DS-260 IV Application



October 2019

Bureau of Consular Affairs Consular Systems and Technology

Sign In Page CEAC IV App (Version 1.4) Deployed to production on October 12th 2019

Version Changes:

- Addition of new question and fields for additional phone numbers on the Address and Phone page.
- Addition of new question and fields for additional email addresses on the Address and Phone page.
- Addition of new question and fields for Social Media providers not listed in dropdown on the Address and Phone page.
- Addition of screen displaying current Social Media provider options on the Address and Phone page.
- Addition of new question and fields for travel history on W/E/T Additional Page.
- Addition of Terrorist Activity question on Security and Background Page.
- Addition of Deportation question on Security and Background Page.
- Addition of FBI fingerprinting system paragraph to Sign and Submit page.
- Addition of Medical Examination paragraph to Sign and Submit page.
- Addition of electronic pamphlet for applicants from countries where female genital mutilation/cutting (FGM/C) is prevalent to Sign and Submit page.
- Clarification for electronic signature language to Sign and Submit page.
- Removal of bolded headings in the Confidentiality Statement, text remains unchanged otherwise.

Note: The overall classification of this document is SENSITIVE BUT UNCLASSIFIED.

CEAC IV Form DS-260

1

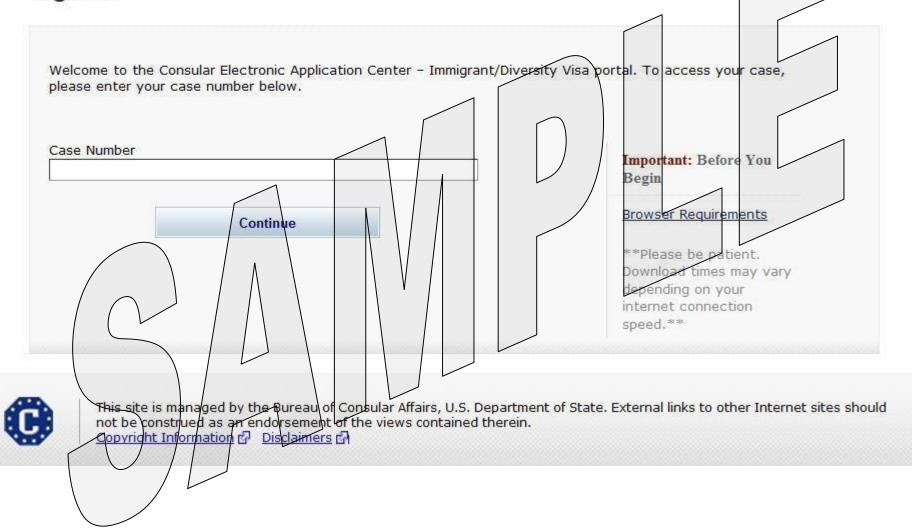
Sign In Page

U.S. DEPARTMENT of STATE CONSULAR ELECTRONIC APPLICATION CENTER

Contact Us

Immigrant Visa

Sign In



CEAC IV Form DS-260

Sign In Page

nmigrant Visa	
ign In	
Enter the Invoice ID Number that the National Visa Center sent you I am the Invoice ID Number that the National Visa Center sent Vou	ant: Before You ant: Before You ar Requirements se be patient. bad times may epending on your t connection

CEAC IV Form DS-260

Sign In Page

	Contact
U.S. DEPARTMENT of STATE	
CONSULAR ELECTRONIC APPLICATION CENTER	
Immigrant Visa	
Sign In	
Welcome to the Consular Electronic Application Center - Immigrant/Diversity, case, please enter your case number below. Please do not use the browser's back or refresh buttons while using the navigation links on the page. You will lose information if you use refresh button, and will need to log back into the application. Case Number Case Number CSB2011552014 Enter the Invoice ID Number that the National Visa Center sent you 00002/548293 I am the - SEL ECT ONE - SEL ECT ONE - THIPD-PARTY AGENT Enter the characters as shown:	the CEAC site. Instead, use
Continue	

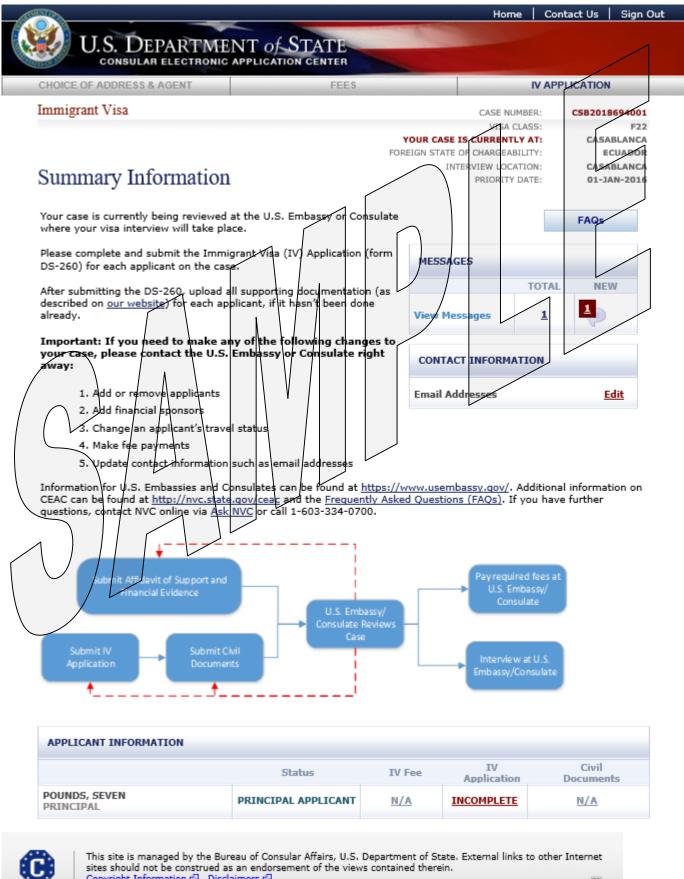
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Summary Information Page

Example of a piVot case Summary page.

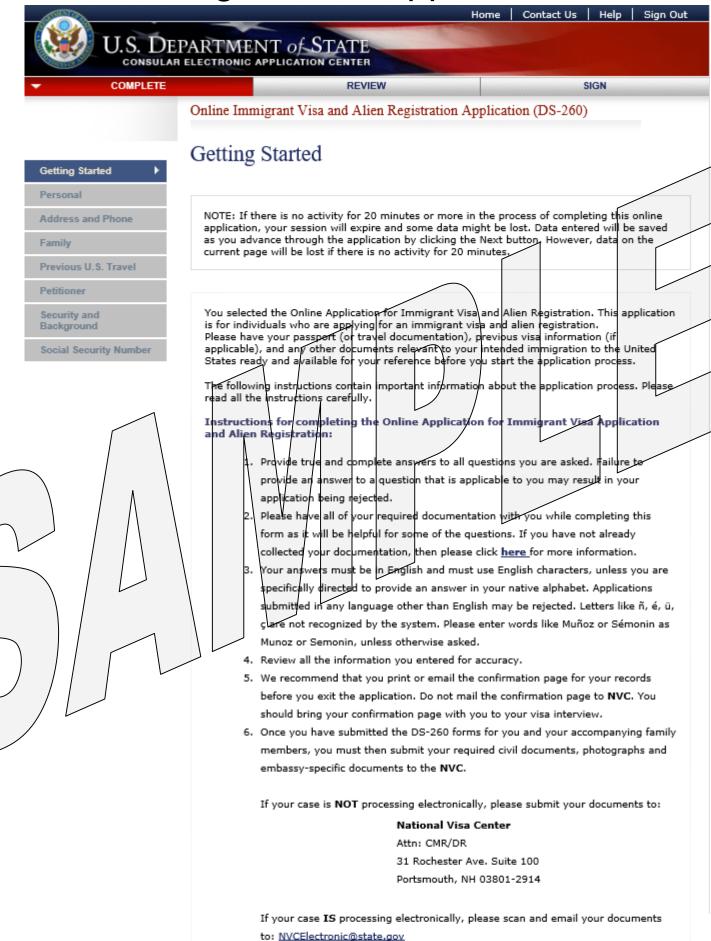


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(04)

CEAC IV Form DS-260

Getting Started Page – Immigration Visa and Alien Registration Application



If your application is rejected or denied for any of the above reasons you may be required to pay the application fee a second time.

NOTICE: SECTION 222(e) OF THE IMMIGRATION AND NATIONALITY ACT [8 U.S.C. 1202(e)] REQUIRES THAT THE APPLICANT FOR AN IMMIGRANT VISA AND ALIEN REGISTRATION SIGN THIS APPLICATION IN THE PRESENCE OF A CONSULAR OFFICER AND VERIFY THE ANSWERS PROVIDED ON THEIR APPLICATION UNDER OATH. YOU WILL BE REQUIRED TO COMPLY WITH SECTION 222(e) AT THE TIME OF YOUR INTERVIEW.

I certify that I have read and understand the above. I am now ready to begin the immigrant visa and alien registration application process.

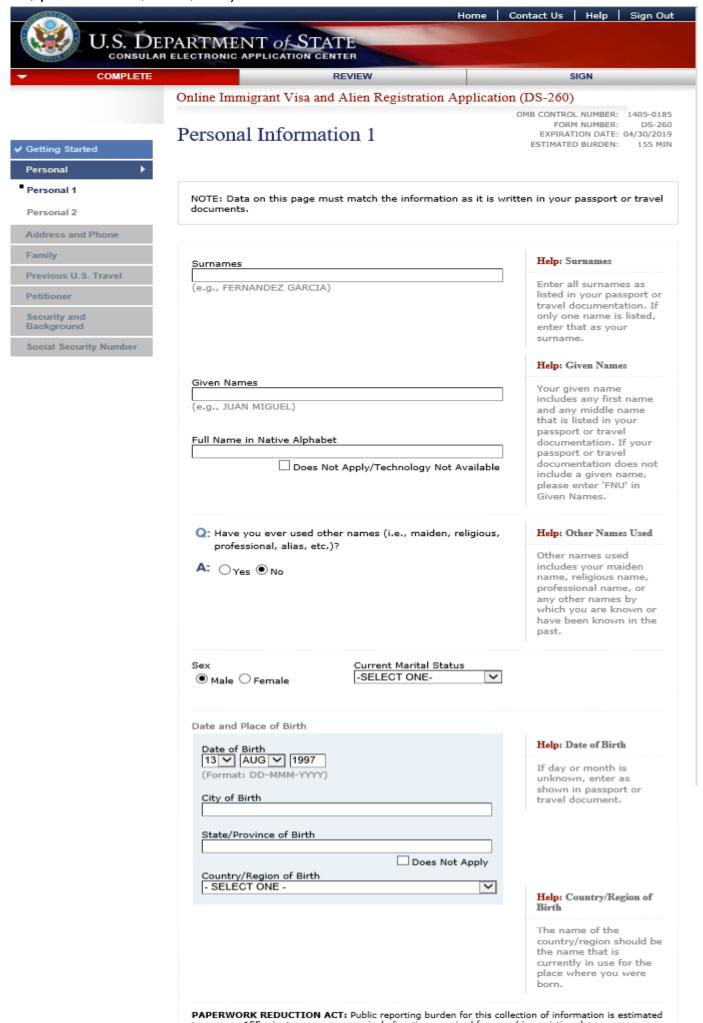
Cont	inue	



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CEAC IV Form DS-260

Displayed for all applicants. Answered 'No' to the question "Have you ever used other names (i.e., maiden, religious, professional, alias, etc.)?".



gathering the necessary documentation, providing the required of 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: <u>PRA_BurdenComments@state.gov</u>

CONFIDENTIALITY STATEMENT: The information asked for on this form is requested pursuant to Section 222 of the Immigration and Nationality Act. Section 222(f) provides that the records of the Department of State and of diplomatic and consular offices of the United States pertaining to the issuance and refusal of visas or permits to enter the United States shall be considered confidential and shall be used only for the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States. Certified copies of such records may be made available to a court provided the court certifies that the information contained in such records is needed in a case pending before the court. The U.S. Department of State uses the facts you provide on this form primarily to determine your classification and eligibility for a U.S. immigrant visa. Individuals who fail to submit this form or who do not provide all the requested information may be denied a U.S. immigrant visa. Although furnishing this information is voluntary, failure to provide this information may delay or prevent the processing of your case. If you are issued an immigrant visa and are subsequently admitted to the United States as an immigrant, the Department of Homeland Security will use the information to issue a social security number. The information provided may also be released to federal agencies for law enforcement, counterterrorism and homeland security purposes; to Congress and courts within their sphere of jurisdiction; and to other federal agencies who may need the information to administer or enforce U.S. laws.





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CEAC IV Form DS-260

Displayed for all applicants. Answered 'Yes' to the question 'Have you ever used other names (i.e., maiden, religious, professional, aliases, etc.)?'.

CEAC IV Form DS-260

	PARTMENT of STATE	
CONSULAT	R ELECTRONIC APPLICATION CENTER	SIGN
COMPLETE	Online Immigrant Visa and Alien Registration Applicatio	
ng Started	Personal Information 1	OMB CONTROL NUMBER: 1405-018 FORM NUMBER: DS-26 EXPIRATION DATE: 04/30/201 ESTIMATED BURDEN: 155 MI
onal 1	NOTE: Data on this page must match the information as it is we documents.	ritten in your passport or travel
ess and Phone		
У	S	Help: Surnames
ous U.S. Travel	Surnames POUNDS	Enter all surnames as
ity and ground I Security Number	(e.g., FERNANDEZ GARCIA)	listed in your passport or travel documentation. If only one name is listed, enter that as your surname.
		Help: Given Names
	Given Names SEVEN	Your given name includes any first name
	(e.g., JUAN MIGUEL)	and any middle name that is listed in your
	Full Name in Native Alphabet	passport or travel documentation. If your
	Does Not Apply/Technology Not Available	passport or travel documentation does not include a given name, please enter 'FNU' in Given Names.
	Q: Have you ever used other names (i.e., maiden, religious, professional, alias, etc.)?	Help: Other Names Used
	A: ⊚ _{Yes} ⊖ _{No}	Other names used includes your maiden name, religious name, professional name, or any other names by which you are known or have been known in the past.
	Provide the following information:	Help: Other Names
	Other Surnames Used (maiden, religious, professional, aliases, etc.)	If you only have other surnames to enter, enter the same given names as above. If you only
	Other Given Names Used	have other given names to enter, enter the same surname as above.
	Add Another Remove	
	Sex Current Marital Status Male Female -SELECT ONE-	
	Date and Place of Birth	
	Date of Birth	Help: Date of Birth
	(Format: DD-MMM-YYYY) City of Birth	If day or month is unknown, enter as shown in passport or travel document.
	State/Province of Birth	
	Country/Region of Birth - SELECT ONE -	Help: Country/Region of
		Birth The name of the country/region should be the name that is currently in use for the place where you were

PAPERWORK REDUCTION ACT: Public reporting burden for this collection of information is estimated to average 155 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: <u>PRA_BurdenComments@state.gov</u>

CONFIDENTIALITY STATEMENT: The information asked for on this form is requested pursuant to Section 222 of the Immigration and Nationality Act. Section 222(f) provides that the records of the Department of State and of diplomatic and consular offices of the United States pertaining to the issuance and refusal of visas or permits to enter the United States shall be considered confidential and shall be used only for the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States. Certified copies of such records may be made available to a court provided the court certifies that the information contained in such records is needed in a case pending before the court. The U.S. Department of State uses the facts you provide on this form primarily to determine your classification and eligibility for a U.S. immigrant visa. Individuals who fail to submit this form or who do not provide all the requested information may be denied a U.S. immigrant visa. Although furnishing this information is voluntary, failure to provide this information may delay or prevent the processing of your case. If you are issued an immigrant visa and are subsequently admitted to the United States as an immigrant, the Department of Homeland Security will use the information on this form to issue you a Permanent Resident Card, and, if you so indicate, the Social Security Administration will use the information to issue a social security number. The information provided may also be released to federal agencies for law enforcement, counterterrorism and homeland security purposes; to Congress and courts within their sphere of jurisdiction; and to other federal agencies who may need the information to administer or enforce U.S. laws.





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CEAC IV Form DS-260

Displayed for all applicants. Answered "Passport" for "Document Type". Answered 'No' to the question 'Do you hold or have you held any nationality other than the one you have indicated above?'.

ALL	Home 0	Contact Us Help Sign O
U.S. DI	EPARTMENT of STATE	
	R ELECTRONIC APPLICATION CENTER	SIGN
	Online Immigrant Visa and Alien Registration Application (I	DS-260)
Application List		
Getting Started	Personal Information 2	
Personal 🕨		
Personal 1	Country/Region of Origin (Nationality)	
Personal 2	- SELECT ONE -	
Address and Phone		
Family	Provide the following information on your travel documentation:	
Previous U.S. Travel	PASSPORT V	Help: Travel Documentation
Work / Education /	Document ID	
Training		Enter the information on the travel document you
Petitioner	Country/Authority that Issued Document	will be using when traveling to the U.S. Your
Security and	- SELECT ONE -	travel document should be a valid, unexpired
Background	Issuance Date Expiration Date	passport or other valid, unexpired documentation
Social Security Number		that is sufficient to
	(Format: DD-MMM-YYYY) (Format: DD-MMM-YYYY)	establish your identity and nationality.
	Q: Do you hold or have you held any nationality other than the one you have indicated above?	Help: Other Country/Region of Origin (Nationality)
	A: Cyes INO	Enter all nationalities you
		currently hold and all nationalities you have
		previously held, regardless of whether
		you have formally and/or
		legally relinquished the nationality. If the country
		where you previously held nationality is no
		longer a political entity or
		country, select the nationality that
		corresponds with the name of the country that
		is currently used for that location.





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CEAC IV Form DS-260

Displayed for all applicants. Answered "Other Travel Document" for "Document Type". Answered 'Yes' to the questions 'Do you hold or have you held any nationality other than the one indicated in question above on nationality?' and 'answer "No" to the question " Do you hold a passport for the other nationality above?'.

	Home C	Contact Us Help Sign (
U.S. DE	PARTMENT of STATE	
	R ELECTRONIC APPLICATION CENTER	
COMPLETE	REVIEW	SIGN
pplication List	Online Immigrant Visa and Alien Registration Application (D	DS-260)
Setting Started	Personal Information 2	
Personal 🕨		
Personal 1		
Personal 2	Country/Region of Origin (Nationality) - SELECT ONE -	
Address and Phone		
amily	Provide the following information on your travel documentation:	
Previous U.S. Travel	OTHER TRAVEL DOCUMENT	Help: Travel Documentation
Vork / Education / raining		Enter the information on the travel document you
Petitioner		will be using when traveling to the U.S. You
Security and Background		travel document should be a valid, unexpired passport or other valid,
Social Security Number		unexpired documentatio that is sufficient to establish your identity and nationality.
	Q: Do you hold or have you held any nationality other than the one you have indicated above?	Help: Other Country/Region of Origin (Nationality)
	A: • Yes C No	Enter all nationalities you currently hold and all
	Provide the following information:	nationalities you have previously held,
	Other Country/Region of Origin (Nationality) - SELECT ONE -	regardless of whether you have formally and/or legally relinquished the nationality. If the country
	Q: Do you hold a passport from the country/region of origin (nationality) above?	where you previously held nationality is no longer a political entity or
	A: C Yes @ No	country, select the nationality that corresponds with the
	 Add Another Remove 	name of the country that is currently used for that location.





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CEAC IV Form DS-260

Displayed for all applicants. Answered "Other Travel Document" for "Document Type". Answered 'Yes' to the questions 'Do you hold or have you held any nationality other than the one indicated in question above on nationality?' and 'Do you hold a passport for the other nationality above?'.

CEAC IV Form DS-260

	PARTMENT OF STATE	
COMPLETE	REVIEW	SIGN
pplication List	Online Immigrant Visa and Alien Registration Application (D	0 S-260)
etting Started	Personal Information 2	
ersonal ersonal 1	Country/Region of Origin (Nationality)	
ersonal 2 Idress and Phone		
mily evious U.S. Travel	Provide the following information on your travel documentation: Document Type OTHER TRAVEL DOCUMENT	Help: Travel Documentation
fork / Education / aining atitioner acurity and ackground ocial Security Number		Enter the information on the travel document you will be using when traveling to the U.S. You travel document should be a valid, unexpired passport or other valid, unexpired documentation that is sufficient to establish your identity and nationality.
	Q: Do you hold or have you held any nationality other than the one you have indicated above?	Help: Other Country/Region of Origin (Nationality)
	A: • Yes • No Provide the following information:	Enter all nationalities you currently hold and all nationalities you have previously held,
	Other Country/Region of Origin (Nationality) - SELECT ONE -	regardless of whether you have formally and/or legally relinquished the nationality. If the country
	Q: Do you hold a passport from the country/region of origin (nationality) above? A: Yes No Provide the following information: Passport Number	where you previously held nationality is no longer a political entity or country, select the nationality that corresponds with the name of the country that is currently used for that location.



Remove



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Add Another

CEAC IV Form DS-260

Present and Previous Address Information Page

Displayed for all applicants. All questions answered 'No'. Please note sections added for Additional Telephone and Email Address. Additional field for Social Media and Other Social Media.

