<mark>Home</mark>



WHO SHOULD APPLY?

- → You are a citizen or eligible national of a Visa Waiver Program country.
- → You are currently not in possession of a visitor's visa.
- → Your travel is for 90 days or less.
- → You plan to travel to the United States for business or pleasure.
- → You want to apply for a new authorization for one person or a group of applications for two or more persons.

WHAT DO I NEED TO APPLY?

- $\rightarrow~$ Valid passport(s) from a Visa Waiver Program country. List of Visa Waiver Countries
- Traveler's valid email address.
- → Traveler's home address and phone number.
- → Traveler's emergency point of contact phone and email.
- → Payment method:
- Fee for application is \$21.00 USD.

Valid payment methods include MasterCard, VISA, American Express, Discover (JCB or Diners Club only), and PayPal.

The following information may also be required: → Traveler's aliases or other names (If Applicable).

- Traveler's National ID or Personal ID number (If Apolicable).
- Traveler's Global Entry/NEXUS/SENTRI ID number (If Applicable).
- Traveler's employer address and phone number (If Applicable).
- → Traveler's U.S. point of contact name, address, and phone (If Applicable).

START NEW INDIVIDUAL APPLICATION

NEED HELP?

RELATED TOPICS:

About ESTA and The Visa Waiver Program

- → What is the difference between an ESTA and a visa?
- → What is the Electronic System for Travel Authorization (ESTA)?
- → Why do I need to fill out an ESTA application?

Completing Your ESTA Application

→ How long does the ESTA application process take?

Privacy and Security

CONTACT SUPPORT

To submit an inquiry:

CBP Info Center

Traveler Communications Center Call:1-202-325-8000

24 hours per day, 7 days a week

- → How long is my application data stored?
- → Is my information secure?



Have additional questions? VIEW ALL TOPICS



HELPFUL LINKS Dept. of Homeland Security: DHS.gov Customs and Border Protection: CBP.gov CBP.gov/travel

SITE POLICIES ACCESSIBILITY

PRIVACY STATEMENT VULNERABILITY DISCLOSURE

Paperwork Reduction Act: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0111. The estimated average time to complete this application is 23 minutes. If you have any comments regarding this burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 90 K Street, NE, 10th Floor, Washington DC 20229. Expiration May 31, 2026.

The ESTA logo is a registered trademark of the U.S. Department of Homeland Security. Its use, without permission, is unauthorized and in violation of trademark law. For more information, or to request the use of the logo, please go to help.cbp.gov and submit a request by clicking on 'Ask a Question." When selecting the Product (under Additional Information) use "ESTA" and the sub-product "Logo Assistance" to expedite handling of your request.



ESTA PRIVACY ACT STATEMENT



ESTA PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to inform you of the following concerning the collection of the information on this form.

AUTHORITY:

Collection of the information solicited on this form is authorized by Title 8 of the United States Code, whether or not codified. Specifically, Section 711 "Modernization of the Visa Waiver Program" of the "Implementing Recommendations of the 9/11 Commission Act of 2007" (9/11 Act") (110 PL 53) modifies the visa waiver program under section 217 of the Immigration and Nationality Act (8 U.S.C. 1187) to authorize this collection of information. The Secretary of Homeland Security is authorized to create the electronic travel authorization system and require aliens under the program to "electronically provide to the system biographical information and such other information as the Secretary of Homeland Security is authorized to create the electronic travel authorization system and require aliens under the program to "electronically provide to the system biographical information and such other information as the Secretary of Homeland Security shall determine necessary." (8 U.S.C. 1187(a)(11) as amended by 110 PL 53 sec. 711(d)). Collection of this information is mandatory for people from Visa Waiver Program countries who wish to travel to the United States.

PURPOSE:

The primary purpose for soliciting this information is 'to determine the eligibility of, and whether there exists a law enforcement or security risk in permitting, the alien to travel to the United States. Upon review of such biographical information, the Secretary of Homeland Security shall determine whether the alien is eligible to travel to the United States under the program.'' 8 U.S.C. 1187(a)(11).

ROUTINE USES:

The information solicited on this form may be made available as a "routine use" to other government agencies to assist the Department of Homeland Security in making determinations about the alien's eligibility to travel without a visa and for law enforcement and administration purposes. The information may be made available to the Department of State in the event the application is not approved, so that a determination can be made for issuance of a visa. Finally, the information may be made available to the carrier for verification of authorization to travel. A complete list of the routine uses can be found in the system of records notice associated with this form, "Department of Homeland Security/U.S. Customs and Border Protection - DHS/CBP-009 Electronic System for Travel Authorization (ESTA) System of Records. The Department's system of records notices can be found on the Department's website at http://www.dhs.gov/system-records-notices-soms

CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:

Providing this information is not legally required to gain admission to the United States. However, aliens traveling without an electronic travel authorization will require a visa to gain admission to the United States.

