Names

(Please list all variations)

3. Date of Birth (dd mmm yyyy ~ eg: 01 JAN 1970)

4. Gender

Male

Female

Please attach a digital passport-size photo here with a full frontal view of the employee's face.

Digital photos should be in .tif or .bmp file formats only.

Family

5. Father's Full Name (Family/Tribal Name, First and Middle Names)

(Please list all variations)

6. Mother's Full Name (Family/Tribal Name, First and Middle Names)

(Please list all variations)

7. Grandfather's Full Name (Family/Tribal Name, First and Middle Names)

(Please list all variations)

Employment

8. Name of Employer

9. Employer Human Resources Point of Contact

(Please list name, email, and phone number)

10. Employee Supervisor (Most recent)

(Please list name, email, and phone number)

11. Dates of Employment (dd mmm yyyy ~ eg: 01 JAN 1970)

From

To

From

To

From

To

Location of Employment

Employee Badge Number

12. Was this employee terminated for cause? If YES, please provide reason for termination in Section 13 below.

Yes

No

13. Comments

Confidentiality Statement and Paperwork Reduction Act Statements

CONFIDENTIALITY STATEMENT:

The information solicited on this form is requested pursuant to Section 1248 of the Refugee Crisis in Iraq Act of 2008 included in the National Defense Authorization Act of 2008 (P.L. 110-181). The primary purpose for soliciting the information is to verify the employment of Iraqi citizens and nationals by Federal contractors, grantees and cooperative agreement partners. The information solicited on this form will be used by the Departments of State and Homeland Security to adjudicate refugee, asylum, special immigrant visa, and other immigration claims and applications. Failure to provide the information requested on this form may result in delay or denial of application or claim.

PAPERWORK REDUCTION:

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: PRM/A, 2025 E Street, NW, SA-9, 8th floor, Washington, DC 20522-0908.