CONSULAR	PARTMENT OF STATE	and the particular second s
COMPLETE	REVIEW	SIGN
	Online Immigrant Visa and Alien Registration Application	(DS-260)
	Descent on J.D. 1. A 11. T.C. 11	
Started	Present and Previous Address Informati	on
and Phone	Present Address	
and Phone 🕨	Street Address (Line 1) 1234	
and 5	12.74	
and	Street Address (Line 2) *Optional TEST	
ent		
	City TEST	
i U.S. Travel	State/Province	
ducation /	Does Not Apply	
er	Postal Zone/ZIP Code	
and	Does Not Apply	
und	Country/Region	
ecurity Number		
	Charles I Livian I Law	
	Started Living Here JAN 2015	
	(Format: MMM-YYYY)	
	Previous Addresses	Help: Previous Addresses
	Q: Have you lived anywhere other than this address since the	Previous addresses
	age of sixteen? (Date you turned sixteen: 01-Jan-2015)	should only include those addresses at which you
	A: ⊖ _{Yes} ● _{No}	established a residence (for example on campus
		housing where you lived for an academic term at
		your college or
		university) and should not include places at
		which you were temporarily present (for
		example a hotel at which you stayed for vacation).
	Phone	Help: Phone
	Primary Phone Number 1234567	You must provide a
	Secondary Phone Number	primary phone number. The primary phone
	Does Not Apply	number should be the phone number at which
	Work Phone Number	you are most likely to be reached; this could be a
	Does Not Apply	land line or a cellular/mobile number.
		If you have an additional land line or a
		cellular/mobile number please list that as your
		secondary phone
		number.
	Q: Have you used any other telephone numbers during the last	
	five years?	
	A: • Yes O No	
	Fmail	
	Email Email Address	Help: Email
	test@yahoo.com	You must provide an email address. The email
	(e.g., emailaddress@example.com)	address you provide will
		be used for correspondence
		purposes. Provide an email address that is
		secure and to which you have reasonable access.
	Q: Have you used any other email addresses during the last	
	five years?	
	A: Ores No	
	Social Media	Help: Social Media
	Select from the list below each social media platform you have	-
	used within the last five years. In the space next to the platform's name, enter the username or handle you have used	Enter information associated with your
	on that platform. Please do not provide your passwords. If you	online presence, including the types of
	have used more than one platform or more than one username	online

or handle on a single platform, click the 'Add Another' button to list each one separately. If you have not used any of the listed social media platforms in the last five years, select 'None.'

Social Media Provider/Pla	atform	
- SELECT ONE -		~
	 Add Another 	Remove

providers/platforms, applications, and websites that you use to collaborate, share information, and interact with others. List the username, handle, screenname, or other identifiers associated with your social media profile. You do not need to list accounts designed for use by multiple users within a business or other organization.

Other Social Media

Do you wish to provide information about your presence on any other websites or applications you have used within the last five years to create or share content (photos, videos, status updates, etc.)?

A: OYes
No





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Present and Previous Address Information Page

Displayed for all applicants. All questions answered 'Yes'. Please note sections added for Additional Telephone and Email Address. Additional field for Social Media and Other Social Media.

		Home	Contact Us Help Sign Ou
	PARTMENT OF STATE		
COMPLETE	REVIEW		SIGN
	Online Immigrant Visa and Alien Regist	ration Applicati	on (DS-260)
/ Getting Started / Personal	Present and Previous Addr	ess Inform	ation
Address and Phone	Present Address		
Present and Previous	Street Address (Line 1) 1234]
Mailing and Permanent	Street Address (Line 2) *Optional TEST]
/ Family / Previous U.S. Travel	City TEST]
/ Work / Education / Training	State/Province	es Not Apply	
Petitioner	Postal Zone/ZIP Code		
/ Security and Background	Does Not	Apply	
/ Social Security Number	Country/Region ARGENTINA	~	
	Started Living Here JAN V 2015 (Format: MMM-YYYY)		
	Previous Addresses		Help: Previous Addresses
	 Q: Have you lived anywhere other than the age of sixteen? (Date you turned sixteen A: OYes No 		Previous addresses should only include those addresses at which you established a residence (for example on campus housing where you lived for an academic term at your college or university) and should not include places at which you were temporarily present (for example a hotel at which

Page Continued

Phone	Help: Phone
Primary Phone Number Secondary Phone Number Vork Phone Number Vork Phone Number Does Not Apply	You must provide a primary phone number. The primary phone number should be the phone number at which you are most likely to be reached; this could be a land line or a cellular/mobile number. If you have an additiona land line or a cellular/mobile number please list that as your secondary phone number.
 Have you used any other telephone numbers during the last five years? A: • Yes O No 	
Additional Phone Number	
12345678	
 <u>Add Another</u> Remove 	
	Help: Email
Email Email Address	
Email Email Address lest@yahoo.com	Help: Email You must provide an email address. The ema address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you have reasonable access.
Email Email Address test@yahoo.com e.g., emailaddress@example.com) Q: Have you used any other email addresses during the last	You must provide an email address. The ema address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you
Email Email Address test@yahoo.com	You must provide an email address. The ema address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you
Email Email Address test@yahoo.com (e.g., emailaddress@example.com) Q: Have you used any other email addresses during the last five years?	You must provide an email address. The ema address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you
Email Address test@yahoo.com (e.g., emailaddress@example.com) Have you used any other email addresses during the last five years?	You must provide an email address. The ema address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you
Email Address test@yahoo.com (e.g., emailaddress@example.com)	You must provide an email address. The ema address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you

Page Continued

Social Media

Select from the list below each social media platform you have used within the last five years. In the space next to the platform's name, enter the username or handle you have used on that platform. Please do not provide your passwords. If you have used more than one platform or more than one username or handle on a single platform, click the 'Add Another' button to list each one separately. If you have not used any of the listed social media platforms in the last five years, select 'None.'

Social Media Provider/Platform	
ASK.FM	~
Social Media Identifier	
Social Media Identifier TESTID1	

Add Another
 Remove

Other Social Media

Do you wish to provide information about your presence on any other websites or applications you have used within the last five years to create or share content (photos, videos, status updates, etc.)?

A: Yes O No

Please provide the name of the platform and the associated unique social media identifier (username or handle) for each social media platform you would like to list. This does not include private messaging on person-toperson messaging services, such as WhatsApp.

ther Social Media Ic SOCIALID2	lentifier		
	• Add Another	Remove	
-	ome of the platform and		
	cial media identifier (use al media platform you w		
-	lude private messaging		
erson messaging se	rvices, such as WhatsAp	p.	
ther Social Media Pi	rovider/Platform		
OCIAL3			
ther Social Media Io	lentifier		
OCIALID3A			
	 Add Another 	Remove	



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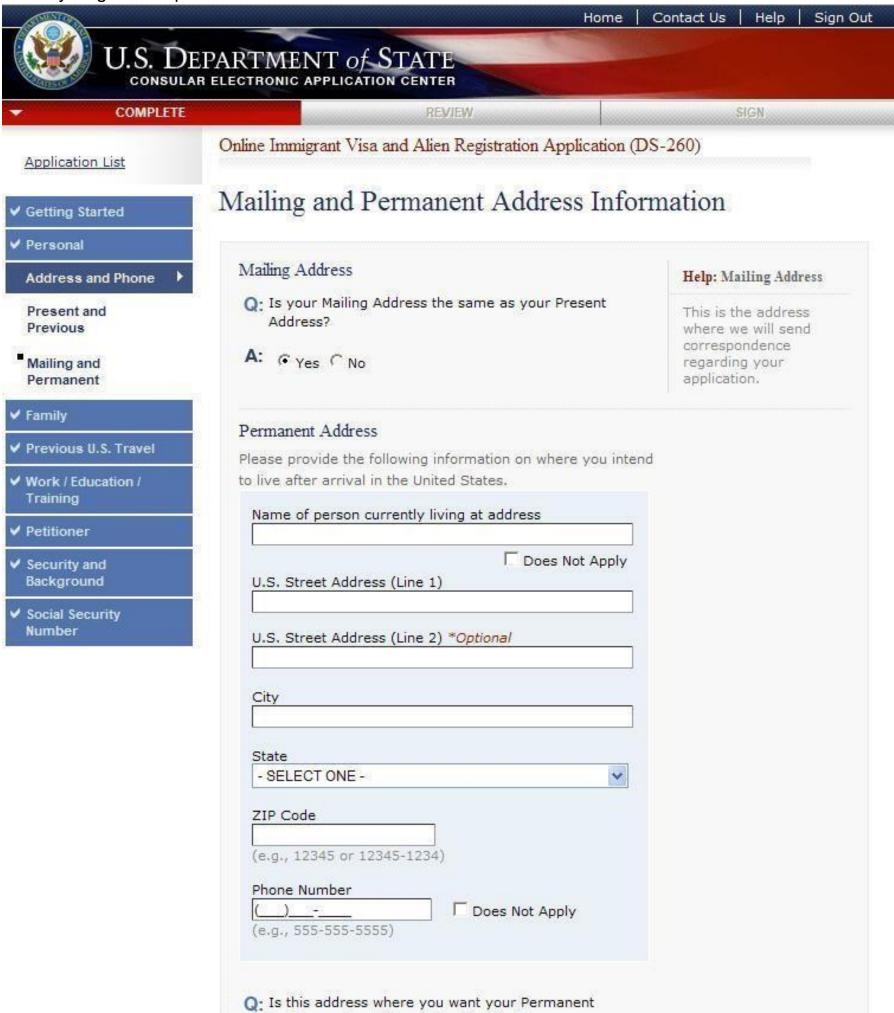
 Copyright Information
 Disclaimers
 Paperwork Reduction Act and Confidentiality Statement
 Oracle

Help: Social Media

Enter information associated with your online presence, including the types of online providers/platforms, applications, and websites that you use to collaborate, share information, and interact with others. List the username, handle, screenname, or other identifiers associated with your social media profile. You do not need to list accounts designed for use by multiple users within a business or other organization.

Mailing and Permanent Address Page

Displayed for all applicants who do not list "United States of America" as their Present Address Country/Region. All questions answered 'Yes'.



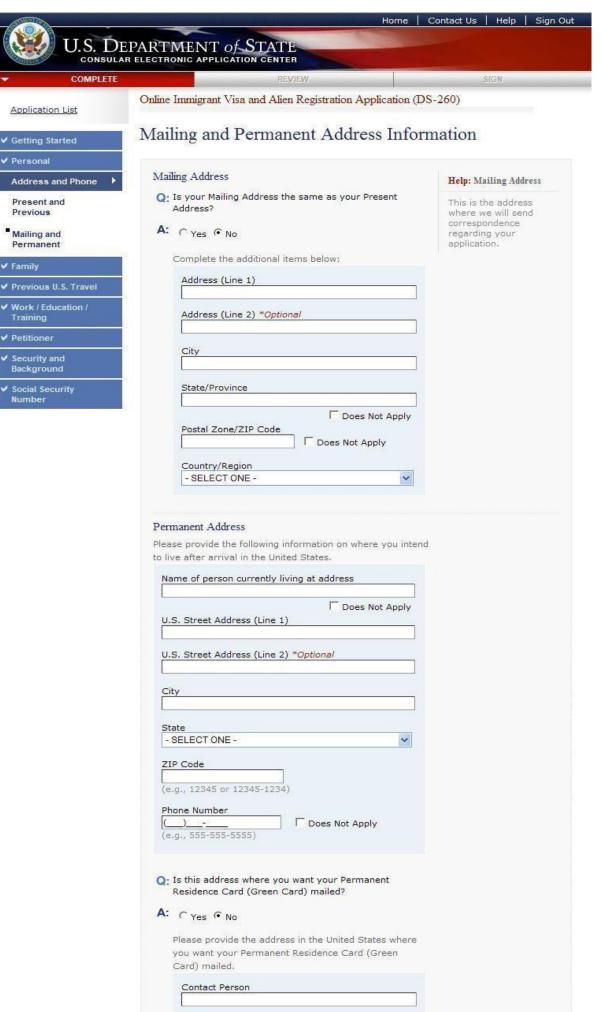




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Mailing and Permanent Address Page

Displayed for all applicants who do not list "United States of America" as their Present Address Country/Region.. All questions answered 'No'.



City		
State		
- SELECT ONE -	~	
ZIP Code		
(e.g., 12345 or 12345	i-1234)	
Phone Number		
(Does Not Apply	



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CEAC IV Form DS-260

Mailing and Permanent Address

Displayed for all applicants who list "United States of America" as their Present Address Country/Region. . All questions answered 'Yes'.

COMPLETE	REVIEW	SIGN
Application List	Online Immigrant Visa and Alien Registration Application (I	DS-260)
Getting Started	Mailing and Permanent Address Info	rmation
Personal		
Address and Phone 🕨	Mailing Address	Help: Mailing Address
Present and Previous	Q: Is your Mailing Address the same as your Present Address?	This is the address where we will send
Mailing and Permanent	A: • Yes C No	correspondence regarding your application.
✔ Family		
Previous U.S. Travel	Q: Is your present address where you want your Permane	ent
Work / Education / Training	Residence Card (Green Card) mailed?	
✔ Petitioner		
 Security and Background 		
 Social Security Number 	Back: Present/Previous Save	Next: Family

Mailing and Permanent Address Page

Displayed for all applicants who list "United States of America" as their Present Address Country/Region. Answered 'No' to the question 'Is this address where you want your Permanent Residence Card (Green Card) mailed?'.

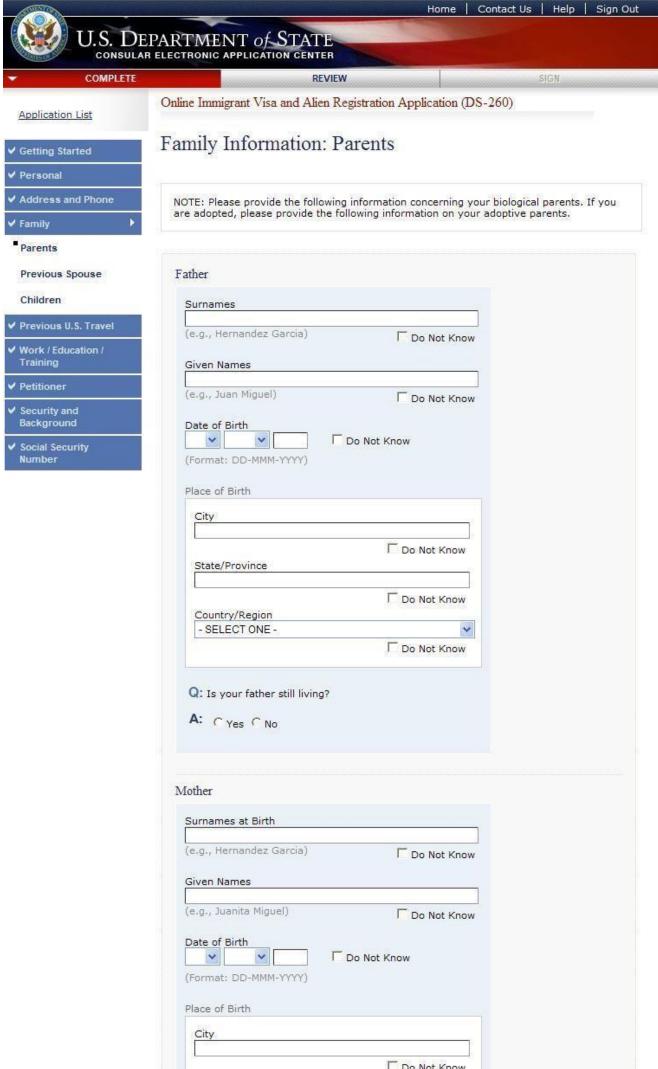
	Home	Contact Us	Help Sign Out
U.S. DE	PARTMENT OF STATE		
CONSULAT	REVIEW		SIGN
Application List	Online Immigrant Visa and Alien Registration Application (D	S-260)	
Getting Started	Mailing and Permanent Address Infor	mation	
✓ Personal			
Address and Phone	Mailing Address	Help: Ma	iling Address
Present and Previous	Q: Is your Mailing Address the same as your Present Address?	where w	ne address re will send
Mailing and Permanent	A: C Yes @ No	correspo regardin applicati	ondence g your
⁷ Family	Complete the additional items below:		
Previous U.S. Travel	Address (Line 1)		
/ Work / Education / Training	Address (Line 2) *Optional		
Petitioner			
Security and Background	City		
Social Security Number	State/Province		
	C Does Not Apply		
	Postal Zone/ZIP Code		
	Country/Region		
	- SELECT ONE -		
	Q: Is your present address where you want your Permanent Residence Card (Green Card) mailed? A: C Yes ⓒ No Please provide the address in the United States where you want your Permanent Residence Card (Green Card) mailed. Contact Person U.S. Street Address (Line 1) U.S. Street Address (Line 2) *Optional City State - SELECT ONE -	nt	
	- SELECT ONE -		
	ZIP Code		

		s Not Apply	
e.g., 555-555	-5555)		



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Displayed for all applicants.

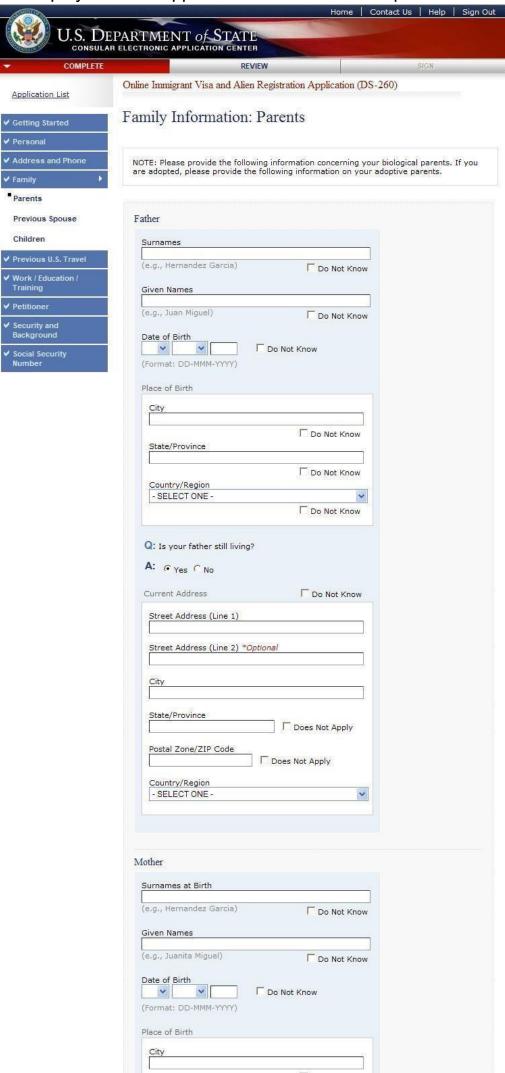


Country/Region	C Do Not Kn	ow
- SELECT ONE -	-	~
	C Do Not Kn	ow
Q: Is your mother still living?		
A: C Yes C No		
Back: Address and Phone	🖹 Save	Next: Previous Spouse

CEAC IV Form DS-260

C

Displayed for all applicants. Answers to all questions are "Yes".

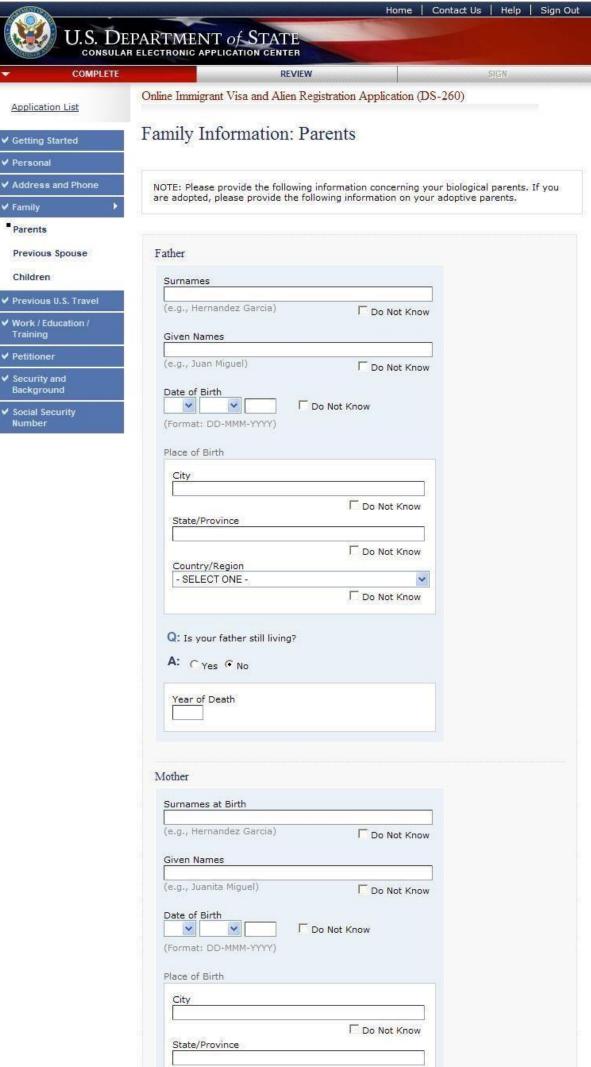


Country (Descine	C Do Not Kno	w
Country/Region - SELECT ONE -		~
	C Do Not Kno	w
Q: Is your mother still living?		
A: GYes C No		
Q: Is your mother's address t	the same as your father	's?
A: G Yes C No		
Back: Address and Phone	Save	Next: Previous Spouse 🕨

CEAC IV Form DS-260 SENSITIVE BUT UNCLASSIFIED

C

Displayed for all applicants. Answers to all questions are "No".



Q: Is your mother still living?		
A: C Yes @ No		
Yes V No		
Year of Death		
Back: Address and Phone	🖹 Save	Next: Previous Spouse

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This site is

C

	nline Immigrant Visa and Alien Registration Application (DS-260) Camily Information: Parents
1	NOTE: Please provide the following information concerning your biological parents. If y are adopted, please provide the following information on your adoptive parents.
	Father
	Surnames
	(e.g., Hernandez Garcia) T Do Not Know
	Given Names
	(e.g., Juan Miguel)
	Date of Birth
	Place of Birth
	City
	C Do Not Know State/Province
	Country/Region
	- SELECT ONE -
	Q: Is your father still living?
	Current Address Do Not Know Street Address (Line 1)
	Street Address (Line 2) *Optional
	City
	State/Province
	Postal Zone/ZIP Code
	Country/Region
	- SELECT ONE -
	(e.g., Hernandez Garcia) Do Not Know Given Names (e.g., Juanita Miguel) Do Not Know Date of Birth V Do Not Know (Format: DD-MMM-YYYY) Place of Birth City Do Not Know State/Province Do Not Know Country/Region - SELECT ONE -
	- SELECTIONE -
	Q: Is your mother still living? A: ℃ Yes ℃ No
	Q: Is your mother's address the same as your father's? A: ⊂ Yes ເ⊂ No
	Current Address Do Not Know
	Street Address (Line 1)
	Street Address (Line 2) *Optional
	City
	State/Province
	Postal Zone/ZIP Code
	Does Not Apply
	Country/Region - SELECT ONE -

Displayed for all applicants. Answered 'Yes' to "Is your father/mother still living?" and answered 'No' to the question "If your mother's address the same as your father's?"