INFORMATION COLLECTED AND STORED AUTOMATICALLY

When you browse, read pages or download information on The Department of Homeland Security's websites, we automatically gather and store certain technical information about your visit. This information never identifies who you are. The information we collect and store about your visit is listed below:

- The Internet domain (for example, "xcompany.com" if you use a private Internet access account, or "yourschool.edu" if you connect from a university's domain) and IP address (an IP address is
- a number that is automatically assigned to your computer whenever you are surfing the Web) from which you access our website
- The type of browser (e.g., Netscape, Internet Explorer) and operating system (Windows, Unix) used to access our site
- The date and time you access our site
 The pages you visit
- . If you linked to the Department of Homeland Security website from another website, the address of that website

This information is only used to help us make the site more useful for you. With this data we learn about the number of visitors to our site and the types of technology our visitors use. We never track or record information about individuals and their visits.

COOKIES

When you visit some websites, their web servers generate pieces of information known as cookies. Some cookies collect personal information to recognize your computer in the future. This is not the case at Department of Homeland Security, where we only use non-persistent cookies or "per-session cookies." These cookies do not collect personal information on users and they are erased as soon as you leave our website. Per-session cookies serve technical purposes like providing seamless navigation through Department of Homeland Security. These cookies do not permanently record data and they are not stored on your computer's hard drive. Department of Homeland Security cookies are stored in memory and are only available during an active browser session. Again, once you close your browser, the cookie disapoers.

SITE SECURITY

- For site security purposes and to ensure that this service remains available to all users, this government computer system employs commercial software programs to monitor network traffic to identify unauthorized attempts to upload or change information, or otherwise cause damage
- Except for authorized law enforcement investigations, no other attempts are made to identify individual users or their usage habits. Raw data logs are used for no other purposes and are scheduled for regular destruction in accordance with National Archives and Records Administration guidelines
- Unauthorized attempts to upload information or change information on this service are strictly prohibited and may be punishable under the Computer Fraud and Abuse Act of 1986 and the National Information Infrastructure Protection Act

WHAT ARE YOUR RIGHTS UNDER THE PRIVACY ACT OF 1974?

The Privacy Act of 1974 (5 U.S.C. 552a) protects the personal information the federal government keeps on United States citizens and legal permanent residents (LPRs) in "systems of records" (SOR). A SOR is a group of records that includes personal information an agency controls that is retrieved by the individual's name or some other personal identifier. The Privacy Act regulates how the government can use, disclose, share, provide access to, and maintain the personal information that it collects. DHS, as a matter of policy, extends the administrative rights of the Privacy Act, including the rights of access and amendment, to aliens when dealing with mixed-use systems (systems housing information about both U.S. citizens/LPRs and foreign nationals). Not all information collected online is covered by the Privacy Act. Some of the Acts major provisions require agencies to:

- Publish a SOR Notice in the Federal Register explaining the existence, character, and uses of a new or revised SOR;
- Keep information about citizens and LPRs accurate, relevant, timely, and complete to assure fairness in dealing with you; and
 Allow citizens and LPRs to, upon request, access and review their information held in a SOR.

An overview of the Privacy Act can be viewed at the following web site: https://www.justice.gov/opcl/privacy-act-1974

EXIT

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Security Notification



Disclaimers

fficial Website of the D	Department of Homeland Sec	urity		(Change Language 🕨 📲	ENGLISH (U.S./U.K.)
U.S. Cust Border F	toms and Protection		X			Electronic System for Travel Authorization
	🖶 Home	🖋 apply -	Q CHI	ECK ESTA STATUS-	HELP	
•	0	0	0	0	0	0
Disclaimers	Applicant Information	Personal Information	Travel Information	Eligibility Questions	Review Application	Pay
 Disclaimer 						
The Electronic System required to obtain an e	for Travel Authorization perfor	ns checks against law enford sing this system prior to being	ement databases. All trave granted boarding.	lers seeking admission to th	e United States under the Visa	Waiver Program are
If your electronic trave Waiver Program. Upon the Visa Waiver Progra	l authorization application is ap arrival to the United States, you am or for any reason under Unit	proved, it establishes that yo u will be inspected by a U.S. C ed States law.	u are eligible to travel, but d sustoms and Border Protect	oes not establish that you ar ion Officer at a port of entry	e admissible to the United Sta who may determine that you a	tes under the Visa are inadmissible under
A determination that y	ou are not eligible for electronic	travel authorization does no	t preclude you from applyin	g for a visa to travel to the U	nited States.	
All information provide new information influe representation in an el	ed by you, or on your behalf by a encing eligibility. You may be su ectronic travel authorization ap	designated third party, must oject to administrative or crim plication submitted by you or	be true and correct. An electrication of the second s	tronic travel authorization m gly and willfully make a mat	nay be revoked at any time and erially false, fictitious, or fraud	d for any reason, such as lulent statement or
WARNING: If upon app may not accept unauth status, 2) an extension terms will subject you	plication for admission to the U norized employment; or attend s n of stay, or 3) adjustment of sta to REMOVAL.	nited States at a port of entry school; or represent the foreig itus to temporary or permane	you are admitted under the In information media during nt resident, unless eligible (Visa Waiver Program (VWP) your visit under the program Inder section 245(c)(4) of th	by a US Customs and Border n. You may not apply for: 1) a « e Immigration and Nationality	Protection Officer, you change of nonimmigrant Act. Violation of these
Please indicate you ha	we read and understand the info	ormation provided above:				
Yes, I have read ar	nd understand the information	and agree to these terms.				
O No, I need addition	nal clarification or I decline to p	rovide acknowledgment.				
> The Travel Pron	notion Act of 2009					
				EXIT		NEXT
NEED HELP?						
RELATED TOPIC	S:					
Fees and Daymo	int Ontions		→ Is my cr	dit card information safe?		
· ces unu r dyffie			→ Is my inf	ormation secure?		
 Can i get a refun 	u ii my application is not appro-	/eu?				PIN

