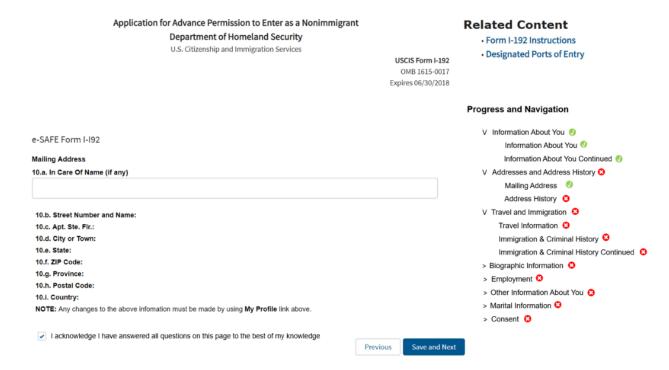
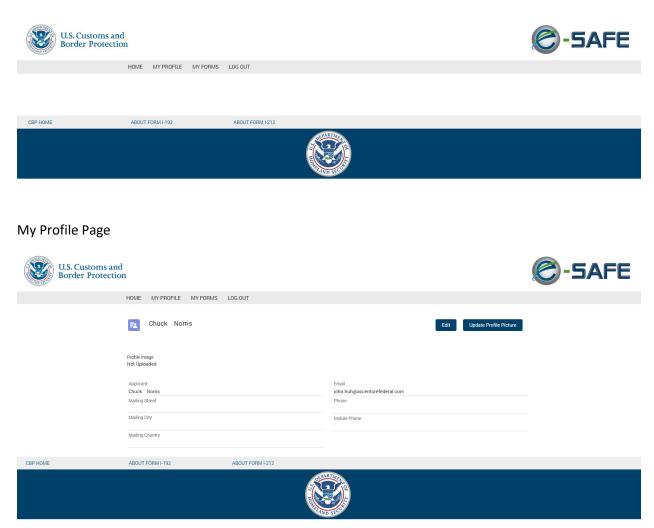
Assumptions and Changes yet to be Implemented

- 1. All footer sizes are the same width
 - a. Due to different page sizes, the footer may look distorted; the online version is uniform.
- 2. Internal Home page is awaiting feedback before implementation.
- 3. Nested Tree Addition / Acknowledgement Checkbox / Navigation Bar Removal change is being made.



- 4. Verbiage on the last Consent page with the 'Finish Application' button
 - a. This will include more than one sentence so that the applicant knows in detail how to proceed and complete their application.
- 5. Updated fonts on all screens to follow the CBP style guide
 - a. Plan to use the CBP style guide font recommendations to stay consistent with other CBP webpages.

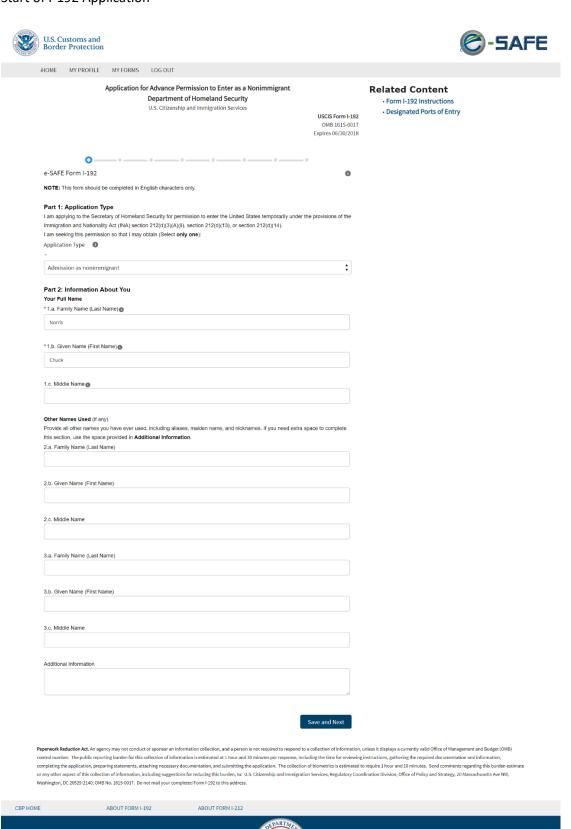
Internal Landing Page





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Start of I-192 Application







Application for Advance Permission to Enter as a Nonimmigrant

Department of Homeland Security U.S. Citizenship and Immigration Services

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USCIS Form I-192 OMB 1615-0017 Expires 06/30/2018