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CEAC IV Form DS-260

Displayed for all applicants. Answered 'Do Not Know' to the questions 'Surname' and 'Given Name'.

COMPLETE	, , , , , , , , , , , , , , , , , , ,	REVIEW	SIGN
Application List	Online Immigrant Visa and Al	lien Registration Application (DS-	260)
Getting Started	Family Information	n: Parents	
Address and Phone		llowing information concerning your the following information on your a	
Family			
Parents Previous Spouse	Father		
Children	Surnames		
Previous U.S. Travel Work / Education /	(e.g., Hernandez Garcia)	Do Not Know	
Training	Given Names		
 Petitioner Security and 	(e.g., Juan Miguel)	Do Not Know	
Background			
 Social Security Number 	Mother		
	Surnames at Birth		
	(e.g., Hernandez Garcia)	Do Not Know	
	Given Names		
	(e.g., Juanita Miguel)	Do Not Know	
	Back: Address and Phone	e 🖺 Save	Next: Previous Spouse 🕨

Displayed for applicants who indicate they are currently married or separated. Answered 'No' to the question 'Is your spouse immigrating to the U.S. with you?'.

		Home	Contact Us H	elp Sign Out
U.S. DE	PARTMENT of STATE	and the second second		
CONSULA	R ELECTRONIC APPLICATION CENTER	-		
COMPLETE	REVIEW		SIGN	
	Online Immigrant Visa and Alien Registrat	ion Application (DS-260)	
Getting Started	Family Information: Spous	e		
Personal	,			
Address and Phone	NOTE: Please provide the following inform	ation on your our	rent spouse	
Family 🕨	Norte. Please provide the following morn	radion on your cur	rent spouse.	
Parents				
Spouse	Current Spouse			
Previous Spouse	Surnames			
Children				
Previous U.S. Travel	Given Names			
Work / Education / Training	Date of Birth		_	
Petitioner	(Format: DD-MMM-YYYY)			
Security and	Place of Birth			
Background	City			
Social Security Number		Do Not Know		
	State/Province of Birth			
	Country/Region	Does Not Apply		
	- SELECT ONE -			
	Spouse's Address			
	-SELECT ONE-	<u>_</u>		
	Occupation			
	SELECT ONE-	<u> </u>		
	Date and Place of Marriage			
	Date of Marriage			
	(Format: DD-MMM-YYYY)			
	City			
	State/Province	— ———————————————————————————————————		
		Does Not Apply		





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CEAC IV Form DS-260

Displayed for applicants who indicate they are currently married or separated. Answered 'Yes' to the question 'Is your spouse immigrating to the U.S. with you?'.

<u> </u>	Home	Contact Us He	lp Sign Out
	PARTMENT OF STATE		
COMPLETE	REVIEW	SIGN	
	Online Immigrant Visa and Alien Registration Application ((DS-260)	
Getting Started	Family Information: Spouse		
Personal			
Address and Phone	NOTE: Please provide the following information on your cu	rrent spouse.	
Family			
Parents	Current Spouse		
Spouse	Current Spouse		
Previous Spouse	Surnames		
Children	Given Names		
Previous U.S. Travel			
Work / Education / Training	Date of Birth		
Petitioner	(Format: DD-MMM-YYYY)		
Security and Background	Place of Birth		
Social Security	City		
Number	Do Not Know		
	State/Province of Birth		
	Does Not Apply		
	Country/Region		
	- SELECT ONE -		
	Spouse's Address -SELECT ONE-		
	Occupation -SELECT ONE-	e.	
	Date and Place of Marriage		
	Date of Marriage		
	(Format: DD-MMM-YYYY)		
	City		





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CEAC IV Form DS-260

Displayed for applicants who indicate they are currently married or separated. Selected 'Same as Present Address' and 'Not Employed' for 'Occupation'.

	Home Contact Us Help Sign Out
U.S. DI	EPARTMENT OF STATE
COMPLETE	REVIEW SIGN
	Online Immigrant Visa and Alien Registration Application (DS-260)
	Family Information: Spouse
Getting Started	I multiplication of the second
Personal Address and Phone	
Family	NOTE: Please provide the following information on your current spouse.
Parents	
Spouse	Current Spouse
Previous Spouse	Surnames
Children	
Previous U.S. Travel	Given Names
Work / Education /	
Training	Date of Birth
Petitioner	(Format: DD-MMM-YYYY)
Security and Background	Place of Birth
Social Security	City
lumber	Do Not Know
	State/Province of Birth
	Does Not Apply
	Country/Region
	- SELECT ONE -
	Spouse's Address
	SAME AS PRESENT ADDRESS
	Occupation
	NOT EMPLOYED Provide the following information:
	Explain
	Date and Place of Marriage
	Date of Marriage
	(Format: DD-MMM-YYYY)
	City
	State/Province
	Does Not Apply
	Country/Region
	- SELECT ONE -
	Q: Is your spouse immigrating to the U.S. with you?
	A: O Yes C No
	Back: Parents Back: Parents Save Next: Previous Spouse



> > >

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> > CEAC IV Form DS-260

Displayed for applicants who indicate they are currently married or separated. Selected 'Other (Specify Address)' for 'Spouse's Address' and 'Other' for 'Occupation'.

	Online Immigrant Visa and Alien Registration Application (DS-260)
	Family Information: Shouse
ng Started	Family Information: Spouse
ess and Phone	NOTE: Please provide the following information on your current spouse.
y 🕨	
nts	Current Spouse
se	Surnames
ous Spouse ren	
ous U.S. Travel	Given Names
/Education /	Date of Birth
oner	(Format: DD-MMM-YYYY)
ity and	Place of Birth
round	City
er	Do Not Know
	State/Province of Birth
	Does Not Apply
	Country/Region - SELECT ONE -
	Spouse's Address
	Provide your Spouse's Address (P.O. box numbers are not allowed):
	Street Address (Line 1)
	Street Address (Line 2) *Optional
	City
	State/Province
	Does Not Apply
	Postal Zone/ZIP Code
	Country/Region
	- SELECT ONE -
	Occupation OTHER
	Provide the following information:
	Specify Other
	Date and Place of Marriage
	Date of Marriage
	(Format: DD-MMM-YYYY)
	City
	State/Province
	Does Not Apply
	Country/Region - SELECT ONE -
	Q: Is your spouse immigrating to the U.S. with you?
	A: • Yes C No
	Back: Parents Back: Parents Save Next: Previous Spouse

CEAC IV Form DS-260

Family Information: Previous Spouse Page

COMPLETE	REVIE	N	SIGN
	Online Immigrant Visa and Alien R	egistration Application (DS-260)
Getting Started	Family Information: P	Previous Spouse	
Personal			
Address and Phone	NOTE: Please provide the followin	g information on all of yo	ur previous spouses, includ
Family	those deceased.		
Parents			
Spouse	Q: Do you have any previous sp	ouses?	
Previous Spouse	A: CYes © No		
Children	C res C Nu		
Previous U.S. Travel			
Work / Education / Training	Back: Spouse	🖹 Save	Next: Childre
Petitioner			
Security and Background			
Social Security Number			

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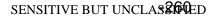
Family Information: Previous Spouse Page

Displayed for all applicants. Answered 'No' to the question 'Do you have any previous spouses?'.

Displayed for all applicants. Answered 'Yes' to the question 'Do you have any previous spouses?'.

Answered 'Other' to the question 'How was your marriage terminated?'.

4



CEAC IV Form DS

COMPLETE	REVIEW	SIGN
	Online Immigrant Visa and Alien Registration	Application (DS-260)
Getting Started	Family Information: Previou	is Spouse
Personal	25	
Address and Phone	NOTE: Please provide the following informati those deceased.	on on all of your previous spouses, including
Family 🕨	those deceased.	
Parents		
Spouse	Q: Do you have any previous spouses?	
Previous Spouse	A: GYes CNo	
Children	Number of Previous Spouses:	
Previous U.S. Travel		
Work / Education / Training	Provide the following information:	
Petitioner	Surnames	
Security and	Given Names	
Background		
Social Security Number	Date of Birth	
	(Format: DD-MMM-YYYY)	
	Date of Marriage	
	(Format: DD-MMM-YYYY)	
	Date Marriage Ended	
	(Format: DD-MMM-YYYY)	
	How was your marriage terminated?	
	OTHER	•
	Explain Other	





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Displayed for all applicants. Answered 'No' to the question 'Do you have any children?'.

COMPLETE	REVIEW		ş	IGN	
	Online Immigrant Visa and Alien Registration Appl	ication (DS	-260)		
Getting Started	Family Information: Children				
Personal					
Address and Phone	NOTE: The Immigration and Nationality Act (INA) of				
Family	members of immediate relatives. For example, IR1 are immediate relative visa categories. The petition	ner must file			
Parents	petitions for the spouse, each child and each paren	ι			
Spouse					
Previous Spouse	Q: Do you have any children?		Help: Ch		
Children	A: CYes C No	The Immigration and			
Previous U.S. Travel				ty Act (IN	
Work / Education / Training			derivativ	e status embers d	
Petitioner				te relativ	es.
Security and			immedia	ifications te relativ	e visa
Background			question	ss. If you s about w	hether
Social Security Number			allowed I	our child i to immigr	ate to
			the U.S. allowed i in the U.	o follow	to join
			travel.st		or



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Displayed for all applicants. Answered 'Yes' to all questions.

		Contact Us	Help Sign Out
U.S. DE	PARTMENT OF STATE		
COMPLETE	REVIEW		SIGN
	Online Immigrant Visa and Alien Registration Application (DS-	-260)	
Getting Started Personal	Family Information: Children		
Address and Phone Family Parents	NOTE: The Immigration and Nationality Act (INA) does not allow members of immediate relatives. For example, IR1, CR1, IR2, are immediate relative visa categories. The petitioner must file petitions for the spouse, each child and each parent.	CR2 and IF	R5 classifications
Spouse			
Previous Spouse	Q: Do you have any children?	Help: Ch Informat	
Children Previous U.S. Travel Work / Education / Training Petitioner Security and Background Social Security Number	 A: € Yes C No Number of Children: □ Provide the following information on each of your children (this includes all natural children, adopted children, and step children). Child 1 Surnames Given Names Oate of Birth I I I I I I I I I I I I I I I I I I I	The Imn National does not derivativ family m immedia IR1, CR IR5 clas immedia categori question or not y allowed the U.S. allowed in the U. <u>travel.st</u>	nigration and ity Act (INA)
	Q: Is this child immigrating to the U.S. with you?		





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Displayed for all applicants. Answered 'Yes' to the question 'Do you have any children?'. Answered 'No' to the question 'Is this child immigrating to the U.S. with you?'.

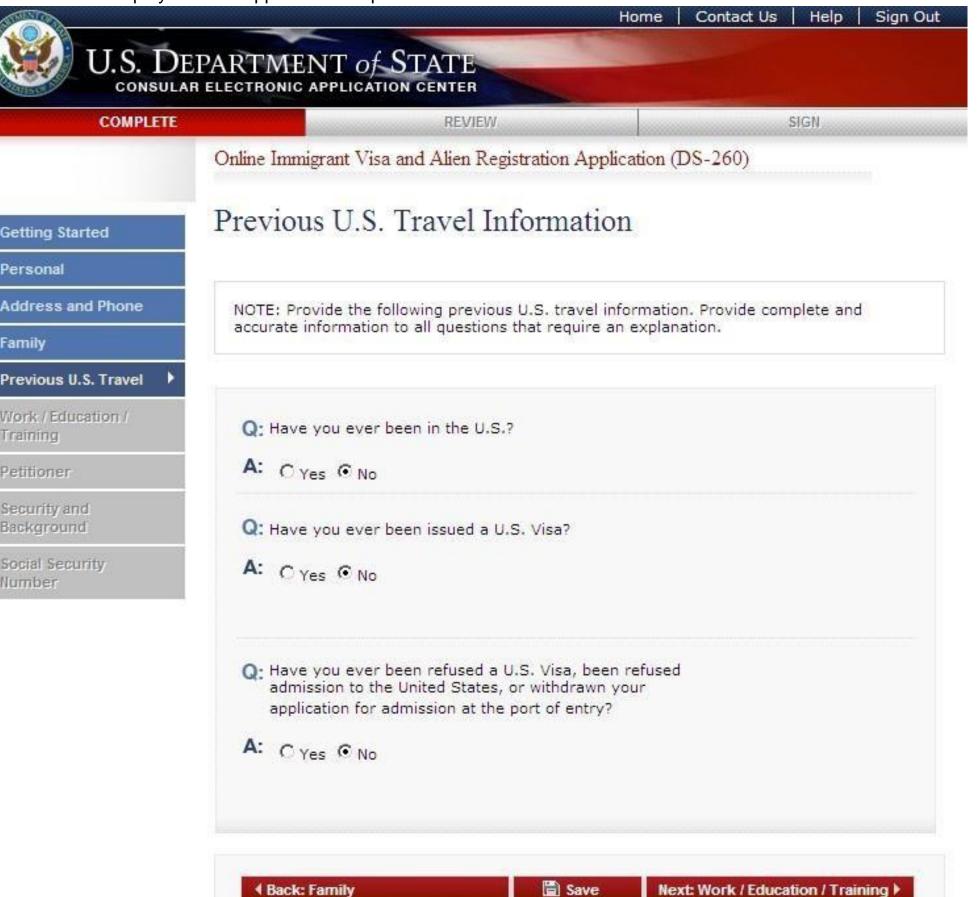
Online Immigrant Visa and Alien Registration Application (DS-260) ing Started sonal ress and Phone ily ily inst use vious Spouse dren nous U.S. Travel k/ Education / Inger arrity and ground al Security there child 1 surmames al Security	COMPLETE	ELECTRONIC APPLICATION CENTER	SIGN
A control of the following information on each of your children in the information is the following information on each of your children in the information is the following information on each of your children in the information is the following information on each of your children in the information is the following information on each of your children in the information is the following information on each of your children in the information of the source is the information of the source is the information of the source is the information of your children in the information of the source is the information of your children in the information of the source is the information of the information of the source is the information of the information of the source is the information of the source is the information of the information of your children in the information of the information of the source is the information of the information of the information of the source is the information of the information of the information of the information of your children in the information of	COMPLETE		
All outputs All of the set of t		Online miningrant visa and Anen Registration Application (DS-	200)
available tread available	ting Started	Family Information: Children	
wy • members of immediate relatives. For example, 181, CA1, 182, CA2 and 185 classifications are immediate relatives. The pathioner must file separate immediate relative size as close to the spouse, each child and each parent. area Q: Do you have any children? A: © Yes © No Number of Children: □ Provide the following information on each of your children this includes all netural children, adopted children, and step children). The Immigration and flatomatication and flatomatication and flatomatication and flatomatication and flatomatication. ming and the following information on each of your children the inducted all netural children, adopted children, and step children). The Immigration and flatomatication and flatomatication and flatomatication and flatomatication and flatomatication and flatomatication. ming and the following information on each of your children the US, networks for demonstration and flatomatication and flatomatication and flatomatication. The Immigration and flatomatication and flatomatication and flatomatication and flatomatication. ming and the following information on each of your children the US, flatomatication and flatomatication. The Immigration and flatomatication and flatomatication. ming and the following information on each of your children the US, flatomatication and flatomatication. The Immigration and flatomatication. ming and the following information on each of your child is a classification and flatomatication. The Immigration and flatomatication. Given Names The	sonal		
members of immediate relatives. For example, IR1, CR1, IR2, CR2 and IR5 classifications are immediate relatives. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples. The pathoner must file separate immediate relative size examples of mediate relative size examples of	ress and Phone	NOTE: The Immigration and Nationality Act (INA) does not allow	v derivative status to famil
use vices Spouse drem nous U.S. (Travel Infing) Devide the following information on each of your children (this includes all natural children, adopted children, and step children). Drivide the following information on each of your children (this includes all natural children, adopted children, and step children). Child 1 Sumames Given Names Given Names Given Names Given Names Given Names (Format: DD-MMM-YYYY) Place of Birth Give Outs this child live with you? A: G Yes G No Q: Does this child live with you? A: G Yes G No Q: Is this child immigrating to the U.S. at a later date to join you? A: C Yes G No Q: Is this child immigrating to the U.S. at a later date to join you? A: C Yes G No	ily 🕨	members of immediate relatives. For example, IR1, CR1, IR2, are immediate relative visa categories. The petitioner must file	CR2 and IR5 classifications
vious Spouse Q: Do you have any children? A: © Yes © No norse US; Travel k: C Yes © No Number of Children: [] Provide the following information on each of your children (this includes all natural children, adopted children, and step (this includes all natural children, adopted children, and step information) all Sumames Given Names Given Names Given Names Opte of Birth (Format: Do-MMM-YYYY) Place of Birth Country/Region State/Province Does this child live with you? A: © Yes © No Q: Does this child inwigrating to the U.S. at a later date to join you? A: © Yes © No Q: Is this child immigrating to the U.S. at a later date to join you? A: © Yes © No	ents	petitions for the spouse, each child and each parent.	
dren A: © Yes © No Infernation A: © Yes © No Number of Children: □ The Immigration and Nationality Act (NA) derivative status for finity members of inmediate relative. Nationality Act (NA) derivative status for finity derivative status for finity members of inmediate relative. Signaphical and the control of the U.S. (No) derivative status for finity members of inmediate relative. Signaphical and the control of the U.S. (No) derivative status for finity members of inmediate relative. Nationality Act (NA) derivative status for finity members of inmediate relative. Nationality Act (NA) derivative status for finity members of inmediate relative. Nationality Act (NA) derivative status for finity members of inmediate relative. Nationality Act (NA) derivative status for finity members of interval detate relative. Nationality Act (NA) derivative status for finity members of interval detate relative. Nationality Act (NA) derivative status for finity members of interval detate relative. Nationality Act (NA) derivative status for finity members of interval detate relative. Nationality Act (NA) derivative status for finity members of interval detate relative. Nationality Act (NA) derivative status for finity members of interval detate relative. Nationality Act (NA) derivative status for finity members of interval detate relative. Nationality Act (NA) derivative status for finity interval detate relative. Nationality Act (NA) derivative status for finity interval detate relative. Nationality Act (NA) derivative status for finity or a relative status for finity interval detate relative visa in the U.S. with You or is a selected to information. Date of Birth Child i State/Province Does Not Apply Country/Region Child interval detate (NA) Child i State finity o	use		
drein A: © Yes © No norms U.5. Travel Number of Children: □ provide the following information on each of your children (this includes all natural children, adopted children, and step children). The Immigration and Nationality Adt (INA) does not allow derivative status for formity mediate relatives. all ground all secondary all secondary Given Names Given Names Given Names Given Contry/Region Does Not Apply Given Contry/Region Given Contry Given Contry/Region Given Contry Given Conthid in miligrating to the U.S. at a later date to join you?	vious Spouse	Q: Do you have any children?	
Number of Children: Image: Children: Image: Children: Provide the following information on each of your children (this includes all natural children, adopted children, and step children): Image: Children: Image: Children: all Security (the following information on each of your children (this includes all natural children, adopted children, and step children): Image: Children: Image:	dren	A: © Yes C No	
k/ Education / ining ining Provide the following information on each of your children (this includes all natural children, adopted children, and step children). crity and ground all Security: all Security: iber Given Names Date of Birth (Format: DD-MMM-YYYY) Place of Birth (Format: DD-MMM-YYYY) Place of Birth (Format: DD-MMM-YYYY) Place of Birth (City (Format: DD-MMM-YYYY) Place of Birth (City (Format: DD-MMM-YYYY) Place of Birth (City (Country/Region -SELECT ONE Q: Does this child live with you? A: C Yes C No Q: Is this child immigrating to the U.S. with you? A: C Yes C No A: C Yes C No A: C Yes C No	vious U.S. Travel		Nationality Act (INA)
In this includes all natural children, adopted children, and step this includes of natural children, adopted children, and step this includes all natural children, adopted children, adopted children, adopted children, and step this includes all natural children, adopted children, adopted children, and step this includes all natural children, adopted children, and step this includes all natural children, adopted children, and step this includes all natural children, adopted children, and step this includes all natural children, adopted children, adopted children, adopted children, adopted	k / Education /	Number of Children:	derivative status for
children). children). children). children). child 1 Surnames Child 1 Surnames Child 1 Surnames Child 1 Given Names Cover child is allowed to fallow to join in the U.S. with you or A: C Yes C No Q: Is this child immigrating to the U.S. at a later date to join you? A: C Yes C No Q: Is this child immigrating to the U.S. at a later date to join you? A: C Yes C No			immediate relatives.
child 1 Surnames Given Names Given Names <tr< td=""><td></td><td></td><td>IR5 classifications are</td></tr<>			IR5 classifications are
all Security iber Given Names Given Names Date of Birth (Format: DD-MMM-YYYY) Place of Birth City Do Not Know State/Province Does Not Apply Country/Region -SELECT ONE - Q: Does this child live with you? A: © Yes © No Q: Is this child immigrating to the U.S. at a later date to join you? A: © Yes © No	unty and kground	Child 1	categories. If you have
Given Names the U.S. with you or is Date of Birth Image: State of Birth City Do Not Know State/Province Does Not Apply Country/Region Image: State/Province State/Province Does Not Apply Country/Region Image: State/Province State/Province Image: State/Province Q: Does this child live with you? Image: State of No Q: Is this child immigrating to the U.S. with you? A: C Yes C No Q: Is this child immigrating to the U.S. at a later date to join you? A: C Yes C No	al Security	Surnames	or not your child is
Date of Birth Image: Date of Birth Image: Down of the state of Birth Image: City Image: Down of the state of Birth Image: Down of the state of Birth Image: City Image: Down of the state of Birth Image: Down of Birth Image: Do	10.61	Given Names	the U.S. with you or is
Date of Birth (Format: DD-MMM-YYY) Place of Birth City Do Not Know State/Province Do Not Know State/Province Does Not Apply Country/Region -SELECT ONE - Q: Does this child live with you? A: © Yes © No Q: Is this child immigrating to the U.S. with you? A: © Yes © No Q: Is this child immigrating to the U.S. at a later date to join you? A: © Yes © No			in the U.S., please see
Place of Birth City Do Not Know State/Province Does Not Apply Country/Region -SELECT ONE - Q: Does this child live with you? A: © Yes © No Q: Is this child immigrating to the U.S. with you? A: © Yes © No Q: Is this child immigrating to the U.S. at a later date to join you? A: © Yes © No Q: Is this child immigrating to the U.S. at a later date to join you? A: © Yes © No		Date of Birth	
Place of Birth City Do Not Know State/Province Does Not Apply Country/Region -SELECT ONE - Q: Does this child live with you? A: © Yes © No Q: Is this child immigrating to the U.S. with you? A: © Yes © No Q: Is this child immigrating to the U.S. at a later date to join you? A: © Yes © No Q: Is this child immigrating to the U.S. at a later date to join you? A: © Yes © No			
City □ Do Not Know State/Province □ Does Not Apply Country/Region ▼ • SELECT ONE • ▼ Q: Does this child live with you? ▼ A: • Yes • No Q: Is this child immigrating to the U.S. with you? A: • Yes • No Q: Is this child immigrating to the U.S. at a later date to join you? A: • Yes • No Q: Is this child immigrating to the U.S. at a later date to join you?			
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Previous U.S. Travel Information Page

Displayed for all applicants. All questions are answered 'No'.