When 'No' is selected

Official Website of	the Department of Homeland Security Change Language 🕨 🚍 🇮 ENC	
U.S. 0	WHAT IS THE ELECTRONIC SYSTEM FOR TRAVEL AUTHORIZATION (ESTA)?	K
Bord	To strengthen the security of travel to the United States under the Visa Waiver Program, requirements to travel visa-free have been enhanced. Nationals of Visa Waiver Program countries will still be eligible to travel without a visa but will have to obtain an approved travel authorization prior to their travel to the United States.	Authorization
	The Department of Homeland Security and the United States Customs and Border Protection have provided a secure public Web site with an automated form for you, or a third party, to complete in order to apply for a travel authorization. One you enter the required biographic, travel, and payment information on the secure Web site, your application is processed by the system to determine if you are eligible to travel to the United States under the Visa Waiver Program without a visa. The system will provide you with an automated response, and prior to boarding, a carrier will electronication on file.	
	The Electronic System for Travel Authorization (ESTA) is an automated system used to determine the eligibility of visitors to travel to the United States under the Visa Waiver Program (VWP) and whether such travel poses any law enforcement or security risk.	
	ESTA approval authorizes a traveler to board a carrier for travel to the United States under the VWP. Private carriers must be a signatory visa waiver program carrier. See list of Signatory Carriers. CBP recommends that you apply for ESTA at the time you book your travel, but no less than 72 hours prior to boarding.	
↓ The	ESTA is not a visa. It does not meet the legal requirements to serve in lieu of a U.S. visa when a visa is required. Travelers that possess a valid U.S. visa may travel to the United States on that visa for the purpose it was issued. Travelers traveling on valid visas are not required to apply for an ESTA. In the same way that a valid visa does not guarantee admission to the United States. In the same way that a valid is not guarantee of admission to the United States.	
requ If vo	ESTA became mandatory January 12, 2009. VWP applicants are required to complete a blue Customs declaration upon arrival in the U.S. whether or not they have an ESTA authorization. VWP travelers are no longer required to complete the green I-94W card.	
Wai the ' A de	Approved ESTA applications are valid for a period of two years, or until the passport expires, whichever comes first, and multiple trips to the United States without the traveler having to re apply for another ESTA. When traveling to the U.S. with the approved ESTA, you may only stay for up to 90 days at a time - and there should be a reasonable amount of time between visit so that the CEP Officier does not think you are trying to live hers. There is no extreguinement for how long you must wait between visits.	e 9
All in	Travelers whose ESTA applications are approved, but whose passports will expire in less than two years, will receive an ESTA valid until the passport's expiration date.	
new	A new ESTA authorization is required if:	
repr WAI may	 You are issued a new passport, You change your name (first and/or last) You change your sex 	
stat term Plea	 Your country of citizenship changes Your circumstances change, e.g., you are convicted of a crime of moral turpitude or you develop a contagious disease. Such a change may require you to get a visa to travel to the U.S. You must re-apply and your application must reflect the change in your circumstances or you may be denied entry upon arrival in the United States. More information about other ineligibilities can be found on the U.S. State Department website 	
0	DHS recommends that you apply for ESTA authorization as soon as you know you will be traveling to the United States under the VWP. If your ESTA expires while in the U.S., it will not affect your departure.	
	Beginning September 8, 2010, there is a fee required by the Travel Promotion Act of 2009 (Section 9 of the United States Capitol Police Administrative Technical Corrections Act of 2009, Pub. L. No. 111-145). The Further Consolidated Appropriations Act, 2020 (PL 116-94), updated ESTA application fee to \$21. The fee is comprised of two parts:	
>	 Processing Charge – All applicants requesting an electronic travel authorization are charged for the processing of the application. The fee is US \$4.00. Authorization charge – If your application is approved and you receive authorization to travel to the United States under the Visa Waiver Program, an additional US \$17.00 will be added to your payment method. If your electronic travel authorization is denied, you are only charged for the processing of your application. 	
	CBP is not responsible for any third party fees for the transaction.	
NEE	Note: It is important to PRINT a copy of the document for your records. The printout is not required upon arrival into the United States, as the officers have the information electronically.	
REL	CLOSE	
	→ Is my information secure?	_

	# HOME	APPLY-	Q CH	ECK ESTA STATUS+	3 HELP	
Disclaimer	0	O	0		O .	0
Disclaimers	Applicant information	Personal Information	Travel Information	Eligibility Questions	Review Application	Pay
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When 'No' is selected