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Other Information		
4. Alien Registration Number (A-Number) (if any)		
5. USCIS Online Account Number (if any)		
6. Date of Birth (mm/dd/yyyy)		
		苗
7. Gender 🕕		
		;
Place of Birth		
8.a. City or Town		
8.b. State or Province		
		;
8.c. Country		
9. Country of Citizenship		
	Previous S	ave and Next

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e-SAFE Form I-192			
Mailing Address			
10.a. In Care Of Name (if any)			
10.b. Street Number and Name:			
10.c. Apt. Ste. Fir.:			
10.d. City or Town:			
10.e. State:			
10.f. ZIP Code:			
10.g. Province:			
10.h. Postal Code:			
10.i. Country:			
NOTE: Any changes to the above infomation must be made by using My Profile link above.			
	Previous	Save and Next	

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-0-**0** –

e-SAFE Form I-192

Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Also provide the dates of residence, indicating when you lived at the location listed. If you are unsure of the exact date, provide the closest approximate date to the best of your knowledge. Provide your current address first.

Is your current Physical Address the same as your Mailing Address? YES NO

When you have entered all of your addresses, click $\ensuremath{\mathsf{Next}}$ to go to the next section.

Previous Save and Next

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e-SAFE Form I-192		
Travel Information Location at Which you Plan to Enter the United States (desired Port-of-Entry)		
*20.a. City		
20.b. State		
		;
21. Port-of-Entry		
Area Port of Blaine		
* 22. How do you plan to travel to the United States? (For example, by plane, ship, car)		
*23. When do you plan to enter the United States? (mm/dd/yyyy).		
		ä
*24. Approximate Length of Stay in the United States		
*25. What is the purpose of your stay in the United States? Explain fully below.		
	Previous	Save and Next

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mmigration and Cr	iminal History			
26. Do you believe that	you may be inadmissible to the United States?			
	o Item Number 26., explain the reasons why you believe, according to the best of your knowledge, that yo Additional Information. If you were told that you are inadmissible, provide the reason you were given.			
27. Have you previously	y filed an application for advance permission to enter the United States as a nonimmigrant?			
f you answered "Voe" to	oltem Number 27., provide the details in Items 28 29.e. If you need extra space to complete this section			
	in Additional Information.			
	in Additional Information.			
use the space provided 28. Date Application File	in Additional Information.			
use the space provided 28. Date Application File	in Additional Information. Ind (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry)			
use the space provided 28. Date Application File	in Additional Information. Ind (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry)			
use the space provided 28. Date Application File 25. Date Application File 26. Date Application File 26. Date Provided P	in Additional Information. Ind (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry)			
use the space provided 28. Date Application File 25. Date Application File 26. Date Application File 26. Date Provided P	in Additional Information. In (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry)			
use the space provided 28. Date Application File 28. Date Application File 29. Date Application File 29. Date Application File 29. USCIS Office or U 29. Date City or Town	in Additional Information. Ind (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry)			
use the space provided 28. Date Application File 28. Date Application File 29. Date Application File 29. Date Application File 29. USCIS Office or U 29. Date City or Town	in Additional Information. In (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry)			
use the space provided 28. Date Application File 28. Date Application File 29.a. USCIS Office or U 29.b. City or Town 29.c. State or Province 29.d. Country	in Additional Information. Id (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry) S.S. Port-of-Entry			
use the space provided 28. Date Application File 28. Date Application File 29.a. USCIS Office or U 29.b. City or Town 29.c. State or Province	in Additional Information. Id (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry) S.S. Port-of-Entry			
use the space provided 28. Date Application File 28. Date Application File 29.a. USCIS Office or U 29.b. City or Town 29.c. State or Province 29.d. Country	in Additional Information. Id (mm/dd/yyyy) If your application (for example, USCIS Office or Port-of-Entry) S. Port-of-Entry If available)			