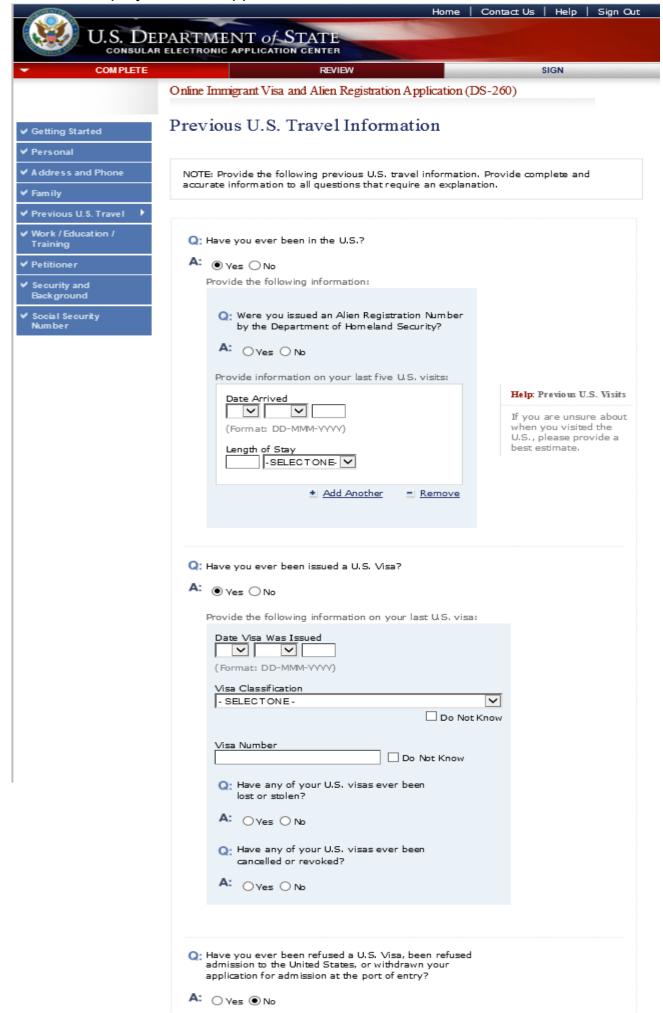




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Previous U.S. Travel Information Page

Displayed for all applicants that answer 'Yes.'







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(122)

Displayed for all applicants over the age of 14

COMPLETE		REVIEW	SIGN
	Online Immigrant Visa and	Alien Registration Appli	cation (DS-260)
Getting Started	Present Work/Ed	lucation/Trainin	ng Information
Personal	74		
Address and Phone	NOTE: Provide the followi	ng information concerning	your current employment or education
Family	-		
Previous U.S. Travel			
Work / Education / 🔹 🕨	Primary Occupation -SELECT ONE-		*
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Additional	In which occupation do y	ou intend to work in the U	<u>S.?</u>
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Displayed for all applicants over the age of 14. Primary Occupation and 'In which occupation do you intend to work in the U.S.?' is 'Agriculture', 'Business', 'Communications', 'Computer Science', 'Culinary/Food Services', 'Education', 'Engineering', 'Government', 'Homemaker', 'Legal Profession', 'Medical/Health', 'Military', 'Natural Science', 'Physical Sciences', 'Religious Vocation', 'Research', 'Social Science', or 'Student'. Answer to 'Do you have other occupations?' is 'No'.

COMPLETE	REVIEW	SIGN
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Displayed for all applicants over the age of 14. Primary Occupation and 'In which occupation do you intend to work in the U.S.?' is 'Agriculture', 'Business', 'Communications', 'Computer Science', 'Culinary/Food Services', 'Education',

'Engineering', 'Government', 'Homemaker', 'Legal Profession', 'Medical/Health', 'Military', 'Natural Science', 'Physical Sciences', 'Religious Vocation', 'Research', 'Social Science', or 'Student'. Answer to 'Do you have other occupations?' is 'Yes' and 'Other Occupation' is not 'Other' or 'Homemaker'.

COMPLETE	REVIEW SIGN
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Displayed for all applicants. Primary Occupation and 'In which occupation do you intend to work in the U.S.?' is

'Agriculture', 'Business', 'Communications', 'Computer Science', 'Culinary/Food Services', 'Education', 'Engineering', 'Government', 'Homemaker', 'Legal Profession', 'Medical/Health', 'Military', 'Natural Science', 'Physical Sciences', 'Religious Vocation', 'Research', 'Social Science', or 'Student'. Answer to 'Do you have other occupations?' is 'Yes' and 'Other Occupation' is 'Homemaker'.

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- SELECT ONE -				
			- SELECT ONE -	
Q: Do you have other occupations?			A: © Yes C No	
A: • Yes C No	A: • Yes C No		Provide the following information:	





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Displayed for all applicants over the age of 14. . Primary Occupation and 'In which occupation do you intend to work in the U.S.?' is 'Other'.

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In which occupation do you intend to work in the U.S.?		A: CYes CNo

Specify Other		
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> CEAC IV Form DS-260 SENSITIVE BUT UNCLASSIFIED

This

Displayed for all applicants. Primary Occupation and 'In which occupation do you intend to work in the U.S.?' is 'Not Employed'.

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	Online Immigrant Visa	and Alien Registration	n Application (D	S-260)		
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Work / Education / 🕨 🕨	Primary Occupation NOT EMPLOYED		•			
■ Present	Provide the following	information:				
Previous	Explain					
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Displayed for all applicants over the age of 14. Primary Occupation and 'In which occupation do you intend to work in the U.S.?' is 'Homemaker' or 'Retired'.

COMPLETE		REVIEW		S	IGN
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Getting Started	Present Wo	ork/Education/	Fraining In	formation	
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Displayed for all applicants over the age of 14. Primary Occupation and 'In which occupation do you intend to work in the U.S.?' is 'Homemaker' or 'Retired'.

COMPLETE		REVIEW		SIGN
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Getting Started	Present Work	c/Education/T	raining I	nformation
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Work / Education /	Primary Occupation HOMEMAKER	1		
Present				
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Additional	A: CYes CNo	82 		
Petitioner	- O Yes O No			
Security and Background	In which occupation	n do you intend to work	in the U.S.2	
Social Security Number	HOMEMAKER			



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US DE	Home Contact Us Help Sign
	RELECTRONIC APPLICATION CENTER
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urity and	Street Address (Line 1)
kground	
ial Security nber	Street Address (Line 2) *Optional
	City
	State/Province
	Postal Zone/ZIP Code
	Country/Region
	- SELECT ONE -
	Q: Does this job require at least 2 years of training or experience?
	A: CYes CNo
	Provide the following information:
	Job Title
	Describe the Type of Work you are doing. Be as
	specific as possible.
	Duties
	Employment Date From
	(Format: DD-MMM-YYYY)
	Employment Date To
	(Format: DD-MMM-YYYY)
	Q: Do you have other occupations?
	A: Cyes @ No
	In which occupation do you intend to work in the U.S.?
	In which occupation do you intend to work in the U.S.? BUSINESS

Displayed only for Diversity Visa (DV) principal applicants when Primary Occupation is not "HOMEMAKER", "NOT EMPLOYED" or "STUDENT".



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CONSULAR	ELECTRONIC APPLICATION CENTER REVIEW SIGN
	Online Immigrant Visa and Alien Registration Application (DS-260)
ication List	
ing Started	Present Work/Education/Training Information
onal	
ress and Phone	NOTE: Provide the following information concerning your current employment or education
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rious U.S. Travel	
k / Education / 🔹 🕨	AGRICULTURE
sent	Provide the following information:
rious	
itional	Present Employer or School Name
lioner	Present Employer or School address:
urity and	Street Address (Line 1)
ground	
al Security Iber	Street Address (Line 2) *Optional
	City
	State/Province
	Does Not Apply
	Postal Zone/ZIP Code
	Country/Region
	- SELECT ONE -
	Q: Does this job require at least 2 years of training or experience?
	A: GYes C No
	Provide the following information:
	Job Title
	Describe the Type of Work you are doing. Be as specific as possible.
	Duties
	Employment Date From
	(Exemption DD MMM VXVV)
	(Format: DD-MMM-YYYY) Employment Date To
	(Format: DD-MMM-YYYY)
	0
	Q: Do you have other occupations?
	A: • Yes C No
	Provide the following information:
	Other Occupation
	-SELECT ONE-
	🛨 Add Another 🖃 Remove
	In which occupation do you intend to work in the U.S.? BUSINESS

Displayed only for Diversity Visa (DV) principal applicants when Primary Occupation is not "HOMEMAKER", "NOT EMPLOYED" or "STUDENT". Answer to "Do you have other occupations?" is "Yes".



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CEAC IV Form DS-260

NT NO.	Home Contact Us Help Sign O
U.S. DE	EPARTMENT OF STATE R ELECTRONIC APPLICATION CENTER
CONSULA	R ELECTRONIC APPLICATION CENTER
COMPLETE	REVIEW SIGN
lication List	Online Immigrant Visa and Alien Registration Application (DS-260)
	Denote Weit/Eiter ('maining Liferenting
iing Started	Present Work/Education/Training Information
al	
d Phone	NOTE: Provide the following information concerning your current employment or education.
Travel	Primary Occupation
n/ 🕨	HOMEMAKER
	Oto and a second s
	Q: Do you have other occupations?
	A: @ Yes C No
	Provide the following information:
_	Other Occupation
r	OTHER
	Specify Other
	Other Employer or School Name
	Other Employer or School address:
	Street Address (Line 1)
	Street Address (Line 2) *Optional
	City
	State/Province
	Construction of Does Not Apply
	Postal Zone/ZIP Code
	Does Not Apply
	Country/Region - SELECT ONE -
	O: Does this job require at least 2 years of training or
	experience?
	A: CYes CNo
	Provide the following information:
	Job Title
	Describe the Type of Work you are doing. Be as
	specific as possible.
	Duties
	Employment Date From
	(Format: DD-MMM-YYYY) Employment Date To
	(Format: DD-MMM-YYYY)
	Add Another Remove
	In which occupation do you intend to work in the U.S.?
	Back: Previous U.S. Travel Back: Work/Education: Previous

Displayed only for Diversity Visa (DV) principal applicants when Primary Occupation is not "HOMEMAKER", "NOT EMPLOYED" or "STUDENT".
 Answer to "Do you have other occupations?" is "Yes". Other Occupation is "OTHER".



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Displayed for all applicants who meet one of the following criteria:

•The applicant is male and age is between 14 and 60

•The applicant is over the age of 14 and is from Burma, China, Cuba, India, Iran, North Korea, Pakistan, Saudi Arabia,

Sudan, Syria, or Stateless

•The applicant is retired, not employed, or is a homemaker

•The applicant is a principal applicant and is applying for any of the following visa classes: E11, E12, E13, E21, E31, E32, EW3, SD1, SR1, SE1, C51, T51, SI1, SQ1, SF1, SG1, SH1, SJ1, SK1, SN1, R51, and I51, DV-1.

The answer to both questions is 'No'.

COMPLETE	REVIEW	SIGN
	Online Immigrant Visa and Alien Registration Application (D	S-260)
Getting Started	Previous Work/Education/Training In	formation
Personal		
Address and Phone	NOTE: Please provide the following information.	
Family		
Previous U.S. Travel		
Work / Education / Training	Q: Were you previously employed?	
Present	A: CYes INO	
Previous	Q: Have you attended any educational institutions at a	Help: Level of Education
Additional	secondary level or above?	
Petitioner	A: CYes @ No	You must answer yes to this question if you have ever attended high
Security and Background		school, college, university, graduate school, doctoral
Social Security Number		program, or a vocational program.



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Displayed for all applicants who meet one of the following criteria:

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The applicant is male and age is between 14 and 60
The applicant is over the age of 14 and is from Burma, China, Cuba, India, Iran, North Korea, Pakistan, Saudi Arabia, Sudan, Syria, or Stateless
The applicant is retired, not employed, or is a homemaker

•The applicant is a principal applicant and is applying for any of the following visa classes: E11, E12, E13, E21, E31, E32, EW3, SD1, SR1, SE1, C51, T51, SI1, SQ1, SF1, SG1, SH1, SJ1, SK1, SN1, R51, and I51, DV-1.

Answer to both questions is 'Yes'.

	Online Immigrant Visa and Alien Registration Application (DS-	260)
ting Started	Previous Work/Education/Training Info	ormation
sonal	NOTE: Please provide the following information.	
nily	Note: Hease provide the following information.	
vious U.S. Travel	Q: Were you previously employed?	
ning sent	A: © Yes C No	
vious	Provide the following information on all of your employers from the last ten years, starting with the most recent employer.	
tioner	Employer Name	
urity and sground	Employer Street Address (Line 1)	
al Security Iber	Employer Street Address (Line 2) *Optional	
	City	
	State/Province	
	Postal Zone/ZIP Code	
	Country/Region	
	- SELECT ONE -	
	Job Title	
	Supervisor's Surnames	
	Do Not Know Supervisor's Given Names	
	Do Not Know	
	Employment Date From (Format: DD-MMM-YYYY) Employment Date To (Format: DD-MMM-YYYY)	
	🐮 Add Another 🚍 Remove	
	Q: Have you attended any educational institutions at a secondary level or above?	Help: Level of Education
	A: ©Yes CNo	You must answer yes to this question if you have ever attended high
	Number of Educational Institutions Attended:	school, college, university, graduate school, doctoral
	Provide the following information on all educational institutions at a secondary level or above you have attended.	program, or a vocational program.
	Name of Institution	
	Street Address (Line 1)	
	Street Address (Line 2) *Optional	
	City	
	State/Province	
	Does Not Apply	
	Postal Zone/ZIP Code	
	Country/Region - SELECT ONE -	
	Course of Study	Help: Course of Study
	Degree or Diploma	For high school course of study please indicate "Academic" or "Vocational." For all
	Date of Attendance From (Format: DD-MMM-YYYY)	other educational levels please indicate your major or concentration.
	Date of Attendance To	
	★ Add Another = Remove	

CEAC IV Form DS-260

Displayed for all applicants who selected 'Afghanistan' for 'Nationality' and is over the age of 14. The answer to

✓ Getti
✓ Pers
✓ Addr
✓ Fami
✓ Prev

Online Immigrant Visa and Alien Registration Application (DS-	SIGN 260)
Previous Work/Education/Training Info	rmation
NOTE: Please provide the following information.	
Q: Were you previously employed?	
A: • Yes C No	
Provide the following information on all your employment	
since 1995, starting with your most recent former employer. Employer Name	
Employer Street Address (Line 1)	
Employer Street Address (Line 2) *Optional	
City	
State/Province	
Postal Zone/ZIP Code	
Country/Region	
- SELECT ONE -	
Telephone Number	
Job Title	
Supervisor's Surnames	
Do Not Know	
Supervisor's Given Names	
Do Not Know	
Employment Date From	
(Format: DD-MMM-YYYY)	
Employment Date To	
(Format: DD-MMM-YYYY)	
* Add Another = Remove	
Q: Have you attended any educational institutions at a	Help: Level of Education
secondary level or above?	You must answer yes to
A: © Yes C No	this question if you have ever attended high school, college,
Number of Educational Institutions Attended:	university, graduate school, doctoral
Provide the following information on all educational institutions at a secondary level or above you have attended.	program, or a vocational program.
Name of Institution	
Street Address (Line 1)	
Street Address (Line 1) Street Address (Line 2) *Optional	
Street Address (Line 2) *Optional City State/Province	
Street Address (Line 2) *Optional	
Street Address (Line 2) *Optional City State/Province	
Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code	
Street Address (Line 2) *Optional	Help: Course of Study
Street Address (Line 2) *Optional	For high school course of study please indicate
Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE -	For high school course of study please indicate "Academic" or "Vocational." For all other educational levels
Street Address (Line 2) *Optional	For high school course of study please indicate "Academic" or "Vocational." For all
Street Address (Line 2) *Optional City City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region SELECT ONE - Course of Study Degree or Diploma Date of Attendance From Cormat: DD-MMM-YYYY)	For high school course of study please indicate "Academic" or "Vocational." For all other educational levels please indicate your
Street Address (Line 2) *Optional City City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region -SELECT ONE - Course of Study Degree or Diploma Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To	For high school course of study please indicate "Academic" or "Vocational." For all other educational levels please indicate your
Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - Course of Study Degree or Diploma Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)	For high school course of study please indicate "Academic" or "Vocational." For all other educational levels please indicate your
Street Address (Line 2) *Optional City City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region -SELECT ONE - Course of Study Degree or Diploma Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To	For high school course of study please indicate "Academic" or "Vocational." For all other educational levels please indicate your
Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - Course of Study Degree or Diploma Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)	For high school course of study please indicate "Academic" or "Vocational." For all other educational levels please indicate your
Street Address (Line 2) *Optional City City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region • SELECT ONE - Course of Study Degree or Diploma Material Context (Format: Does Not Marker) Material Context (Format: Does Not Apply) Det of Attendance From Material Context (Format: Does Not Apply) Degree or Diploma (Format: Does Not Apply) Degree or Diploma (Format: Does Not Apply) Degree or Diploma (Format: Does Not Apply) Degree or Diploma	For high school course of study please indicate "Academic" or "Vocational." For all other educational levels please indicate your

CEAC IV Form DS-260

both questions is 'Yes'.

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Displayed for all applicants who selected 'Iraq' for 'Nationality' and is over the age of 14. . The answer to both

CEAC IV Form DS-260

questions is 'Yes'.

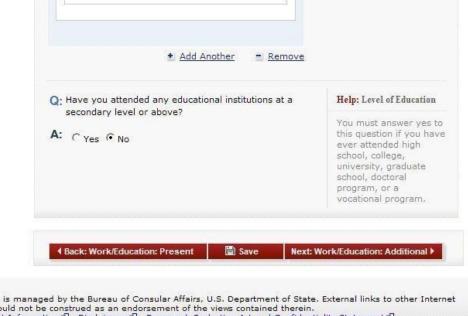
REVIEW Online Immigrant Visa and Alien Registration Application (DS-2	sign 260)
Previous Work/Education/Training Info	
Frevious work/Education/Training Into	IIIIation
NOTE: Please provide the following information.	
Q: Were you previously employed?	
A: • Yes C No	
Provide the following information on all your employment, starting with your most recent former employer.	
Employer Name	
Employer Street Address (Line 1)	
Employer Street Address (Line 2) *Optional	
City	
State/Province	
Postal Zone/ZIP Code	
Country/Region - SELECT ONE -	
Telephone Number	
Job Title	
Supervisor's Surnames	
Supervisor's Given Names	
Do Not Know	
Employment Date From	
(Format: DD-MMM-YYYY) Employment Date To	
(Format: DD-MMM-YYYY)	
★ Add Another = Remove	
Q: Have you attended any educational institutions at a secondary level or above?	Help: Level of Education
A: © Yes C No	this question if you have ever attended high school, college,
Number of Educational Institutions Attended:	university, graduate school, doctoral program, or a
Provide the following information on all educational institutions at a secondary level or above you have attended.	vocational program.
Name of Institution	
Street Address (Line 1)	
Street Address (Line 2) *Optional	
City	
State/Province	
Does Not Apply	
Postal Zone/ZIP Code	
Country/Region - SELECT ONE -	
Course of Study	Help: Course of Study
Degree or Diploma	For high school course of study please indicate "Academic" or
Date of Attendance From	"Vocational." For all other educational levels please indicate your
(Format: DD-MMM-YYYY)	major or concentration.
Date of Attendance To	
(Format: DD-MMM-YYYY)	
(Format: DD-MMM-YYYY)	

CEAC IV Form DS-260

Displayed for all DV principal applicants who answer "Yes" to the first question and "No" to the other questions on the page.