S.C.	IS THERE A FEE TO APPLY FOR AN ESTA?			×
	Yes, there is a fee associated with the Travel Promotion Act of 2009 and the Further Consolidated • Processing Fee. All applicants requesting an electronic travel authorization are charged US • Authorization Fee. If your application is approved and you receive authorization to travel to	d Appropriations Act, 2020 (PL 116-94). The f S \$4 for the processing of the application. o the United States under the Visa Waiver Pro	ee is comprised of two parts: gram, an additional US \$17.00 will be adder	n n t
	to your payment method. If your electronic travel authorization is denied, you are only char	rged for the processing of your application.		
	CBP is not responsible for any additional fees that may be charged by your credit/debit card com	pany or PayPal for the transaction.		
			CLOSE	
~	Disclaimer			
~	The Travel Promotion Act of 2009			
On us au \$4 ap	March 4, 2010, President Obama signed into law the Travel Promotion Act (TPA) of 2009, Pub. L. N e of the ESTA system. The Further Consolidated Appropriations Act, 2020 (PL 116-94), updated EST thorization to travel to the United States and \$4.00 for the processing of the ESTA application. Appl .00. The fee may only be paid by credit card or PayPal. Applicants may save the application data an plication will not be submitted for processing until all payment information is completed.	No. 111-145. The Act directs the Secretary of I TA application fee to \$21 comprised of \$17.00 iccants who are denied authorization to travel d return to the application at a later date to end the application at a later date.	Homeland Security to establish a fee for the for each VWP applicant receiving to the U.S. under the VWP will only be char, ter the payment information. However, the	e ged
W/ inc rec au By the	ARNING: The administrative fee will be collected by credit card or PayPal. It is crucial that all applicate correctly, the applicant may be charged additional fees to reapply. Updates to an application will not belve authorization to travel to the United States and will not be allowed to board any aircraft or vess thorization to travel to the United States will be revoked. CBP is not responsible for additional fees t pressing the "Apply" button in the application process, applicants agree not to dispute any administ are are no refunds.	ants enter their ESTA and payment information accrue additional fees. Applicants who do not sel destined for the United States. If an applic that may be charged by the applicant's credit trative fee charged by CBP for the use of the l	n accurately. If information is entered of complete the payment process will not ant stops payment of the fee, his or her card company or PayPal for the transaction SSTA system, and further acknowledge tha	L t
Ple	ease indicate you have read and understand the information provided above:			
0	Yes, I have read and understand the information and agree to these terms.			
0	No, I need additional clarification or I decline to provide acknowledgment.			
		EXIT	NEXT	

UPLOAD YOUR PASSPORT



<mark>Passport Upload – Regula</mark>



Review & Confirm – When Passport Upload is successful

Official Website of the Department of Home	land Security			Change Language 🕨	ENGLISH (U.S./U.K.)
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Family Name	Date of Birth 28 February 1938	Country of Citizenship / Nationality SWEDEN (SWE)	Issuing Country SWEDEN (SWE)	AMPLE	PASSPORT
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UPLOAD APPLICANT'S SELFIE



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UPLOAD APPLICANT'S SELFIE: "From Gallery" option

Official Website of the Department of Homeland	Security		Change Language 🕨 🚛 💥 ENGLISH (U.S./U.K.)
U.S. Customs and Border Protection	*		× ESTA: Electron Travel Au ELP	c System for horization newd tecenty =
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	ENTER APPLICANT INFO The following information is required of every r requested. Each member of your traveling part Please provide all responses in English. Required fields are indicated by a red asterisk		1 in 8 CFR 217.2. Please enter all information	Serve Dear
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UPLOAD APPLICANT'S SELFIE: "From Camera" option



UPLOAD APPLICANT'S SELFIE: SELFIE PREVIEW

Enter Applicant Information

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Disclaimers Ap	plicant Information	Personal Information	Travel Information	Eligibility Questi	ons Review Application	Pay
ITER APPLICAN	T INFORMATI	ION				
following information is requi lested. Each member of your t	red of every non-immigra traveling party must com	ant visitor not in possession plete a separate application	ı of a visitor's visa who is a na 1.	ational of one of the	countries ^[1] listed in 8 CFR 217.2. Please enter	all informat
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er to your passport and enter a	all information in the sam	ne format.			What is this?	
amily Name EST		First (Given) Name TEST	e			
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ountry of Citizenship / Nationalit WEDEN (SWE)	ty	 National Identifica 	ation Number		Image: And a constraint of the second seco	28 shows minime logist <<<< <<14
ersonal Identification Number					This sample passport displays the informat need from applicant's passport. Informatior entered exactly as it appears in passport. Et	ion you will 1 must be nlarge image
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ale		• 28 •	repruary → 193	8 -		
ty of Birth *		Country of Birth *		•		