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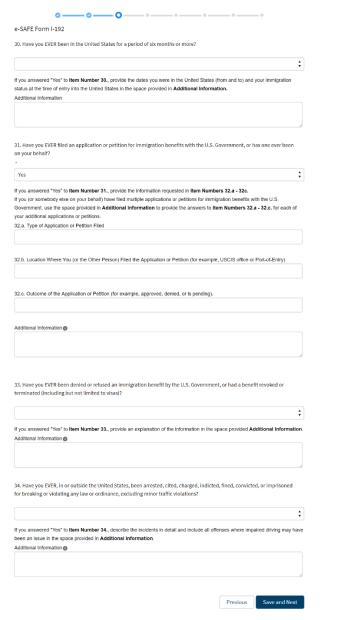


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Department of Homeland Security U.S. Citizenship and Immigration Services

USCIS Form I-192

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0e-SAFE Form I-192 Part 3. Biographic Information 1. Ethnicity (Select one) Race (Use Ctrl Click to Choose all that apply) White Asian Black or African American American Indian or Alaska Native Native Hawaiian or Other Pacific Islander

Application for Advance Permission to Enter as a Nonimmigrant

control number. The public reporting burden for this collection of information is estimated at 1 hour and 30 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application, preparing statements, attaching necessary documentation, and submitting the application. The collection of biometrics is estimated to require 1 hour and 10 minutes. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0017. Do not mail your completed Form I-192 to this address.

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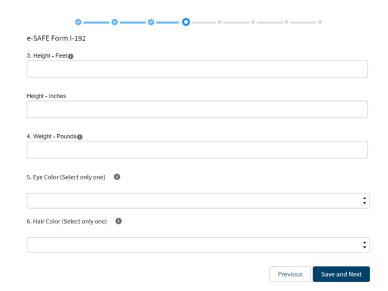




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 $Provide\ your\ employment\ history\ for\ the\ last\ five\ years,\ whether\ inside\ or\ outside\ the\ United\ States.\ Provide\ the\ most$ recent employment first.

No Employers Have been entered.

Add an Employer

When you have entered all of your Employers, click Next to go to the next section.

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nformation About Your Parents	
nformation About Your Mother	
Nother's Legal Name	
.a. Family Name (Last Name)	
b.b. Given Name (First Name)	
,	
.c. Middle Name	
io. mode fulle	
flother's Name at Birth (if different than above)	
0.a. Family Name (Last Name)	
0.b. Given Name (First Name)	
0.c. Middle Name	
o.c. widdle Name	
1. Date of Birth (mm/dd/yyyy)	
	苗
2. City or Town of Birth	
3. Country of Birth	
4. Current City or Town of Residence (if living)	
.5. Current Country of Residence (if living)	

Paperwork Reduction Act. An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 1 hour and 30 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application, preparing statements, attaching necessary documentation, and submitting the application. The collection of biometrics is estimated to require 1 hour and 10 minutes. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0017. Do not mail your completed Form 1-192 to this address.







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nformation About Your Father	
ather's Legal Name	
6.a. Family Name (Last Name)	
6.b. Given Name (First Name)	
6.c. Middle Name	
ather's Name at Birth (if different than above)	
7.a. Family Name (Last Name)	
7.b. Given Name (First Name)	
7.c. Middle Name	
Date of Birth (mm/dd/yyyy)	
	í
O Ohio Tara d Dirt	
9. City or Town of Birth	
0. Country of Birth	
Current City or Town of Residence (if living)	
2. Current Country of Residence (if living)	

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------· • e-SAFE Form I-192 Information About Your Marital History 23. What is your current marital status? 24. How many times have you been married (including and

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Part 5. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

- Applicant's Contact Information 3. Applicant's Daytime Telephone Number:
- 4. Applicant's Mobile Telephone Number (if any):
- 5. Applicant's Email Address (if any):

iohn.huh@accenturefederal.com

NOTE: Any changes to the above infomation must be made by using My Profile link above.

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 ${\sf Click \, Finish \, to \, review \, your \, application, upload \, the \, required \, documents, and \, proceed \, to \, certification \, and \, payment.}$

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