CEAC IV Form DS-260

	ELECTRONIC APPLICATION CENTER	Sec. 1
COMPLETE	REVIEW	SIGN
list	Online Immigrant Visa and Alien Registration Application (DS-260)	
	Previous Work/Education/Training Informat	ion
ed	0	
Phone	NOTE: Please provide the following information.	
	NOTE. Please provide the following information.	
Travel		
ion / 🕨 🕨	Q: Were you previously employed?	
	A: res C No	
	Provide the following information on all of your employers	
	from the last ten years, starting with the most recent	
	employer.	
	Employer Name	
	Employer Street Address (Line 1)	
ŧ.		
	Employer Street Address (Line 2) *Optional	
	City	
	State/Province	
	Does Not Apply	
	Postal Zone/ZIP Code	
	Does Not Apply	
	Country/Region - SELECT ONE -	
	Telephone Number	
	Job Title	
	Supervisor's Surnames	
	C Do Not Know	
	Supervisor's Given Names	
	☐ Do Not Know	
	Employment Date From	
	(Format: DD-MMM-YYYY)	
	Employment Date To	
	(Format: DD-MMM-YYYY)	
	Q: Does this job require at least 2 years of training or experience?	
	A: CYes C No	
	Provide the following information:	
	Describe the Type of Work you are doing. Be as specific as possible.	
	Duties	





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CEAC IV Form DS-260

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<pre>should be been and failed an</pre>		from the last ten years, starting with the most recent	
<pre>structure information inf</pre>	AND A	Employer Name	
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Supervision's Given Names I'Do hot Know Engloyment Date From Utermat: Do HMMH-YNYY) Engloyment Date To Or: Description Or: Description Or: Description		Supervisor's Surnames	
Do Not Know Projebyment Dele Frem (terms: Do MMAYNYY) Construction (terms: Do MMAYNYY) Construction		C Do Not Know	
Findowment Date From ('rorm:: DO-MMM-YYYY) C: Does this bot notions: A: C: Yes C: No Provide the following information: Description: C: force:: C: No: Provide the following information: Provid		Supervisor's Given Names	
Image: Image			
Employment Date To (Yerman: Do MMM YYYY) G: Socs bids Provide the following information: Describe the Type of Work you are doing. De at a social bid information: Describe the Type of Work you are doing. De at a social bid information at a social bid information at a social bid information and all educational institutions at a candidary level or above? G: trave you attended any educational institutions at a candidary level or above? A: @ Yes C No Number of Educational Institutions Attended: Number of Educational Institutions Attended: Chr Street Address (Line 2) "Optional Chr Street Address (Une 2) "Optional			
Yomm: DD-WMH-YYYY Q: Prost billing information: Describe the Type of Work you are doing. Be are specified in the following information: Describe the Type of Work you are doing. Be are specified in the following information: Describe the Type of Work you are doing. Be are specified in the following information and secondary level or above? A: G Yes C Ye A: G Yes C Ye C: frive you attended any educational institutions at secondary level or above? A: G Yes C Ye Provise the following information on all educational institutions at cancer years of the following information on all educational institutions at cancer years of years of the following information: Street Address (Line 1) Street Address (Line 2) "Optional Chy Provise the following information: Steet Address (Line 2) "Optional Chy Steet Address (Line 2) Countery/Region -Steet Counter Degree, Diplinm or Certificats Received D			
experience? A: G Yes G Yoo Provide the following information: Describe the Type of Work you are doing. Be as a specific se possible. Diffic Diffic Diffic B: Add Another R: G Yes C No Number of Educational Institutions at a secondary level or above? A: G Yes C No Number of Educational Institutions at at a secondary level or above you have attended. Nume of Institution Street Address (Line 2) **Optional Gity Street Address (Line 2) **Optional Gity State/Province Provide the following information Courtery/Ragion - SELECT ONE: Provide the following information: Specify Other Dist of Attendance from Course of Study Paster Or Attendance To Dist of Attendance To Course: DD-MMMH-YOYD)			
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Describe the Type of Work you are doing. Be as specific as possible. Disc			
specific as possible. Dities Image: Control of the set of the			
 ▲ Add Another ■ Remark ▲ Add Another ■ Remark Add Another ■ Remark A: Add Another ■ Remark A: Add Another ■ Remark A: Arg Yes C No Momber of Educational Institutions Attended! □ Torvide the following information on all educational institutions at a secondary level or above you have attended high and a secondary level or above you have attended. Torvide the following information on all educational institutions at a secondary level or above you have attended. Torvide the following information on all educational institutions at a secondary level or above you have attended. Torvide the following information: Steer Address (Line 2) "Optional Country/Region Steer TONE: Torvide the following information: Steer TONE: Steer TONE		specific as possible.	
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Number of Educational Institutions university, or advate school, doctoral program, or a vocational program, or a vocational program, or a vocational program, or a vocational program. Name of Institution		A: ryes C No	
at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional City State/Province Does Not Apply Courtry/Region - SELECT ONE - Highest Level of Education Completed - SELECT ONE - Provide the following information: Specify Other Specify Other Course of Study Despree, Diploma or Certificate Received Pate of Attendance From (Format: DO-MMME-YYYY) (Format: DO-MMM-YYYY)			ever attended high
Street Address (Line 1) Street Address (Line 2) "Optional City State/Province Tooes Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - Vighest Level of Education Completed - SELECT ONE - Provide the following information: Specify Other Specify Other Degree, Diploma or Certificate Received Date of Attendance From Courres to Du-MMH-YYYY) Date of Attendance To I Correat: DD-MMH-YYYY)			ever attended high school, college, university, graduate school, doctoral
Street Address (Line 2) *Optional City City State/Province Postal Zone/ZIP Code Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region -SELECT ONE - Highest Level of Education Completed -SELECT ONE - Provide the following information: Specify Other Course of Study Degree, Diploma or Certificate Received Date of Attendance From (Format: DD-MIMK-YYYY)		Provide the following information on all educational institution	ever attended high school, college, university, graduate school, doctoral program, or a
City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - Wighest Level of Education Completed - SELECT ONE - Provide the following information: Specify Other Specify Other Course of Study Degree, Diploma or Certificate Received Date of Attendance From Stated Attendance To Stated Attendance To State Course of Attendance To		Provide the following information on all educational institution at a secondary level or above you have attended.	ever attended high school, college, university, graduate school, doctoral program, or a
City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - Provide the following information: Specify Other Specify Other Course of Study Degree, Diploma or Certificate Received Date of Attendance From (Format: DD-MMM-YYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution	ever attended high school, college, university, graduate school, doctoral program, or a
State/Province Postal Zone/ZIP Code Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region •SELECT ONE - Vightst Level of Education Completed •SELECT ONE - Provide the following information: Specify Other Provide the following information: Specify Other Vocational. 'For all ourse of Study Degree, Diploma or Certificate Received Date of Attendance From Vocationate: To-MMM-YYYY) Date of Attendance To		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1)	ever attended high school, college, university, graduate school, doctoral program, or a
Postal Zone/ZIP Code Does Not Apply Country/Region -SELECT ONE - Highest Level of Education Completed -SELECT ONE - Provide the following information: Specify Other Specify Other Course of Study Deare of Study Date of Attendance From Course: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional	ever attended high school, college, university, graduate school, doctoral program, or a
Pestal Zone/ZIP Code Country/Region • SELECT ONE - • SELECT ONE - • SELECT ONE - Provide the following information: Specify Other Specify Other Secify other <td></td> <td>Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional</td> <td>ever attended high school, college, university, graduate school, doctoral program, or a</td>		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional	ever attended high school, college, university, graduate school, doctoral program, or a
Country/Region - SELECT ONE - Highest Level of Education Completed - SELECT ONE - Provide the following information: Specify Other Specify Other Course of Study Degree, Diploma or Certificate Received Date of Attendance From Cormat: DD-MMM-YYYY) Date of Attendance To Cormat: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional City State/Province	ever attended high school, college, university, graduate school, doctoral program, or a
- SELECT ONE - Highest Level of Education Completed - SELECT ONE - Provide the following information: Specify Other Specify Oth		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) "Optional City State/Province Does Not Apply Postal Zone/ZIP Code	ever attended high school, college, university, graduate school, doctoral program, or a
- SELECT ONE - Provide the following information: Specify Other Specify Other Other Vocational." For all other educational levels please indicate your major or concentration. Course of Study Degree, Diploma or Certificate Received Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply	ever attended high school, college, university, graduate school, doctoral program, or a
Provide the following information:		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) "Optional City City Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE -	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
Course of Study Degree, Diploma or Certificate Received Date of Attendance From V V (Format: DD-MMM-YYYY) Date of Attendance To V		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) "Optional City City Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - Mighest Level of Education Completed	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
Course of Study Degree, Diploma or Certificate Received Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) "Optional City City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region -SELECT ONE - Highest Level of Education Completed -SELECT ONE - Provide the following information:	ever attended high school, college, university, graduate school, doctoral program, or a vocational program. Help: Course of Study For high school course of study please indicate "Academic" or
Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional City Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - W Highest Level of Education Completed - SELECT ONE - W Provide the following information: Specify Other	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional City Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - W Highest Level of Education Completed - SELECT ONE - W Provide the following information: Specify Other	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
Date of Attendance From (Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional City Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - W Highest Level of Education Completed - SELECT ONE - W Provide the following information: Specify Other	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
Date of Attendance From Image: Constraint of Attendance To Image: Constraint of Tott		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) *Optional City Street Address (Line 2) *Optional City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - W Highest Level of Education Completed - SELECT ONE - W Provide the following information: Specify Other	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
(Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended.	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
(Format: DD-MMM-YYYY) Date of Attendance To (Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended.	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
(Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) "Optional City City State/Province Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region SELECT ONE - V Highest Level of Education Completed SELECT ONE - V Provide the following information: Specify Other Course of Study Degree, Diploma or Certificate Received Date of Attendance From	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
(Format: DD-MMM-YYYY)		Provide the following information on all educational institution at a secondary level or above you have attended.	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
* Add Another = Remove		Provide the following information on all educational institution at a secondary level or above you have attended.	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.
		Provide the following information on all educational institution at a secondary level or above you have attended. Name of Institution Street Address (Line 1) Street Address (Line 2) "Optional City City Postal Zone/ZIP Code Does Not Apply Postal Zone/ZIP Code Does Not Apply Country/Region - SELECT ONE - Highest Level of Education Completed - SELECT ONE - Provide the following information: Specify Other Course of Study Degree, Diploma or Certificate Received Date of Attendance From Course of Attendance To V	ever attended high school, college, university, graduate school, doctoral program, or a vocational program.

answer "Yes" to all questions on the page.

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C

CEAC IV Form DS-260

Displayed for all applicants who are 14 years or older. The answer to the question is unanswered. No additional questions are triggered if answered 'No'.



Displayed for all applicants who are 14 years or older. The answer to the question is 'Yes'.

CEAC IV Form DS-260

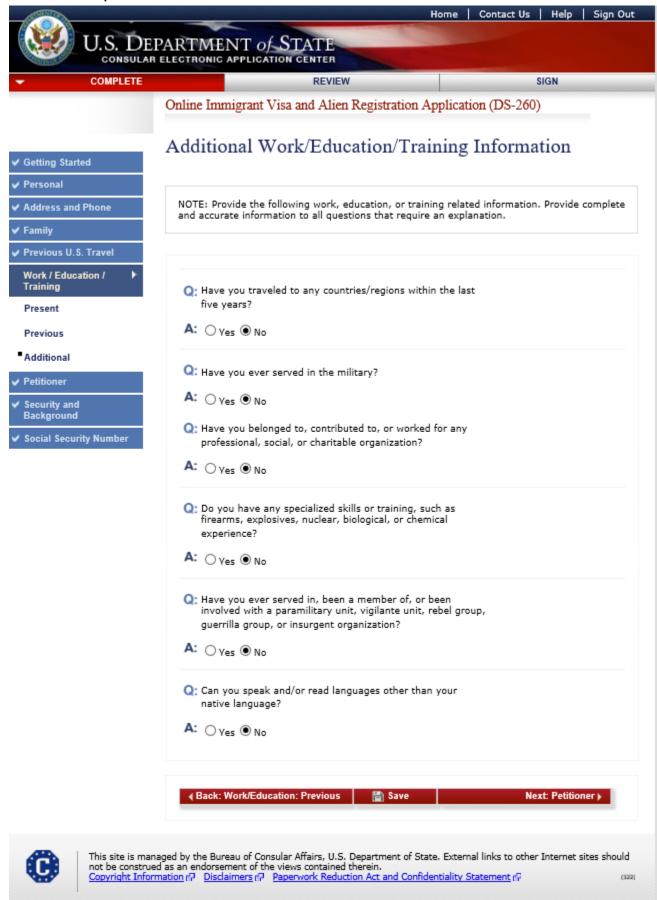
	Home Contact Us Help Sig	n Out
US DEP	PARTMENT OF STATE	
- COMPLETE	REVIEW SIGN	
	Online Immigrant Visa and Alien Registration Application (DS-260)	
✓ Getting Started	Additional Work/Education/Training Information	
✓ Getting Started ✓ Personal		
✓ Personal ✓ Address and Phone	NOTE: Provide the following work, education, or training related information. Provide comp	lete
✓ Family	and accurate information to all questions that require an explanation.	
✓ Previous U.S. Travel		
✓ Work / Education /		
Training	Q: Have you traveled to any countries/regions within the last	
Present	five years?	
Additional	A: O _{Yes} O _{No}	
✓ Petitioner	Provide a List of Countries/Regions Visited:	
 Security and Background 	Country/Region - SELECT ONE -	
✓ Social Security Number	- SELECT ONE -	
	Add Another Remove	
	Q: Have you ever served in the military?	
	A: • Yes O No	
	Provide the following information:	
	Name of Country/Region - SELECT ONE -	
	Branch of Service	
	Rank/Position	
	Military Specialty	
	Date of Service From	
	(Format: DD-MMM-YYYY)	
	Date of Service To	
	(Format: DD-MMM-YYYY)	
	Add Another Remove	
	Back: Work/Education: Present Save Next: Petitioner	





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Displayed for all applicants who selected 'Iraq' for 'Nationality' or 'Other Nationality, is 14 years or older, and is Male. Answers to questions are 'No'.



Displayed for all applicants who meet one of the following two criteria:

•The applicant is Male and age is between 14 and 60 and Nationality (or Other Nationality) is NOT AFGHANISTAN, BURMA, CHINA, CUBA, INDIA, IRAQ, IRAN, NORTH KOREA, PAKISTAN, SAUDI

ARABIA, SUDAN, SYRIA, OR STATELESS

•The applicant is 14 years or older and Nationality (or Other Nationality) is AFGHANISTAN, BURMA, CHINA, CUBA, INDIA, IRAN, NORTH KOREA, PAKISTAN, SAUDI ARABIA, SUDAN, SYRIA, OR STATELESS.

•The applicant is 14 years or older, Nationality is IRAQ, and is Female.

Answers to questions are 'No'.

CEAC IV Form DS-260

COMPLETE		REVIEW		SIGN
	Online Immigra	ant Visa and Alien Registra	ation Application (DS	5-260)
	A 11141	XXl-/TZ downti	/T	
tting Started	Additional	Work/Education	Training Info	rmation
rsonal				
dress and Phone		the following work, education,		mation. Provide complet
mily	and accurate in	formation to all questions that	require an explanation.	
evious U.S. Travel				
ork / Education / 🕨				
aining		traveled to any countries/regio	ns within the last	
esent	five years?	2		
evious	A: O Yes 🖲	No		
lditional				
titioner	Q: Have you e	ever served in the military?		
curity and	A: O Yes 🖲	No		
ckground	O: Have you	belonged to, contributed to, or	worked for any	
cial Security Number		al, social, or charitable organiz		
	A: O Yes 🖲	No		
		ve any specialized skills or trai explosives, nuclear, biological,		
	experience			
	A: O Yes 🖲	No		
		ever served in, been a membe ith a paramilitary unit, vigilant		
		roup, or insurgent organization	•	
	A: O Yes 🖲	No		
		peak and/or read languages ot	her than your	
	native lang			
	A: O Yes 🖲	No		
	Back: Work/	Education: Previous 🛛 🛗 S	ave	Next: Petitioner)

Displayed for all applicants who meet one of the following two criteria:
The applicant is Male and age is between 14 and 60 and Nationality (or Other Nationality) is NOT
AFGHANISTAN, BURMA, CHINA,
CUBA, INDIA, IRAQ, IRAN, NORTH
KOREA, PAKISTAN, SAUDI ARABIA, SUDAN, SYRIA, OR STATELESS
The applicant is 14 years or older and
Nationality (or Other Nationality) is
AFGHANISTAN, BURMA, CHINA,

CUBA, INDIA, IRAQ, IRAN, NORTH KOREA, PAKISTAN, SAUDI ARABIA, SUDAN, SYRIA, OR STATELESS.

Answers to questions are 'Yes'. Part 1

	Ноп	ne Contact Us	Help Sign Out
	PARTMENT OF STATE		
	REVIEW		SIGN
	Online Immigrant Visa and Alien Registration Applicati	on (DS-260)	
			ation
 ✓ Getting Started ✓ Personal 	Additional Work/Education/Traini	ing mitorina	111011
✓ Address and Phone	NOTE: Provide the following work, education, or trainin complete and accurate information to all questions that		
 ✓ Family ✓ Previous U.S. Travel 			
Work / Education /			
Training Present	Q: Have you traveled to any countries/regions within five years?	the last	
Previous	A: • Ves O No		
A dditional	Provide a List of Countries/Regions Visited:		
✓ Petitioner	Country/Region		
✓ Security and Background	- SELECTONE -	\checkmark	
✓ Social Security Number	* Add Another	Remove	
	Q: Have you ever served in the military?		
	A: • Ves O No		
	Provide the following information:		
	Name of Country/Region		
	- SELECTONE -	\checkmark	
	Branch of Service	-	
	Rank/Position		
	Military Specialty		
	Date of Service From		
	(Format: DD-MMM-YYYY)		
	(Format: DD-MMM-VVVV)		
	* Add Another	- <u>Remove</u>	
	Q: Have you belonged to, contributed to, or worked for professional, social, or charitable organization?	or any	
	A: • Ves O No		
	Provide a List of Organizations		
	Organization Name	1	
	L	1	
	Add Another Remo	ove	

Part 2

CEAC IV Form DS-260

	professional, social, or charitable organization?	
A:	⊙ Ves ○ No	
	Provide a List of Organizations	
	Organization Name	
	* Add Another E Remove	
Q:	Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience?	
A:	⊙ Ves ○ No	
	Explain Skills or Training	
	0	
	Have you ever served in, been a member of, or been involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain	
	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No	
	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No	
A:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language?	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language? • Ves O No	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language?	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language? • Ves O No	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language? • Ves O No	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language? • Ves O No	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language? • Ves O No	
A: Q:	involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? • Ves O No Explain Can you speak and/or read languages other than your native language? • Ves O No	



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(122)

Displayed for all applicants who meet one of the following two criteria: •The applicant is Male and age is between 14 and 60 and Nationality (or Other Nationality) is NOT AFGHANISTAN, BURMA, CHINA, CUBA, INDIA, IRAQ, IRAN, NORTH KOREA, PAKISTAN, SAUDI ARABIA, SUDAN, SYRIA, OR STATELESS •The applicant is 14 years or older and Nationality (or Other Nationality) is AFGHANISTAN, BURMA, CHINA, CUBA, INDIA, IRAQ, IRAN, NORTH KOREA, PAKISTAN, SAUDI ARABIA, SUDAN, SYRIA, OR STATELESS.

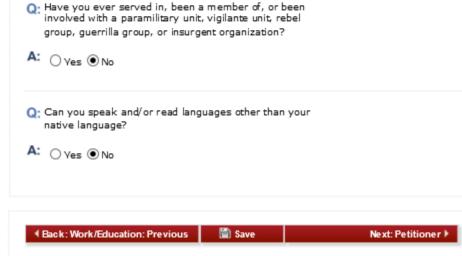
'Iraq' is selected for

'Name of Country/Region'. Answers to questions are 'No' except for 'Have you ever served in the military?'. 'Name of

Country/Region' is 'Iraq'.

CEAC IV Form DS-260

			Ноп	ne Contact L	ls Help	Sign Out
U.S. DEL CONSULAR		MENT of STATE	100			
 COM PLETE 		REVIEW			SIGN	
	Online	Immigrant Visa and Alien Reg	istration Applicati	on (DS-260)		
✓ Getting Started	Add	itional Work/Educa	ation/Traini	ng Inform	ation	
✓ Personal						
✓ Address and Phone	NOTE	E: Provide the following work, ea	ducation, or training	g related inform	ation. Provid	le
✓ Family		plete and accurate information t				
✓ Previous U.\$. Travel						
Work / Education /						
Training		Have you traveled to any count five years?	ries/regions within	the last		
Present						
Previous		⊙ Yes ○ No				
A dditional		Provide a List of Countries/Regi	ons Visited:			
✓ Petitioner		Country/Region				
✓ Security and Background		- SELECTONE -		\checkmark		
✓ Social Security Number			Add Another	Remove		
		IRAQ		~		
		, Branch of Service				
		Rank/Position				
		Military Specialty				
		Date of Service From				
		(Format: DD-MMM-VVVV)				
		Date of Service To				
		(Format: DD-MMM-VVVV)				
		Specify Location				
				~		
				~		
		(i.e. base, city, region)				
			 Add Another 	= Remove		
				- Memore		
	0:	Have you belonged to, contribut	ed to, or worked fo	or any		
-		professional, social, or charitabl		-		
	A:	⊖ Yes ◉ No				
		Do you have any specialized sk firearms, explosives, nuclear, b				
		experience?				
	A :	🔿 Ves 🖲 No				





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(122)

CEAC IV Form DS-260

Displayed for all applicants.



Displayed for all applicants. Answered 'Father' to 'Petitioner is my'. The same questions display if 'Mother', 'Brother', 'Sister', 'Spouse', 'Child', 'Stepfather', 'Stepmother', 'Uncle', 'Aunt', 'Grandparent', or 'In-law' is selected.

CEAC IV Form DS-260

COMPLETE	REVIEW	SIGN		
	Online Immigrant Visa and Alien Registration Application (DS	5-260)		
tting Started	Petitioner Information			
rsonal dress and Phone	NOTE: Please provide the following information concerning the petition on your behalf.	e individual/entity that filed a		
mily	petition on your benair.			
evious U.S. Travel				
ork / Education / aining	Petitioner is my FATHER	Help: Petitioner		
titioner	Petitioner	Your petitioner is generally the U.S. person or business who made a formal request that you be considered		
curity and	Petitioner Surnames			
Background Social Security	Petitioner Given Names	for an immigrant visa or permanent legal		
Number		residence. Your petitioner is generally your U.S. citizen		
	Address and Phone Number of Petitioner	relative, your U.S. permanent resident		
	Street Address (Line 1)	relative, or your U.S. employer. In some		
	Street Address (Line 2) *Optional	cases you may have filed a petition on your own behalf.		
		Help: Email Address		
	City	The email address you		
	State/Province	provide for the petitioner may be used		
	Does Not Apply	for correspondence purposes. Please		
	Postal Zone/ZIP Code	provide an email address that is secure and to which your		
	Country/Region	petitioner has reasonable access.		
	- SELECT ONE -			
	Telephone			
	(e.g., 555-5555)			
	Mobile/Cell Telephone			
	() Does Not Apply (e.g., 555-555-5555)			
	Email Address			
	(e.g., emailaddress@example.com)			



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Displayed for all applicants. Answered 'Employer' to the question 'Petitioner is my'. The same questions display if 'Prospective Employer' is selected. If 'Other' is selected, an additional 'Specify Other' box is displayed.