OTHER CITIZENSHIP/NATIONALITY

e you now, a cluzen of hadonal of any othe	r country? * 🔞		Yes	*
country of Citizenship / Nationality *	/ How did you acquire citizenship / nationalit	ty from this country? *	ADD ANOTHER	
ave you ever been a citizen or national of a	ny other country? * 🔞		Yes	*
ountry of Citizenship / Nationality *	🗂 From * 🚱 Day 💌 Month 👻 Year 👻	🗂 To * 😧 • Day • Month • Year •	ADD ANOTHER	
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IMPORTANT: Your application nur	nber will be sent to the email address entered	below. You must verify your email address to c	omplete your application.	
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In case of Country of Birth & Country of Citizenship mismatch for SST Countries

City of Birth *	Country of Birth *			
TEST	SUDAN (SDN)	~		
OTHER CITIZENSHIP/NA	TIONALITY			
Are you now, a citizen or national of an	y other country? * 😮		Yes 👻	
Country of Citizenship / Nationality *	How did you acquire citizenship / nationality from	n this country? *	-	
ANDORRA (AND)	Naturalized	✓ Other	+ ADD ANOTHER	
Have you ever been a citizen or nationa	l of any other country? * 🔞		Yes 👻	
Country of Citizenship / Nationality * AMERICAN SAMOA (ASM) -	➡ From * ② 3 ▼ April ▼ 2020 ▼ 4	▼	ADD ANOTHER	
You have indicated that you are not a c country of birth: * 🔞	itizen or national of your country of birth. From the l	ist below, please select ALL statement	is that apply with respect to your	
Did not acquire citizenship at birth	or have never held citizenship in birth country			
Renounced citizenship of birth cou	ntry			
Have not lived or resided in birth co	puntry within the past five years			
Have not held a passport or nation	al identity card from birth country within the past fiv	e years		
C Other				

VERIFY INFORMATION - Family Name

ountry of Citizenship / Nationality *	VERIFY INFORMATION	×
MERICAN SAMOA (ASM)	Please confirm the below information is correct.	ADD ANOTHER
	Family Name *	
	TEST	
IMPORTANT: Your application nu	mbe	your application.
	CANCEL & EXIT	CONFIRM & CONTINUE
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VERIFY INFORMATION - First (Given) Name

	VERIEV INFORMATION		×
ountry of Citizenship / Nationality *			
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	First (Given) Name *		-
	TEST		
IMPORTANT: Your application number			your application.
	CANCEL & EXIT	CONFIRM & CONTINU	E
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VERIFY INFORMATION – Passport Number

ountry of Citizenship / Nationality *	VERIFY INFORMATION		×
MERICAN SAMOA (ASM)	Please confirm the below information is	correct.	ADD ANOTHER
	Passport Number *		
	TESTTEST1		
IMPORTANT: Your application number	• Enter your passport number as it a number may contain numbers and/or	ppears on your passport. The passport characters. Please closely distinguish	your application.
mail Address *	between the number zero and the lett complete the application or to check t	er O. The passport number is required to the status of your application.	
EST@TEST.COM			
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Note: If your application is not completed with	nin 7 days, it will be deleted.		

VERIFY INFORMATION - Date of Birth

Country of Citizenship / Nationality *	VERIFY INFORMATION		×	
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	🖰 Date of Birth * 🙆			
	28 - February		·	
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EMAIL VERIFICATION

Country of Citizenship / Nationality *	EMAIL VERIFICATION	2	<
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	If your email address is correct, click on "Send Co	ode" to send the email.	
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<mark>ENTER CODE</mark>

ave you ever been a citizen or national of any	other country? * 😧		Yes 👻
ountry of Citizenship / Nationality *	ENTER CODE		×
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IMPORTANT: Your application numb	e		your application.
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mail Address * EST@TEST.COM If you are not able to complete your a Application Number to retrieve your appli Note: If your application is not completed	TEST@TEST.CC application now, you can "Save and Exit" and finisi cation. (If you did not receive a confirmation email I within 7 days, it will be deleted.	DM h at a later date. We will need to verify your , please check your spam folder.)	email address before we can send you your

ENTER PERSONAL INFORMATION

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The email addre	ss TEST@TEST.COM has b	een verified. Your progress has be	en saved and you may co	ntinue with your application.		
TER PERS	ONAL INFORM	ATION				
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you known by any otl	her names or aliases? * 🔞)				Yes 👻
nily Name *		First (Given) Nam	e *		ADD ANOTHER	
e you ever been issue	ed a passport or national id	lentity card for travel by any other	country? * 🔞			Yes •
e you ever been issue uing Country *	ed a passport or national id	entity card for travel by any other Document Type *	v Documen	t Number * Expire	tion Year *	Yes
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SOCIAL MEDIA (OPTIONAL)							
Please enter information associated with your o Social Media Frequently Asked Questions.	online presence ov	er the past five years. 🔞					
Facebook Page ID	LinkedIn Profile	e Link	Twitter User ID	Instagr	ram User ID		
Provider / Platform	Ŧ	Social Media Identifier		ADD ANOTHER			
I do not have an online presence.							NE
GE/NEXUS/SENTRI MEMBERS	HIP						ED HEL
Are you a member of the CBP Global Entry/NEX	(US/SENTRI Progra	am? * 😧			Yes	·	.P?
PASSID *							
PARENTS Please list your parents names in the boxes to t	he right. All applic	ants are required to fill out this sec	tion.				
Family Name *		First (Given) Name *					
Family Name *		First (Given) Name *					
EMPLOYMENT INFORMATION	Ø				Vas		
	-						NE
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ENTER TRAVEL INFORMATION

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Disclaimers App	licant Information	Personal Information	Travel Information	Eligibility Question	Review Application	Рау
ENTER TRAVEL INF	ORMATION					
Please provide all responses in Eng Required fields are indicated by a r	jlish. ed asterisk *.					
Is your travel to the US occurring in	transit to another cou	intry?* 😧				No
U.S. POINT OF CONTA	CT INFORMAT	ION				
Name *						
Address Line 1 *		Address Line 2		Aţ	partment Number	
City *		State *		*		
Country Code * UNITED STATES (USA) (+1)		Phone Number *				
ADDRESS WHILE IN TH The address where you will be stay of the hotel or location you will visi	HE U.S. ing in the U.S. is optic t.	onal to complete the applicati	ion. If multiple locations are	e planned, enter the first a	address. If the complete addre	ess is not known, enter the name
Is your Address While in the U.S. sa	ame as the U.S. Point (of Contact Address listed abo	ove?			No 👻
Address Line 1		Address Line 2		A	partment Number	
City		State		Ŧ		
EMERGENCY CONTAC	T INFORMATI	ON IN OR OUT OF T	THE U.S.			
Family Name *		First (Given) Nam	ie *	E	-mail Address *	
Country Code *		✓ Phone Number *				
🖺 SAVE AND EXI	Г	Step 4 of 7		PREVIOUS		NEXT

Q1

ELIGIBILITY QUESTIONS

Need additional guidance on eligibility questions? Required fields are indicated by a red asterisk *.

1) Do you have a physical or mental disorder; or are you a drug abuser or addict; or do you currently have any of the following diseases (communicable diseases are specified pursuant to section 361(b) of the Public Health Service Act): *

--Please Select 🏾 🔺

- CholeraDiphtheria
- Tuberculosis, infectious
- Plague
- Smallpox
- Yellow Fever
- Viral Hemorrhagic Fevers, including Ebola, Lassa, Marburg, Crimean-Congo
- · Severe acute respiratory illnesses capable of transmission to other persons and likely to cause mortality.

When answered 'Yes'



- Cholera
- Diphtheria
- Tuberculosis, infectious
- Plague
- Smallpox
- Yellow Fever
- Viral Hemorrhagic Fevers, including Ebola, Lassa, Marburg, Crimean-Congo
- · Severe acute respiratory illnesses capable of transmission to other persons and likely to cause mortality.



2) Have you ever been arrested or convicted for a crime that resulted in serious damage to property, or serious harm to another person or government authority? *	Yes	*
3) Have you ever violated any law related to possessing, using, or distributing illegal drugs? *	Yes	-
4) Do you seek to engage in or have you ever engaged in terrorist activities, espionage, sabotage, or genocide?*	Yes	*
5) Have you ever committed fraud or misrepresented yourself or others to obtain, or assist others to obtain, a visa or entry into the United States? *	Yes	
6) Are you currently seeking employment in the United States or were you previously employed in the United States without prior permission from the U.S.	Yes	Ŧ
7) Have you ever been denied a U.S. visa you applied for with your current or previous passport, or have you ever been refused admission to the United States or withdrawn your application for admission at a U.S. port of entry? *	Yes	Ŧ
If yes:		
when* where *		
8) Have you ever stayed in the United States longer than the admission period granted to you by the U.S. government? *	Yes	*

When answered 'Yes'

Diphtheria				
Tuberculosis, infectious Plague Smallpox	ALERT ×			
Yellow Fever Viral Hemorrhagic Fevers, including Ebola, i Severe acute respiratory illnesses capable o	Are you sure you wish to answer yes to this question? DHS recommends that you review the "Help" section of this site before proceeding with your application.			
2) Have you ever been arrested or convicted for a (ок	prity? *	Yes	•
3) Have you ever violated any law related to posses	ssing, using, or distributing illegal drugs? *		Yes	•

Country *	,	🛱 From * 🙆			M To * Ø			
	*	Month	▼ Year	*	Month	-	Year	*
Iran (IRN) Iraq (IRQ) Libya (LBY) North Korea (PRK) Somalia (SOM) Sudan (SDN) Syria (SYR) Yemen (YEM)								•