CEAC IV Form DS-260

	Home Co	ntact Us Help Sign Out			
U.S. DE	PARTMENT OF STATE R ELECTRONIC APPLICATION CENTER	oltip Language: English 💽			
COMPLETE	REVIEW	SIGH			
Application List	Electronic Immigrant Visa and Alien Registration Application				
✓ Getting Started	Petitioner Information				
🗸 Personal					
✓ Address and Phone	NOTE: Please provide the following information concerning the petition on your behalf.	individual/entity that filed a			
🗸 Family					
✓ Previous U.S. Travel					
✓ Work / Education / Training	Petitioner is my EMPLOYER	Help: Petitioner			
Petitioner 🕨 🕨	Your petitioner is Petitioner generally the U.S.				
Security and Background	Organization Name	person or business who made a formal request that you be considered			
Social Security Humber		for an immigrant visa or permanent legal residence, Your			
	Address and Phone Number of Petitioner	petitioner is generally your U.S. citizen			
Help: Navigation Buttons Click on the buttons above to access previously entered data.	Street Address (Line 1)	relative, your U.S. permanent resident			
	Street Address (Line 2) *Optional City	relative, or your U.S. employer. In some cases you may have filed a petition on your own behalf.			
	State/Province				
	Postal Zone/ZIP Code				
	Country - SELECT ONE -				
	Telephone (
	Mobile/Cell Telephone () [(e.g., 555-5555)				
	Email Address	Help: Email Address			
	(e.g., emailaddress@example.com)	The email address you provide for the petitioner may be used			



Displayed for all applicants. Answered 'Self' to the question 'Petitioner is my'.

CEAC IV Form DS-260

COMPLETE		REVIEW		SIGN
	Online Immigrant	Visa and Alien Registratio	n Application (DS-	-260)
Getting Started	Petitioner I	Information		
Personal				
Address and Phone	NOTE: Please pr petition on your	rovide the following informa • behalf.	tion concerning the	individual/entity that filed a
✓ Family				
Previous U.S. Travel Work / Education /	Petitioner is my			Help: Petitioner
Petitioner Security and Background Social Security Number	SELF			Your petitioner is generally the U.S. person or business who made a formal request that you be considered for an immigrant visa o permanent legal residence. Your petitioner is generally your U.S. citizen relative, your U.S. permanent resident relative, or your U.S. employer. In some cases you may have filed a petition on your own behalf.

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C

CEAC IV Form DS-260

Security and Background: Medical and Health Information Page

Displayed for all applicants. Answers to questions are 'No'.

CEAC IV Form DS-260

COMPLETE		REVIEW		SIGN
	Online Immigrant	Visa and Alien Registratio	n Application (DS-260)	
arted		nd Background: N	Medical and Hea	lth
	Information	n		
and Phone U.S. Travel ucation /	accurate inform to persons who States (except of to you? A YES a that should you	the following security and bation to all questions that re are within specific categorie when a waiver is obtained in answer does not automatical ou answer Yes to any of a provide documentation t	equire an explanation. A vis as defined by law as inadm advance). Are any of the ly signify ineligibility for a the following questions,	a may not be issued ssible to the United following applicable visa. Please note you may be
5				
and	A: C Yes C Q: Do you hav	ve documentation to establis accinations in accordance w	sh that you have	





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CEAC IV Form DS-260

Security and Background: Medical and Health Information Page

Displayed for all applicants. Answers to questions are 'Yes'.

COMPLETE	REVIEW	SIGN
	Online Immigrant Visa and Alien Registration Applie	cation (DS-260)
ng Started	Security and Background: Medic	cal and Health
onal	Information	
ess and Phone		
ly	NOTE: Provide the following security and backgroun accurate information to all questions that require an	explanation. A visa may not be issued
ious U.S. Travel	to persons who are within specific categories define States (except when a waiver is obtained in advanc	e). Are any of the following applicable
k / Education / ning	to you? A YES answer does not automatically signify that should you answer Yes to any of the follo requested to provide documentation to suppo	owing questions, you may be
itioner		
surity and 🕨 🕨	Q: Do you have a communicable disease of public	health
edical and alth	A: • Yes C No	
minal		
curity 1	Explain	
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migration Law plations 1		
scellaneous 1		
scellaneous 2	Q: Do you have documentation to establish that y received vaccinations in accordance with U.S. I	
cial Security mber	A: • Yes C No	
	Q: Do you have a mental or physical disorder that is likely to pose a threat to the safety or welfar yourself or others?	: poses or e of
	A: • Yes C No	
	Explain	
	- 6	
		-



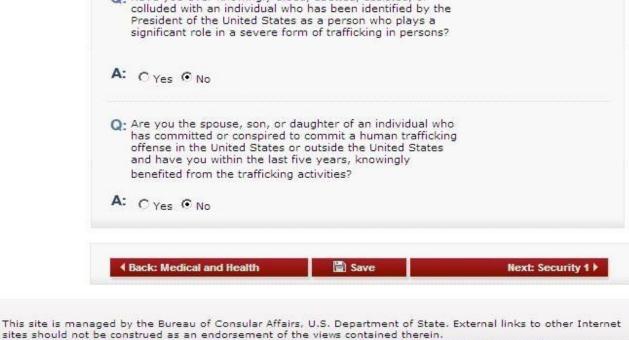


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Security and Background: Criminal Information Page

Displayed for all applicants. Answers to questions are 'No'.

	Ho	me Contact Us Help Sign
US DE	PARTMENT of STATE	
	R ELECTRONIC APPLICATION CENTER	
COMPLETE	REVIEW	SIGN
	Online Immigrant Visa and Alien Registration Applicat	$fion (DS_260)$
	Online miningrant visa and Anen Registration Applicat	lion (DS-200)
	Security and Background: Crimin	al Information
Getting Started	Security and Background, Chimin	ai information
Personal		
Address and Phone	NOTE: Provide the following security and background accurate information to all guestions that require an e	
Family	to persons who are within specific categories defined I States (except when a waiver is obtained in advance)	by law as inadmissible to the United
Previous U.S. Travel	to you? A YES answer does not automatically signify in that should you answer Yes to any of the follow	neligibility for a visa. Please note
Previous 0.5. Travel	requested to provide documentation to support	
Work / Education / Training		
Petitioner	Q: Have you ever been arrested or convicted for an	y offense
Security and Background	or crime, even though subject of a pardon, amne other similar action?	sty, or
Medical and Health	A: C Yes © No	
Criminal		
Max Bay M	Q: Have you ever violated, or engaged in a conspira	
Security 1	violate, any law relating to controlled substances	2
Security 2	A: CYes INO	
Immigration Law		
Violations 1	• Are you the spouse, son, or daughter of an indivi	dual who
Miscellaneous 1	has violated any controlled substance trafficking have knowingly benefited from the trafficking act	law, and
Miscellaneous 2	the past five years?	ivides in
	A: Cyes INO	
Social Security Number	Yes • No	
	Q: Are you coming to the United States to engage in prostitution or unlawful commercialized vice or ha	
	been engaged in prostitution or procuring prostitu	
	within the past 10 years?	
	A: C Yes © No	
	Q: Have you ever been involved in, or do you seek	to
	engage in, money laundering?	
	A: C Yes O No	
	102 100	
	Q: Have you ever committed or conspired to commi	
	human trafficking offense in the United States or the United States?	outside
	A: C Yes C No	
	Q: Have you ever knowingly aided, abetted, assisted colluded with an individual who has been identified	



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CEAC IV Form DS-260

Security and Background: Criminal Information Page

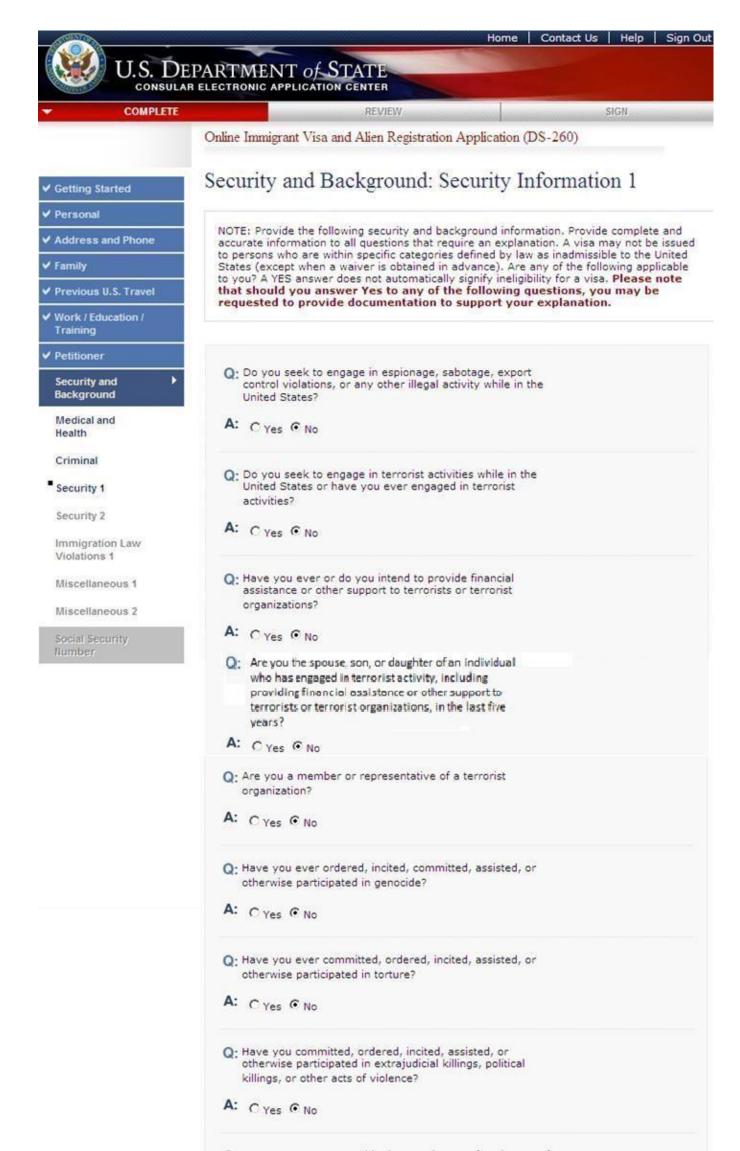
Displayed for all applicants. Answers to questions are 'Yes'.

CEAC IV Form DS-260

Security and Background: Security Information 1 Page

Displayed for all applicants. Answers to questions are 'No'.

CEAC IV Form DS-260







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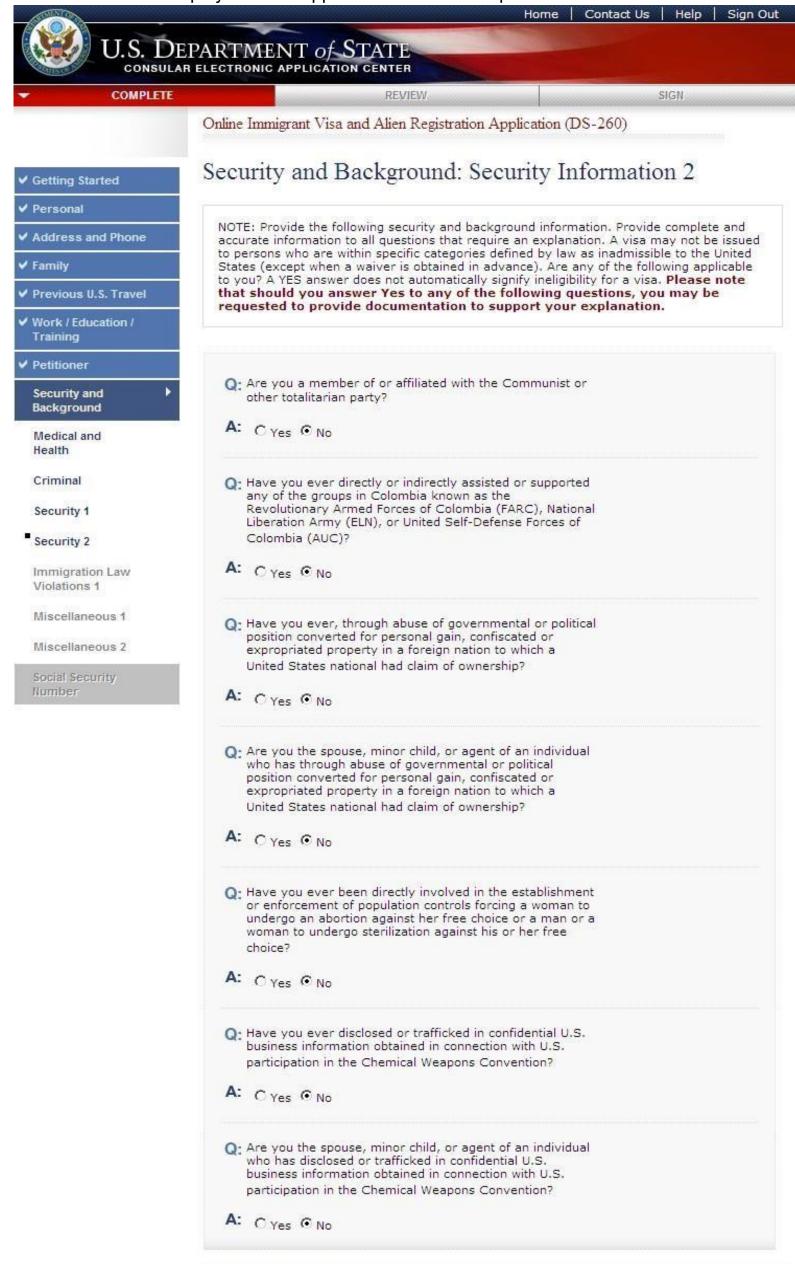
Security and Background: Security Information 1 Page

Displayed for all applicants. Answers to questions are 'Yes'. Contact Us | Help | Sign Out

to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable		Online Immigrant Visa and Alien Registration Application (DS-260)
Image: Comparison of a diperticular data studied as a sequence of the information of a diperticular data of the information of the in	tarted	Security and Background: Security Information 1
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Explain If we you committed, ordered, incited, assisted, or observate participated in extrayudicial assisted or or or observate participated or or an extrayudicial assisted or or observate participated or or an extrayudicidated in extrayudicida		Q; Have you ever committed, ordered, incited, assisted, or otherwise participated in torture?
 A: there you committed, ordered, included, assisted, or orderedsis participated in extragadicial sulings, political solings, or other acts of violence? A: A yes C No 		A: Pyes CNO
chervise participated in extraguidical killings, political A: @ Yes C No Explain Q: Have you ever engaged in the recruitment of or the use of child soldiers? A: @ Yes C No Explain Q: Have you, while serving as a government official, been responsible for or directly carried out; at any time, particularly server violations of religious freedom? A: @ Yes C No Explain		
differences participated in extrajudicula killings, political killings, or other sets of violence? A: A res C No Explain		
cherwise participated in extraguidical killings, political Al: R Yes C No Evoluin C: Have you ever engaged in the recruitment of or the use of child soldiers? Al: R Yes C No Evolution C: Have you, while serving as a government official, been responsible for or directly carried out, at any time, patiential of Yes C No Explain Al: R Yes C No		
A: R Yes C No Explain C; Have you ever engaged in the recruitment of or the use of child soldiers? A: R Yes C No Explain C; Have you, while serving as a government official, been responsible for or directly corried out, at any time, paticularly ever violations of religious freedom? A: R Yes C No Explain		otherwise participated in extrajudicial killings, political
Explain C: Have you ever engaged in the recruitment of or the use of child soldiers? A: C: Yes: C: No Explain C: Have you, while serving as a government official, been responsible for or directly corried out, at any time, particularly service violations of religious freedom: A: C: Yes: C: No Explain		
Q: Have you ever engaged in the recruitment of or the use of child soldiers? A: If Yes C too Explain Image: Compare the serving as a government official, been responsible for or directly cerned out, at any time, particularly severe violations of religious freedom? A: If Yes C too Explain Image: Compare the serving as a government official, been responsible for or directly cerned out, at any time, particularly severe violations of religious freedom? A: If Yes C too Explain		Explain
child soldiers? A: R Yes C No Explain Q: Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? A: P Yes C No Explain		2
child soldiers? A: C ves C No Explain Q: Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly sevare violations of religious freedom? A: C ves C No Explain		
A: @ ves C No Explain		
C: Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? A: @ Yes C No Explain		
O: Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? A: •• Yes: C No Explain		
responsible for on directly carried out, at any time, particularly severe violations of religious freedom? A: eryes C No Explain		2
responsible for or directly carried out, at any time, particularly severe violations of religious freedom? A: @ Yes C No Explain		2
particularly severe violations of religious freedom? A: @ yes C No Explain		responsible for or directly carried out, at any time,
Deplein		particularly severe violations of religious freedom?
A M		
		2

Security and Background: Security Information 2 Page

Displayed for all applicants. Answers to questions are 'No'.







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CEAC IV Form DS-260

Security and Background: Security Information 2 Page

Displayed for all applicants. Answers to questions are 'Yes'.

COMPLETE	REVIEW SIGN
	Online Immigrant Visa and Alien Registration Application (DS-260)
tting Started	Security and Background: Security Information 2
dress and Phone nily evious U.S. Travel ork / Education / aining	NOTE: Provide the following security and background information. Provide complete and accurate information to all questions that require an explanation. A visa may not be issued to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable to you? A YES answer does not automatically signify ineligibility for a visa. Please note that should you answer Yes to any of the following questions, you may be requested to provide documentation to support your explanation.
titioner curity and	Q: Are you a member of or affiliated with the Communist or other totalitarian party?
ckground edical and	A: CYes CNo
alth iminal	Explain
curity 1 curity 2	
migration Law plations 1 scellaneous 1	Q: Have you ever directly or indirectly assisted or supported any of the groups in Colombia known as the Revolutionary Armed Forces of Colombia (FARC), National
scellaneous 2 cial Security	Liberation Army (ELN), or United Self-Defense Forces of Colombia (AUC)?
mber	A: • Yes C No Explain
	Q: Have you ever, through abuse of governmental or political position converted for personal gain, confiscated or expropriated property in a foreign nation to which a United States national had claim of ownership?
	A: © Yes C No
	Explain
	 Q: Are you the spouse, minor child, or agent of an individual who has through abuse of governmental or political position converted for personal gain, confiscated or expropriated property in a foreign nation to which a United States national had claim of ownership? A: C Yes C No
	Explain
	Q: Have you ever been directly involved in the establishment or enforcement of population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free choice?
	A: • Yes C No Explain
	Q: Have you ever disclosed or trafficked in confidential U.S. business information obtained in connection with U.S. participation in the Chemical Weapons Convention?
	A: • Yes C No Explain
	E Contraction of the second se
	Q: Are you the spouse, minor child, or agent of an individual who has disclosed or trafficked in confidential U.S. business information obtained in connection with U.S. participation in the Chemical Weapons Convention?
	A: • Yes C No
	Explain
	<u>y</u>



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Displayed for all applicants who answered "No" to "Have you ever been to the U.S.?" on the Previous U.S. Travel page.

			Home	Contact Us Help Sign
U.S. DEPARTMENT OF STATE CONSULAR ELECTRONIC APPLICATION CENTER				
COMPLETE		REVIEW		SIGN
	Online Immigrant	Visa and Alien Registrat	tion Application (D	S-260)
Getting Started	Security and	d Background:	Immigratio	n Law Violations
Personal	Information	1		
Address and Phone				
Family	accurate informa	tion to all questions that	require an explana	ation. Provide complete and tion. A visa may not be issue
Previous U.S. Travel	States (except w	hen a waiver is obtained	l in advance). Are a	as inadmissible to the United ny of the following applicable
Work / Education / Training	to you? A YES answer does not automatically signify ineligibility for a visa. Please that should you answer Yes to any of the following questions, you may b requested to provide documentation to support your explanation.			
Petitioner				
Security and Background	Q: Have you ev	ver sought to obtain or a	ssist others to obtai	n
Medical and Health	States immi	rinto the United States, gration benefit by fraud station or other unlawful	or willful	
Criminal	A: O Yes @	No		
Security 1		er been removed or deporte	ed from any country?	
Security 2	A: O Yes @	No		
Immigration Law Violations 1	Back: Security	2	Save	Miscellaneous 1 🕨
Miscellaneous 1				
Miscellaneous 2				
Social Security Number				



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CEAC IV Form DS-260

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COMPLETE		REVIEW			SIGN
	Online Immigrat	nt Visa and Alien Regist	ration Application	(DS-260)	
Getting Started	-	and Background	d: Immigrat	ion Law V	violations
Personal	Informatio	on 1			
Address and Phone			801 - S 600 - 60	51 1000	850.
Family	accurate infor	e the following security a mation to all questions th	nat require an expla	anation. A visa m	nay not be issu
Previous U.S. Travel	States (except	no are within specific cate of when a waiver is obtain 6 answer does not automa	ned in advance). Ar	e any of the follo	wing applicabl
 Work / Education / Training 	that should y	you answer does not automa you answer Yes to any o provide documentati	of the following	questions, you	u may be
✓ Petitioner					
Security and Background		u ever sought to obtain or			
Medical and Health	States im	ntry into the United State amigration benefit by frau sentation or other unlawf	ud or willful	tea	
Criminal	A: • Yes	C No			
Security 1	Explain				
Security 2				2	
Immigration Law Violations 1				¥	
Miscellaneous 1					
Miscellaneous 2	Q: Have you country?	u ever been removed or dep ?	ported from any		
Social Security Number	A: • Yes (⊃ No			
	Explain				



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	Home Contact Us Help Sign Out
	PARTMENT OF STATE Electronic application center
	REVIEW SIGN
	Online Immigrant Visa and Alien Registration Application (DS-260)
 ✓ Getting Started ✓ Personal 	Security and Background: Immigration Law Violations Information 1
 ✓ A ddress and Phone ✓ Family ✓ Previous U.S. Travel ✓ Work / Education / Training ✓ Petitioner 	NOTE: Provide the following security and background information. Provide complete and accurate information to all questions that require an explanation. A visa may not be issued to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable to you? A VES answer does not automatically signify ineligibility for a visa. Please note that should you answer Yes to any of the following questions, you may be requested to provide documentation to support your explanation.
Security and Background Medical and Health	Q: Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any other United States immigration benefit by fraud or willful misrepresentation or other unlawful means?
Crim inal	A: Oves ONO
Security 1 Security 2 Im migration Law Violations 1	 Q: Have you ever been removed or deported from any country? A: Oves No
lm migration Law Violations 2 Miscellaneous 1 Miscellaneous 2	 Q: Have you ever been the subject of a removal or deportation hearing? A: Over No
✔ Social Security Number	 Q: Have you failed to attend a hearing on removability or inadmissibility within the last five years? A: Over Over No
	 Q: Have you ever been unlawfully present, overstayed the amount of time granted by an immigration official or otherwise violated the terms of a U.S. visa? A: Over Over No
	Q: Are you subject to a civil penalty under INA 274C? A: O Yes No
	 Q: Have you been ordered removed from the U.S. during the last five years? A: ○ Yes ● No





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Part 1:

	Home Contact Us Help Sign Out			
	PARTMENT OF STATE			
COM PLETE	REVIEW SIGN			
 ✓ Getting Started ✓ Personal ✓ Address and Phone 	Online Immigrant Visa and Alien Registration Application (DS-260) Security and Background: Immigration Law Violations Information 1			
 ✓ Family ✓ Previous U.S. Travel Work / Education / Training ✓ Petitioner 	NOTE: Provide the following security and background information. Provide complete and accurate information to all questions that require an explanation. A visa may not be issued to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable to you? A VES answer does not automatically signify ineligibility for a visa. Please note that should you answer Yes to any of the following questions, you may be requested to provide documentation to support your explanation.			
✓ Security and Background Medical and Health	Q: Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any other United States immigration benefit by fraud or willful misrepresentation or other unlawful means?			
Crim inal	A: • Ves O No			
Security 1	Explain			
Security 2 Immigration Law Violations 1 Immigration Law Violations 2				
Miscellaneous 1	O: Have you ever been removed or deported from any			
Miscellaneous 2	country?			
✓ Social Security Number	A: O Ves O No Explain			
	Q: Have you ever been the subject of a removal or deportation hearing? A: ● Ves ○ No Explain			

CEAC IV Form DS-260

	● Yes ○ No
	Explain
	^
	×
Q:	Have you ever been unlawfully present, overstayed the amount of time granted by an immigration official or
	otherwise violated the terms of a U.S. visa?
A:	● Yes ○ No
	Explain
	^
	×
	Explain
~	
	Have you been ordered removed from the U.S. during t last five years?
	ast five years?
A:	● Yes ○ No
A:	ast five years?
A:	● Yes ○ No
A:	last five years? Ves O No Explain
A: Q:	● Yes ○ No
A: Q:	last five years? Ves O No Explain Have you been ordered removed from the U.S. for a
A: Q: A:	last five years? I ves O No Explain Have you been ordered removed from the U.S. for a second time within the last 20 years? I ves O No
A: Q:	last five years? • Yes O No Explain Have you been ordered removed from the U.S. for a second time within the last 20 years?
A: 2: A:	last five years? I ves O No Explain Have you been ordered removed from the U.S. for a second time within the last 20 years? I ves O No
A: Q:	last five years? I ves O No Explain Have you been ordered removed from the U.S. for a second time within the last 20 years? I ves O No



Displayed for all applicants who answered 'Yes' to 'Have you ever been to the U.S.?' on the Previous U.S. Travel page. Answers to questions are 'No'.