)) Have you traveled to, or been prese	nt in Iran, Iraq, Libya, North K	orea, Somalia, Suda	n, Syria or Yemen on or after N	/larch 1, 2011? *		Yes	*
		🗂 From * 🔞			🗂 To * 🔞		
Country *	Ŧ	Month	▼ Year	•	Month	▼ Year	*
🛱 Primary Reason * 🙆							
To travel as a tourist (vacation)							
To travel as a tourist (vacation)							
For personal travel or a family vis	sit (including emergencies).						
For commercial / business purpo	ises.						
To carry out official duties as a f	ull-time employee of the gove	ernment of a Visa V	Vaiver Program country.				
To perform military service in the	armed forces of a Visa Wai	ver Program count	ry.				
To conduct work as a journalist.							
To engage in humanitarian assis	tance on behalf of a humani	tarian or internatio	nal non-governmental organiza	ation.			
To carry out official duties on be	half of an international organ	ization or regional	(multilateral or inter-governme	ental) organizat	ion.		
To carry out official duties on be	half of a sub-national govern	ment or body of a	VWP country				
N To attend an academic institutio	n.						
To participate in a professional e	xchange or conference						
ha To participate in a cultural excha	nde prodram						

<mark>Q9</mark>

det Other

n*	If the purpos	e of your travel to Iran	, Iraq, Libya, North Korea, Soma	alia, Sudan, Syri	a or Yemen was		
	for official go Officer evider	overnment or military r nce to support this cla	easons, upon arrival in the U.S. im.	, you should pr	esent to a CBP		
lave you ever stayed in the United States lo	onge					Yes	*
					ок		
lave you traveled to, or been present in Irar	n, Iraq, Libya, North K	(orea, Somalia, Sudan,	Syria or Yemen on or after Ma	rch 1, 2011? *		Vas	
		🗂 From * 🔞			🗂 To * 😧		

9) Have you traveled to, or been present in Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011? *

		🗂 From * 🔞			🗂 To * 🔞				
Country *	-	Month	▼ Year	~	Month	▼ Year ▼			
Primary Reason * To conduct work as a journalist.									
Organization Information									
Please identify the company, business entity, or organizat	ion on	behalf of which you trave	led to Iran, Iraq, Libya, N	orth Korea, Soma	lia, Sudan, Syria or Y	/emen to engage in journalism. * 🔞			
What was your official position / title with the company, business entity, or organization identified? * 🔞									
Have you ever been issued an I-Visa by a United States Embassy or Consulate? If "Yes," please provide your I-Visa Number, if						-			
						+ ADD ANOTHER ORGANIZATION			
						ADD ANOTHER TRAVEL			

9) Have you traveled to, or been present in Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011? *

Yes		~
-----	--	---

Country *	From * 🚱	▼ Voor	•	🗂 To * 🚱	▼ Vear	•
Country "	Month	- rear		MUTIT	* Year	
Primary Reason * To engage in humanitarian assistance on behalf of a hu	manitarian or international no	n-governmental organization.				
Organization Information						
Please identify the organization or entity on behalf of wh	iich you traveled to Iran, Iraq, L	ibya, North Korea, Somalia, Si.	udan, Syria or	Yemen for humanitari	an purposes. * 🔞	
Does your organization or business entity have consulta	tive status with the United Na	tions Economic and Social Co	uncil?* 🔞			
		_				
What was your official position with the company, busine	ess entity, or organization ider	ntified?* 🕜				
If different than your current employer, please provide co	ntact information for the orga	anization or entity identified, in	cluding prima	ry address and teleph	one number. * 🔞	
Please provide your Iranian, Iraqi, Libyan, North Korean, S	Somalian, Sudanese, Syrian or	Yemeni Visa Number related	to your humar	hitarian travel. * 🕑		
16		6 - h	. Alter alter to a			
n your organization of business entity has been a recipie	ent of 0.5. government runding	g for numanitarian assistance	within the las	t rive years, piease pro	wide the most recent grant r	iumber. * 🕑
Please provide information about the type of work you w	ere doing in this country durin	and this time * Q				
Thease provide information about the type of work you w	ere doing in this country duri	ig uns unie. 🐨				
Please include any information you are willing to share a	bout other NGOs or internatio	nal national or state agencies	with which v	ou worked * 🙆		
. reace include any information you are writing to differe t		and, national or state agenete	,	eenomee. 🛫		
Any additional comments						



ADD ANOTHER ORGANIZATION

9) Have you traveled to, or been present in Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011?*

	🗂 From * 🔞			🗂 To * 🔞		
Country*	Month	▼ Year	*	Month	▼ Year	Ŧ
🗂 Primary Reason * 🔞						
To carry out official duties on behalf of an international organization	ation or regional (multilate	eral or inter-governmental) o	rganization.			<u>ـ</u>
Organization Information						
Please identify the international (multilateral or intergovernment North Korea, Somalia, Sudan, Syria or Yemen. * 🔞	al) organization or region	al (multilateral or inter-gover	nmental) org	ganization on behalf of	f which you traveled to Ira	n, Iraq, Libya,
Please identify the sub-national government or body of a VWP c	ountry on behalf of which	ı you traveled to Iran, Iraq, Lib	oya, North Ko	rea, Somalia, Sudan, S	Syria or Yemen. * 🔞	
What was your official position / title with the organization or go	wernment identified? * 🧃					
Please provide your Iranian, Iraqi, Libyan, North Korean, Somalia sub-national government. * 📀	n, Sudanese, Syrian or Yer	meni Visa Number related to	your official	travel on behalf of an	international or regional o	organization, or
Have you ever been issued a G-Visa or A-Visa by a United States Visa, if known. * 🚱	Embassy or Consulate? I	lf "Yes," please provide your (3-Visa or A-	Please Select		-
Have you ever been issued a United Nations Laissez-Passer? If	"Yes," please provide your	Laissez-Passer number. * (9	Please Select		Ŧ
					ADD ANOTHER	ORGANIZATION
						ANOTHER TRAVEL