		Home	Contact Us Help	Sign Out
U.S. DE	PARTMENT of STATE			
CONSULAR	ELECTRONIC APPLICATION CENTER		and the second second	
COMPLETE	REVIEW		SIGN	
	Online Immigrant Visa and Alien Registratio	on Application (I	DS-260)	
	Security and Background: 1	Immioratio	n Law Viola	tions
 Getting Started 	Information 2	mingratio		10115
Personal				
Address and Phone	NOTE: Provide the following security and b	ackground inform	ation. Provide compl	ete and
/ Family	accurate information to all questions that r to persons who are within specific categori	es defined by law	as inadmissible to th	ne United
Previous U.S. Travel	States (except when a waiver is obtained i to you? A YES answer does not automatica	lly signify ineligib	ility for a visa. Pleas	se note
Work / Education / Training	that should you answer Yes to any of requested to provide documentation			De
✓ Petitioner				
Security and Fackground	Q: Have you ever been unlawfully preser	nt and ordered		
Medical and	removed from the U.S. during the last	ten years?		
Health	A: C Yes @ No			
Criminal				
Security 1	Q: Have you ever been convicted of an a	aaravatad felopy		
Security 2	and been ordered removed from the l			
Immigration Law Violations 1	A: C Yes C No			
Immigration Law Violations 2				
Miscellaneous 1	Q: Have you ever been unlawfully preser	nt in the U.S. for		
Miscellaneous 2	more than 180 days (but no more tha have voluntarily departed the U.S. wit years?			
Social Security Number	A: C Yes @ No			
	 Q: Have you ever been unlawfully preser more than one year or more than one aggregate at any time during the last A: C Yes	year in the		





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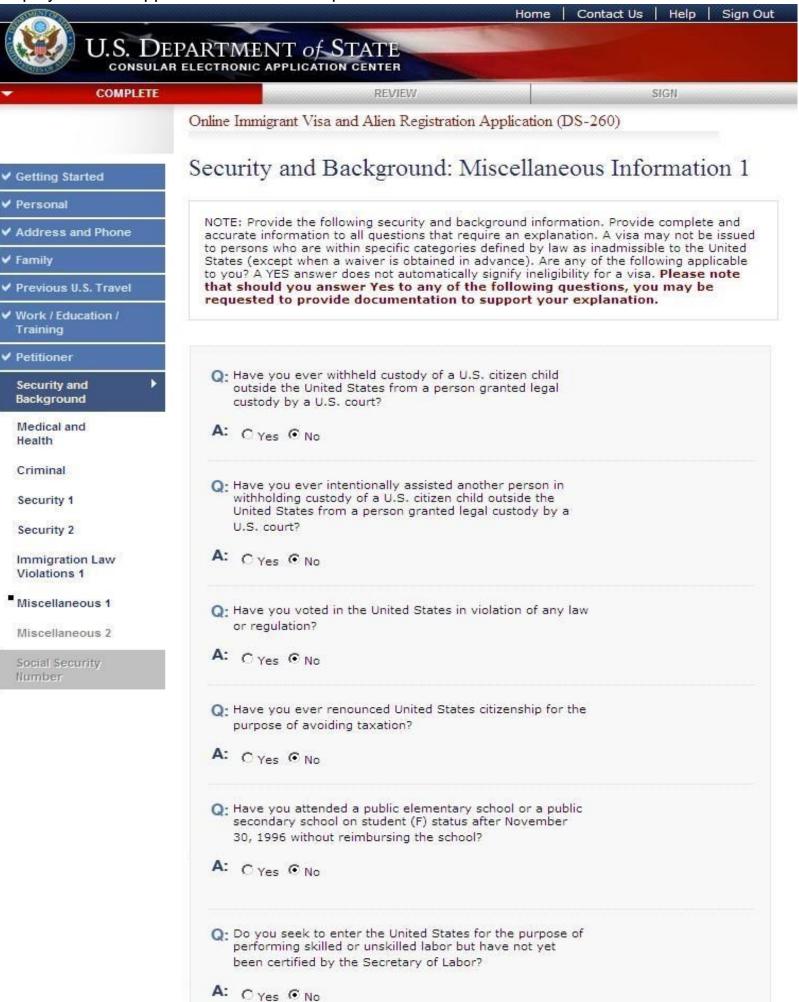
Security and Background: Immigration Law Violation

Displayed for all applicants who answered 'Yes' to 'Have you ever been to the U.S.?' on the Previous U.S. Travel page. Answers to questions are 'Yes'.

COMPLETE	REVIEW SIGN
	Online Immigrant Visa and Alien Registration Application (DS-260)
ed	Security and Background: Immigration Law Violations
	Information 2
+	
	NOTE: Provide the following security and background information. Provide complete and accurate information to all questions that require an explanation. A visa may not be issue
	to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable
1	to you? A YES answer does not automatically signify ineligibility for a visa. Please note that should you answer Yes to any of the following questions, you may be requested to provide documentation to support your explanation.
-	requested to provide documentation to support your explanation.
•	
	Q: Have you ever been unlawfully present and ordered removed from the U.S. during the last ten years?
	A: • Yes C No
	Explain
	Q: Have you ever been convicted of an aggravated felony
	and been ordered removed from the U.S.?
	A: GYes CNo
	Explain
	Q: Have you ever been unlawfully present in the U.S. for more than 180 days (but no more than one year) and
	have voluntarily departed the U.S. within the last three vears?
	A: • Yes C No
	Explain
	Q: Have you ever been unlawfully present in the U.S. for more than one year or more than one year in the
	aggregate at any time during the last 10 years?
	A: • Yes C No
	Explain
	A Back: Immig. Law Violations 1 Back: Immig. Law Violations 1 Back: Immig. Law Violations 1

Security and Background: Miscellaneous Information 1 Page

Displayed for all applicants. Answers to questions are 'No'.







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Security and Background: Miscellaneous Information 1 Page

	PARTMENT OF STATE
COMPLETE	REVIEW SIGN
	Online Immigrant Visa and Alien Registration Application (DS-260)
etting Started	Security and Background: Miscellaneous Information 1
ersonal ddress and Phone imily evious U.S. Travel ork / Education /	NOTE: Provide the following security and background information. Provide complete and accurate information to all questions that require an explanation. A visa may not be issued to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable to you? A YES answer does not automatically signify ineligibility for a visa. Please note that should you answer Yes to any of the following questions, you may be requested to provide documentation to support your explanation.
aining	
ecurity and Free Free Free Free Free Free Free Fre	Q: Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court?
edical and ealth	A: © Yes C No
riminal	Explain
ecurity 1 ecurity 2	
nmigration Law olations 1	
iscellaneous 1 iscellaneous 2 pcial Security imber	Q: Have you ever intentionally assisted another person in withholding custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court?
limber	A: • Yes C No Explain
	×
	Q: Have you voted in the United States in violation of any law
	or regulation? A: • Yes O No
	Explain
	×.
	Q: Have you ever renounced United States citizenship for the
	purpose of avoiding taxation?
	Explain
	Q: Have you attended a public elementary school or a public secondary school on student (F) status after November 30, 1996 without reimbursing the school?
	A: • Yes C No
	Explain
	Q: Do you seek to enter the United States for the purpose of performing skilled or unskilled labor but have not yet
	been certified by the Secretary of Labor?
	A: • Yes C No Explain
	Q: Are you a graduate of a foreign medical school seeking to perform medical services in the United States but have not yet passed the National Board of Medical Examiners examination or its equivalent?
	A: © Yes C No
	Explain
	×.



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Security and Background: Miscellaneous Information 2 Page

Displayed for all applicants. Answers to questions are 'No'.

CEAC IV Form DS-260

🥨 U.S. DE	PARTMENT	of STATE		Sign O	
	R ELECTRONIC APPL		SIGN		
	Online Immigrant	: Visa and Alien Registration			
etting Started	Security and Background: Miscellaneous Information 2				
Personal	1				
ddress and Phone	NOTE: Provide the following security and background information. Provide complete and accurate information to all questions that require an explanation. A visa may not be issued				
amily	States (except	to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable to you? A YES answer does not automatically signify ineligibility for a visa. Please note			
revious U.S. Travel	to you? A YES answer does not automatically signify ineligibility for a visa. Please note that should you answer Yes to any of the following questions, you may be requested to provide documentation to support your explanation.				
Vork / Education / raining					
etitioner					
ecurity and I I Ackground	work in the certification	health care worker seeking e United States but have no n from the Commission on	t yet received Graduates of Foreign		
ledical and ealth	independer	hools or from an equivalen nt credentialing organization			
riminal	A: CYes G	No			
ecurity 1	0:				
ecurity 2	125	ermanently ineligible for U.S	, citizensnip?		
nmigration Law /iolations 1	A: Cyes @	No			
liscellaneous 1		ever departed the United St tary service during a time o			
liscellaneous 2	1000 11 100		a wate		
ocial Security umber	A: Cyes @	No			
	Q: Are you co	oming to the U.S. to practice	polygamy?		
	A: C Yes @	No			
		former exchange visitor (J) two-year foreign residence			
	A: Cyes @	No			
	States eve	cretary of Homeland Secur r determined that you know pplication for asylum?			





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Security and Background: Miscellaneous Information 2 Page

Displayed for all applicants. Answers to questions are 'Yes'.

CEAC IV Form DS-260

TIOD	
U.S. DE	PARTMENT OF STATE
COMPLETE	REVIEW. SIGN
	Online Immigrant Visa and Alien Registration Application (DS-260)
	Security and Background: Miscellaneous Information 2
tting Started	
dress and Phone	NOTE: Provide the following security and background information. Provide complete and
mily	accurate information to all questions that require an explanation. A visa may not be issued to persons who are within specific categories defined by law as inadmissible to the United States (except when a waiver is obtained in advance). Are any of the following applicable
evious U.S. Travel	to you? A YES asswer does not automatically signify ineligibility for a visa. Please note that should you answer Yes to any of the following questions, you may be
ork / Education /	requested to provide documentation to support your explanation.
aining	
titioner	Q: Are you a health care worker seeking to perform such
curity and kground	work in the United States but have not yet received certification from the Commission on Graduates of Foreign
edical and	Nursing Schools or from an equivalent approved independent credentialing organization?
alth	A: CYes CNo
iminal	Explain
curity 1	
curity 2	
migration Law plations 1	<u>_</u>
scellaneous 1	
scellaneous 2	Q: Are you permanently ineligible for U.S. citizenship?
cial Security	A: CYes CNo
mber	Explain
	<u>~</u>
	Q: Have you ever departed the United States in order to evade military service during a time of war?
	A: CYes CNo
	Explain
	Q: Are you coming to the U.S. to practice polygamy?
	A: © Yes C No
	Explain
	A
	Q: Are you a former exchange visitor (J) who has not yet fulfilled the two-year foreign residence requirement?
	A: © Yes C No
	Explain
	Q: Has the Secretary of Homeland Security of the United States ever determined that you knowingly made a
	frivolous application for asylum?
	A: CYes CNo
	Explain
	Q: Are you likely to become a public charge after you are
	admitted to the United States?
	A: • Yes C No
	Explain
	<u>v</u>
	Back: Miscellaneous 1 Save Next: Social Security Number



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Social Security Number Information Page

Displayed for all applicants. Answers to questions are 'No'.



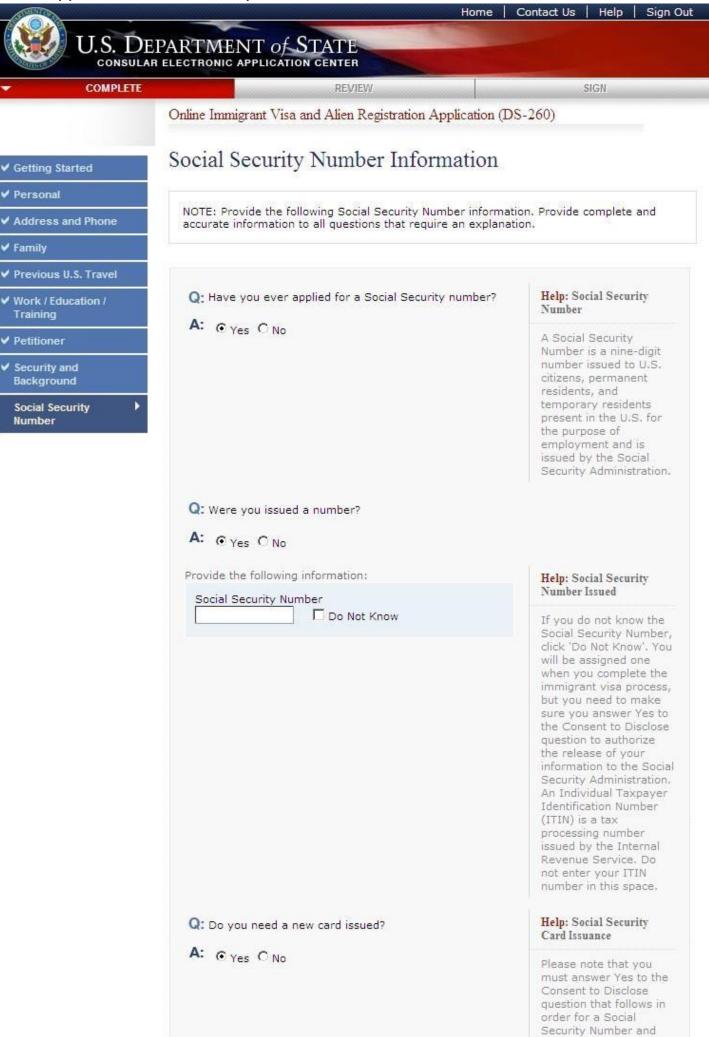
Back: Security and Background	🛱 Save	Next: Review
-------------------------------	--------	--------------



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Social Security Number Information Page

Displayed for all applicants. Answers to questions are 'Yes'.



Q: Do you authorize disclosure of information from this form to the Department of Homeland Security, the Social Security Administration, and such other U.S. Government agencies as may be required for the purposes of assigning you a social security number (SSN) and issuing you a Social Security card and do you authorize the Social Security Administration to share your SSN with the Department of Homeland Security?

A: @ Yes C No

Help: Consent to Disclosure

Card to be issued.

The applicant's response does not limit or restrict the Government's ability to obtain his or her social security number or other information on this form for enforcement or other purposes as authorized by law.





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CEAC IV Form DS-260

Social Security Number Information Page

Displayed for all applicants. Answers to the first three questions are 'Yes' with the last question answered 'No'.

	Home	Contact Us	Help	Sign Out
	PARTMENT OF STATE			
COMPLETE	REVIEW		SIGN	
	Online Immigrant Visa and Alien Registration Application (D	S-260)		
✓ Getting Started	Social Security Number Information			
✓ Personal	NOTE STUDIES IN SUCCESSION		273 W	
✓ Address and Phone	NOTE: Provide the following Social Security Number informat accurate information to all questions that require an explana		complete	and
✓ Family				
✓ Previous U.S. Travel				
✓ Work / Education / Training	Q: Have you ever applied for a Social Security number?	Help: So Number	cial Secur	ity
✓ Petitioner	A: • Yes C No		Security is a nine-	digit
 Security and Background 		number	issued to permane	U.S.
Social Security		tempora present the purp employr issued b	iry resider in the U.S	, for is ial
	A: • Yes C No Provide the following information: Social Security Number	Help: So Number	cial Secur Issued	ity
	Do Not Know	Social S click 'Do will be a when you immigra but you sure you the Con question the releat informat Security An Indiv Identific (ITIN) is processi issued b Revenue not ente	o not know ecurity Nu Not Know ssigned o nu comple nt visa pr need to n u answer sent to Di to authou ase of you ion to the Administ idual Tax ation Num a tax ng numbe y the Inte e Service. r your ITI in this spi	umber, v'. You ne te the occess, nake Yes to sclose rize ur Social ration. payer ber ber er mal Do
	Q: Do you need a new card issued?	Help: So Card Issu	cial Secur 1ance	ity
	A: • Yes C No	must an Consent question order fo Security	ote that y swer Yes to Disclo that follo r a Social Number be issued	to the se ws in and

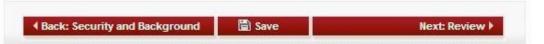
Q: Do you authorize disclosure of information from this form to the Department of Homeland Security, the Social Security Administration, and such other U.S. Government agencies as may be required for the purposes of assigning you a social security number (SSN) and issuing you a Social Security card and do you authorize the Social Security Administration to share your SSN with the Department of Homeland Security?

A: C Yes C No

If you answer 'No' to this question you will not receive a social security card.

Help: Consent to Disclosure

The applicant's response does not limit or restrict the Government's ability to obtain his or her social security number or other information on this form for enforcement or other purposes as authorized by law.



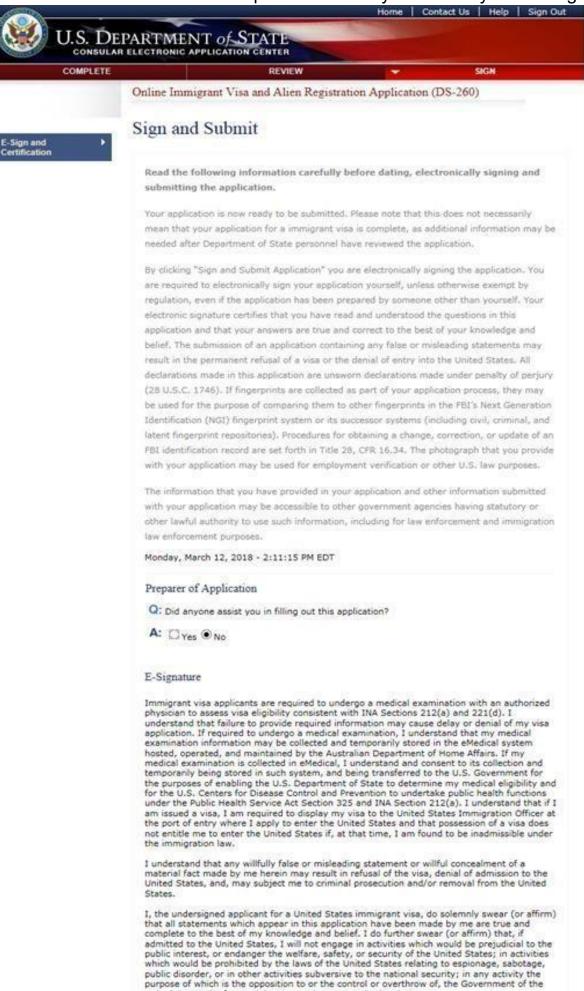


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CEAC IV Form DS-260

Sign and Submit Page

Displayed for all applicants. Answered 'No' to the question 'Did anyone assist you in filling out this application?'.



Enter your NVC Case Number:

C



United States, by force, violence, or other unconstitutional means.

Sign and Submit Page

Displayed for all applicants. Answered 'Yes' to the question 'Did anyone assist you in filling out this application?'.

CEAC IV Form DS-260

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Online Immigrant Visa and Al	lien Registration Application (DS-260)
Sign and Submit	
Read the following informati submitting the application.	on carefully before dating, electronically signing and
Your application is now ready to	be submitted. Please note that this does not necessarily immigrant visa is complete, as additional information may
	te personnel have reviewed the application.
are required to electronically sig regulation, even if the applicate electronic signature certifies the application and that your answe belief. The submeasure of an app result in this permanent refusal declarations mode in this applic (28 U.S.C. 1346). If fingerprints be used for the purpose of come behavioration (NGI) fingerprints latent fingerprint repositories).	plication" you are electronically signing the application. You in your application yourseld, unless otherwise ecompt by in has been prepared by someone other than yourself. Your it you have read and understood the questions in this many that and correct to the best of your knowledge and bloation containing any failse or misleading statements may of a vise or the denial of entry into the unobed States. All ation are unaxim declarations made under penalty of perju- are collected as part all your application process, they may paring them to other fingerprints in the IPD's heat Generato system or its successor systems (including ovel, criminal, an involume fire obtaining a change, correction, or update of firsts of the observed of the to other the states of the states of the processor systems (including ovel, criminal, an involume fire obtaining a change, correction, or update of firsts of the observed of the to other the states of the states of the states of the other states of the states of the states of the processor systems (including ovel, criminal) and involume the other bits the the states of the states of the states of the states of the state
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Tuesday, March 06, 2018 - 11:3	4:10 AM EST
Preparer of Application	
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Provide the following inform: Preparer Sumames Given Names Grganization Name Address Street Address (Line 3) Street Address (Line 3) State/Province Postal Zone/ZIP Code Country/Region	Does Not Apply

physician to assess vias eligibility consistent with TAA Sections 212(a) and 221(d). I understand that failure to provide required information may cause delay or denial of my vise application. If required to undergo a medical examination. I understand that my medical examination information may be collected and temporarily stored in the eMedical system hosted, operated, and maintained by the Australian Department of Home Affairs. If my medical examination is collected in eMedical, I understand and consent to its collection and temporarily being stored in such system, and being transferred to the U.S. Government for the purposes of enabling the U.S. Department of State to determine my medical eligibility and for the U.S. Centers for Disease Control and Prevention to undertake public health functions under the Public Health Service Act Section 325 and INA Section 322(a). I understand that if 1 am issued a visa, I am required to display my visas to the United States in the postesion of a visa does not entitle me to enter the United States if, at that time, I am found to be inadmissible under the immigration faw.

I understand that any willfully false or maleading statement or willful concealment of a material fact made by me herein may result in infusal of the visa, denial of admission to the United States, and, may subject me to criminal prosecution and/or removal from the United States.

I, the undersigned applicant for a United States immigrant visa, do solemnly swear (or affirm) that all statements which appear in this application have been made by me are true and complete to the best of my knowledge and belef. I do further swear (or affirm) that, if admitted to the United States, I will not engage in activities which would be provide and the states, I will not engage in activities which would be provide a to the public interest, or endanger the weffare, taffety, or security of the United States; in activities which would be provided by the laws of the United States relating to exponence, shortage, public discoder, or in other activities subversive to the national security; in any activity the purpose of which is the opposition to or the control or overthrow of, the Government of the United States, by force, violence, or other unconstitutional means.

Enter your NVC Case Number:



Sign and Submit Page

Displayed for all applicants. Answered 'No' to the question 'Did anyone assist you in filling out this application?'. If you are from Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Cote d'Ivoire, Democratic Republic of the Congo, Djibouti, Egypt, Eritrea, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Iraq, Kenya, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone, Somalia, Sudan, Tanzania, Togo, Uganda, Yemen then you will have an extra box on your Sign and Submit page. Applicants must certify they reviewed the FGM/C government fact sheet, given they are from a FGM/C prevalent country/region.

CEAC IV Form DS-260

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U.S. DEPARTMENT of STATE CONSULAR ELECTRONIC APPLICATION CENTER

REVIEW

Online Immigrant Visa and Alien Registration Application (DS-260)

E-Sign and Certificatio

COMPLETE

Sign and Submit

Read the following information carefully before dating, electronically signing and submitting the application.

Your application is now ready to be submitted. Please note that this does not necessarily mean that your application for a immigrant visa is complete, as additional information may be needed after Department of State personnel have reviewed the application.

By clicking "Sign and Submit Application" you are electronically signing the application. You are required to electronically sign your application yourself, unless otherwise exempt by regulation, even if the application has been prepared by someone other than yourself. Your electronic signature certifies that you have read and understood the questions in this application and that your answers are true and correct to the best of your knowledge and belief. The submission of an application containing any false or misleading stater may result in the permanent refusal of a visa or the denial of entry into the United States. All declarations made in this application are unsworn declarations made under penalty of perjury (28 U.S.C. 1746). If fingerprints are collected as part of your application process, they may be used for the purpose of comparing them to other fingerprints in the FBI's Next Generation Identification (NGI) fingerprint system or its successor systems (including civil, criminal, and latent fingerprint repositories). If you wish to correct a record as it appears in the FBI's CJIS Division Records System, you should follow procedures to change, correct or update a record that are set forth in Title 28, CFR, Section 16.34. The photograph that you provide with your application may be used for employment verification or other U.S. law purposes.

The information that you have provided in your application and other information submitted with your application may be accessible to other government agencies having statutory or other lawful authority to use such information, including for law enforcement and immigration law enforcement purposes

Wednesday, October 16, 2019 - 11:32:15 AM EDT

Preparer of Application

Q: Did anyone assist you in filling out this application?

A: O Yes
No

E-Signature

Immigrant visa applicants are required to undergo a medical examination with an authorized physician to assess visa eligibility consistent with INA Sections 212(a) and 221 (d). I understand that failure to provide required information may cause delay or denial of my visa application. If required to undergo a medical examination, I understand that my medical examination information may be collected and temporarily stored in the eMedical system hosted, operated, and maintained by the Australian Department of Home Affairs. If my medical examination is collected and temporarily stored in the eMedical system hosted, operated, and maintained by the Australian Department of Home Affairs. If my medical examination is collected in eMedical, I understand and consent to its collection and temporarily being stored in such system, and being transferred to the U.S. Government for the purposes of enabling the U.S. Department of State to determ ine my medical eligibility and for the U.S. Centers for Disease Control and Prevention to undertake public health functions under the Public Health Service Act Section 325 and INA Section 212(a). I understand that if I am issued a visa, I am required to display my visa to the United States Immigration Officer at the port of entry where I apply to enter the to the United States Immigration Officer at the port of entry where I apply to enter the United States and that possession of a visa does not entitle me to enter the United States if, at that time, I am found to be inadmissible under the immigration law.

I understand that any willfully false or misleading statement or willful concealment of a material fact made by me herein may result in refusal of the visa, denial of admission to the United States, and, may subject me to criminal prosecution and/or removal from the United States,

I, the undersigned applicant for a United States immigrant visa, do solemnly swear (or I, the undersigned applicant for a United States immigrant visa, do solemnly swear (or affirm) that all statements which appear in this application have been made by me are true and complete to the best of my knowledge and belief. I do further swear (or affirm) that, if admitted to the United States, I will not engage in activities which would be prejudicial to the public interest, or endanger the welfare, safety, or security of the United States; in activities which would be prohibited by the laws of the United States relating to espionage, sabotage, public disorder, or in other activities subversive to the national security; in any activity the purpose of which is the opposition to or the control or overthrow of, the Government of the United States, by force, violence, or other upper think and the security. unconstitutional means.

Enter your NVC Case Number:

Enter your Passport Number:



Female Genital Mutilation/Cutting (FGM/C) Prevention

Pursuant to Section 644 the Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA), Public Law 104-208 (8 U.S.C. 1374), the Department of State is required to provide you with access to copy the information sheet on the severe harm to physical and psychological health caused by female genital mutilation (cuttion (EMVC).

mutilation/cutting (FGM/C).

Click on the following link to view the Female Genital Mutilation or Cutting GovernmentFactSheet:

Female Genital Mutilation or Cutting Government Fact Sheet

I certify that I have received the U.S. Government Fact Sheet on Female Genital Mutilation or Cutting (FGM/C)

Click the button below to electronically sign your application:

Sign and Submit Application

🖹 Save Back: REVIEW Next: Confirmation 🕨



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Sign and Submit Page

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CEAC IV Form DS-260

Online Immigrant Visa and Alien Registration Application (DS-260)

E-Sign and Submit

COMPLETE

Read the following information carefully before dating, electronically signing and submitting the application.

Home | Contact Us | Help | Sign Out

Your application is now ready to be submitted. Please note that this does not necessarily mean that your application for a immigrant visa is complete, as additional information may be needed after Department of State personnel have reviewed the application.

By dicking "Sign and Submit Application" you are electronically signing the application. You are required to electronically sign your application yourself, unless otherwise exempt by regulation, even if the application has been prepared by someone other than yourself. Your electronic signature cartifies that you have read and understood the questions in this application and that your answers are true and correct to the best of your knowledge and belief. The submission of an application containing any false or misleading statements may result in the permanent refusal of a visa or the denial of entry into the United States. All declarations made in this application are unaworn declarations made under penalty of perjury (28 U.S.C. 1746). If fingerprints are collected as part of your application process, they may be used for the purpose of comparing them to other fingerprints in the FBI's Next Generation Identification (NGI) fingerprint system or its successor systems (including divii, criminal, and latent fingerprint repositories). If you wish to correct a record as it appears in the FBI's CJIS Division Records System, you should follow procedures to change, correct or update a record that are set forth in Title 28, CFR, Section 16.34. The photograph that you provide with your application may be used for employment verification or other U.S. law purposes.

The information that you have provided in your application and other information submitted with your application may be accessible to other government agencies having statutory or other lawful authority to use such information, including for law enforcement and immigration law enforcement purposes.

Wednesday, October 16, 2019 - 11:32:15 AM EDT

Preparer of Application

Q: Did anyone assist you in filling out this application?

A: • Yes O N

Provide the following information:

Preparer
Surnames
Given Names
Does Not Apply
Organization Name
Does Not Apply
Address
Street Address (Line 1) Street Address (Line 2) *Optional
City
State/Province
Postal Zone/ZIP Code
Country/Region - SELECTONE -
Relationship to You

E-Signature

Immigrant visa applicants are required to undergo a medical examination with an authorized physician to assess visa eligibility consistent with INA Sections 212(a) and 221 (d). I understand that failure to provide required information may cause delay or denial of my visa application. If equired to undergo a medical examination. Inderstand that my medical examination information may be collected and temporarily stored in the evideal system hosted, operated, and maintained by the Australian Department of Home Atta collection with the system of the store of the store of the system hosted, operated, and maintained by the Australian Department of Home Atta collection with the system store of the substant and concents to the collection with the purposes of enabling the LIS. Deartment of State to determine my medical eligibility and for the U.S. Centars for Disease Control and Prevention to understike public health functions under the Public Health Service act State to determine the understate and that the post of the public thealth fouries with the bub United States Immigration Officer at the port of entry where I apply to enter the United States and that possession of a visa does not entitle met to enter the United States if, at that time, I am found to be inadmissible under the immigration law. Understand that any wilfully failse or missieading statement or wilful concealment of a

I understand that any wilfully false or misleading statement or wilful concealment of a material fact made by me herein may result in refusal of the visa, denial of admission to the United States, and, may subject me to criminal prosecution and/or removal from the United States.

I, the undersigned applicant for a United States immigrant visa, do solemnly swear (or affrm) that all statements which appear in this application have been made by me are true and complete to the best of my knowledge and belief. I do further swear (or affirm) that, if admitted to the United States, I vill not engage in advities which would be prejudical to the public interest, or endanger the velfare, safety, or security of the United States; in advitivities which would be prohibited by the laws of the United States relating to espionage, sabotage, public disorder, or in other advities subversive to the national security; in any advity the purpose of which is the opposition to or the control or overthrow of, the Government of the United States, by force, violence, or other unconstitutional means.

Enter your NVC Case Number:

Enter your Passport Number:



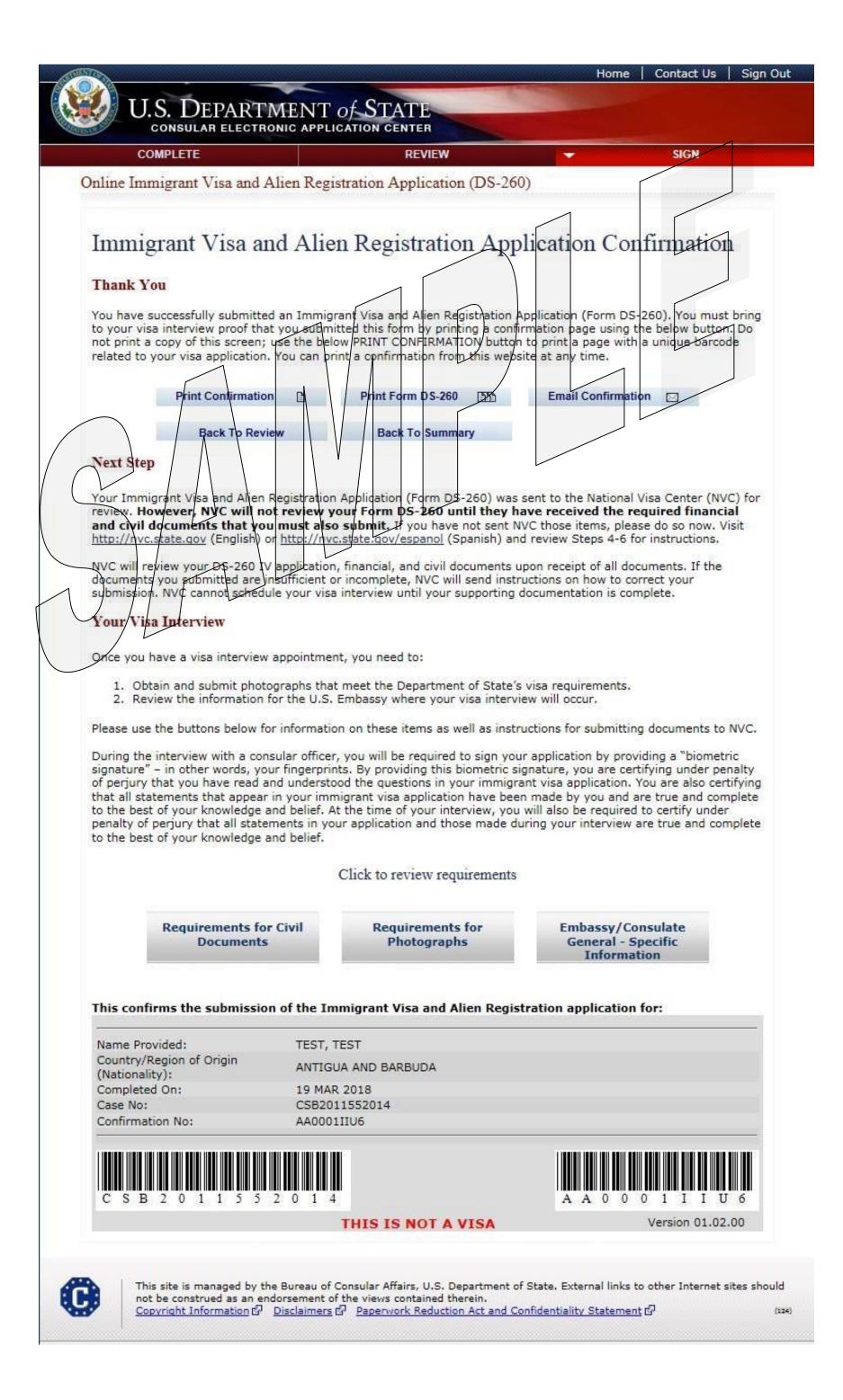
Female Genital Mutilation/Cutting (FGM/C) Prevention
Pursuant to Section 644 the Illegal Immigration Reform and Immigrant Responsibility Act (IRRRA). Public Law 104-208 (8 U.S.C. 1374), the Department of State is required to provide you with access to copy the information sheet on the severe harm to physical and psychological health caused by female genital mutilation/cutting (FGW/C).
Click on the following link to view the Female Genital Mutilation or Cutting Government Fact Sheet:
Female Genital Mutilation or Cutting Government Fact Sheet
I certify that I have received the U.S. Government Fact Sheet on Female Genital Mutilation or Cutting (FGM/C)
Click the button below to electronically sign your application:
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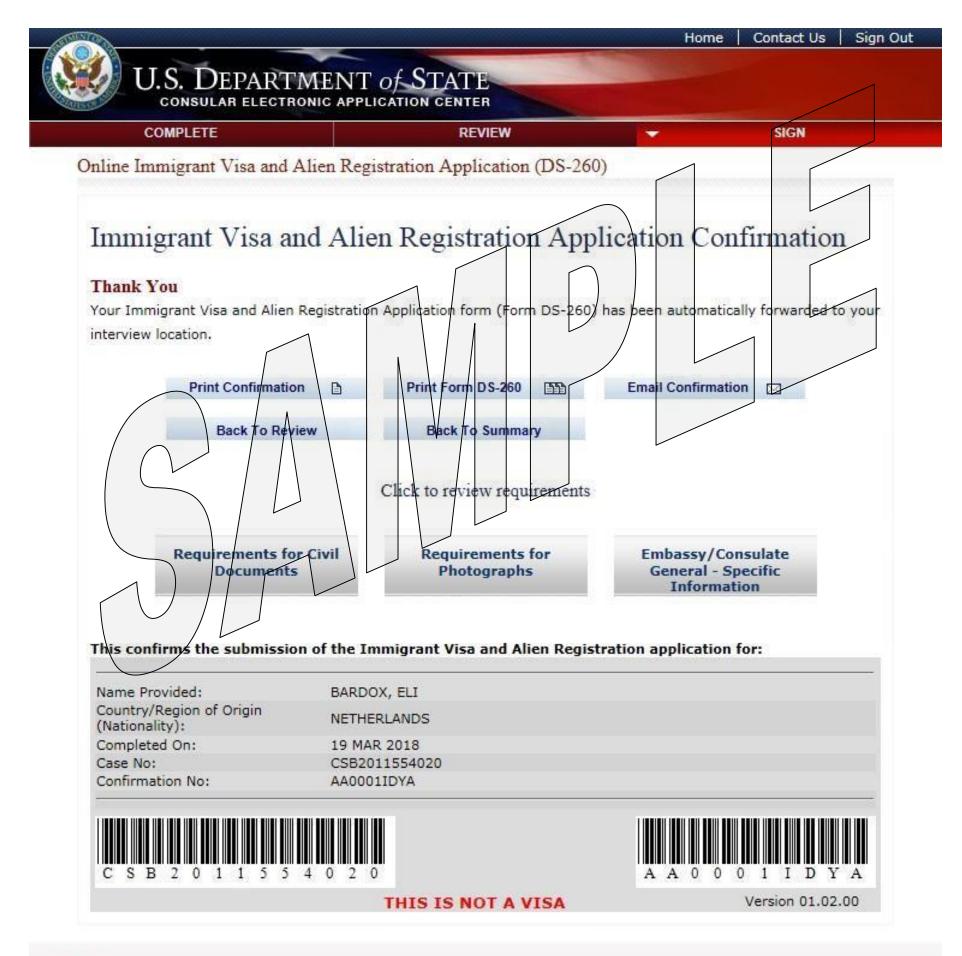
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Confirmation Page

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COMPLETE	REVIEW	*	SIGN	
nline Immigrant Visa and A	Alien Registration Application (DS-260)			
Immigrant Visa and Alien Four Immigrant Visa and Alien review. Print Confirmation Back To Rev All Diversity Visa applicants mu 1. Obtain required support 2. Obtain photographs tha 3. Review the information You do not need to submit any and will notify you if any of the will be kept on file with KCe un s scheduled, the VCC will send website for further instructions If you would like to change you appointment, you must contact may not be possible to change	And Alien Registration Applied Registration Application (DS-260) was sent to the Print Form DS-260 Back To Summary Back To Summary Back To Summary Back To Summary Interview Idecuments. There the Department of State's visa requirements appendic to the U.S. Embassy/Consulate General of Accumentation to the Kentucky Consular Center information you have provided is insufficient or to a visa number is available for you and your can you an email message directing you to log into the the consular section where you have been schere the location of your interview after you have been the location of your interview after you have been Click to review requirements Click to review requirements	The KCC will revise and be scheduled in order to en scheduled.	ular Center (KCC on interview will occ view your application DS-260 application uled. When your s Check (ESC) oter by sending a name and case e you have an request a chang	c) for sur. ation case
	n of the Immigrant Visa and Alien Registrat			
Name Provided:	TOMA, ALEXANDRU			
Country/Region of Origin (Nationality):	NETHERLANDS			
Completed On:	19 MAR 2018			
Case No:	2017EU13255			



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Online Immigrant Visa and Alien Registration Application (DS-260)

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ca-travel-webmaster@state.gov.

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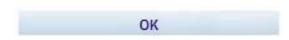
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Public Communication Division PA/PL, Room 2206 U.S. Department of State Washington, D.C. 20520 202-647-6575 Also see http://contact-us.state.gov/

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Paperwork Reduction Act Page – Immigrant Visa and Alien Registration Application



U.S. DEPARTMENT of STATE CONSULAR ELECTRONIC APPLICATION CENTER

Online Immigrant Visa and Alien Registration Application (DS-260)

Paperwork Reduction Act and Confidentiality Statement

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CONFIDENTIALITY STATEMENT: The information asked for on this form is requested pursuant to Section 222 of the Immigration and Nationality Act. Section 222(f) provides that the records of the Department of State and of diplomatic and consular offices of the United States pertaining to the issuance and refusal of visas or permits to enter the United States shall be considered confidential and shall be used only for the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States. Certified copies of such records may be made available to a court provided the court certifies that the information contained in such records is needed in a case pending before the court. The U.S. Department of State uses the facts you provide on this form primarily to determine your classification and eligibility for a U.S. immigrant visa. Individuals who fail to submit this form or who do not provide all the requested information may be denied a U.S. immigrant visa. Although furnishing this information is voluntary, failure to provide this information may delay or prevent the processing of your case. If you are issued an immigrant visa and are subsequently admitted to the United States as an immigrant, the Department of Homeland Security will use the information on this form to issue you a Permanent Resident Card, and, if you so indicate, the Social Security Administration will use the information to issue a social security number. The information provided may also be released to federal agencies for law enforcement, counterterrorism and homeland security purposes: to Congress and courts within their sphere of jurisdiction; and to other federal agencies into administer or enforce U.S. laws.

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