9) Have you traveled to, or been present in Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011? *

-

Yes

	🛱 From * 🔞			🗂 To * 🔞		
Country *	Month	▼ Year	*	Month	▼ Year	Ψ
Primary Reason *						
To carry out official duties on behalf of a sub-national gover	rnment or body of a VWP cou	ntry				
Organization Information						
Please identify the international (multilateral or intergovernm North Korea, Somalia, Sudan, Syria or Yemen. * 🔞	nental) organization or region	al (multilateral or inter-gove	ernmental) or	ganization on behalf (of which you traveled to I	ran, Iraq, Libya,
Please identify the sub-national government or body of a VV	VP country on behalf of which	a you traveled to Iran, Iraq, L	ibya, North Ko	orea, Somalia, Sudan,	Syria or Yemen. * 🔞	
What was your official position / title with the organization o	or government identified?* 🧯	9				
Please provide your Iranian, Iraqi, Libyan, North Korean, Som sub-national government. * 🚱	nalian, Sudanese, Syrian or Yei	meni Visa Number related t	to your official	travel on behalf of a	n international or regiona	l organization, or
Have you ever been issued a G-Visa or A-Visa by a United St Visa, if known. * 🔞	ates Embassy or Consulate?	lf "Yes," please provide your	r G-Visa or A-	Please Select		•
Have you ever been issued a United Nations Laissez-Passer	? If "Yes," please provide your	Laissez-Passer number. *	0	Please Select		Ŧ
						R ORGANIZATION
					+ ADI	D ANOTHER TRAVEL

lave you traveled to, or been present ir	been present in Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011? *					Yes		
		🗂 From * 🔞			🗂 To * 🔞			
Country *	*	Month	▼ Year	*	Month	*	Year	
🗂 Primary Reason * 🔞 Other								
ither * 🚱								



WAIVER OF RIGHTS

I have read and understand that I hereby waive for the duration of my travel authorization obtained via ESTA any rights to review or appeal of a U.S. Customs and Border Protection Officer's determination as to my admissibility, or to contest, other than on the basis of an application for asylum, any removal action arising from an application for admission under the Visa Waiver Program.

In addition to the above waiver, as a condition of each admission into the United States under the Visa Waiver Program, I agree that the submission of biometric identifiers (including fingerprints and photographs) during processing upon arrival in the United States shall reaffirm my waiver of any rights to review or appeal of a U.S. Customs and Border Protection Officer's determination as to my admissibility, or to contest, other than on the basis of an application for asylum, any removal action arising from an application for admission under the Visa Waiver Program.

CERTIFICATION: *

I, the applicant, hereby certify that I have read, or have had read to me, all the questions and statements on this application and understand all the questions and statements on this application. The answers and information furnished in this application are true and correct to the best of my knowledge and belief.

THIRD PARTIES ONLY:

For third-parties submitting the application on behalf of the applicant, I hereby certify that I have read to the individual whose name appears on this application (applicant) all the questions and statements on this application. I further certify that the applicant certifies that he or she has read, or has had read to him or her, all the questions and statements on this application, understands all the questions and statements on this application, and waives any rights to review or appeal of a U.S. Customs and Border Protection Officer's determination as to his or her admissibility, or to contest, other than on the basis of an application for asylum, any removal action arising from an application for admission under the Visa Waiver Program. The answers and information furnished in this application are true and correct to the best of the applicant's knowledge and belief.

🖺 SAVE AND EXIT	Step 5 of 7	PREVIOUS	NEXT

REVIEW YOUR APPLICATION



Country of Birth ST. PIERRE AND MIQUELON (SPM)

OTHER CITIZENSHIP/NATIONALITY

Are you now, a citizen or national of any other country? Yes

Country of Citizenship / Nationality ANDORRA (AND)	How did you acquire citizenship / n country? Naturalized	How did you acquire citizenship / nationality from this Other country? Naturalized				
Have you ever been a citizen or national of any other of	country? Yes					
Country of Citizenship / Nationality AMERICAN SAMOA (ASM)	From April 3, 2020	To April 4, 2021				
E-mail Address TEST@TEST.COM	Confirm E-mail Address TEST@TEST.COM		CONFIRM & CONTI	NUE		
> PERSONAL INFORMATION				Edit 🖋		
Are you known by any other names or aliases? Ye	es					
Family Name TEST	First (Given) Name TEST					
Have you ever been issued a passport or national	identity card for travel by any other country?	Yes				
Issuing Country D AUSTRIA (AUT) N	Document Type lational Identity Card Number	Document Number 23523535	Expiration Year 2024			
YOUR CONTACT INFORMATION						
Address Line 1 TEST	Address Line 2		Apartment Number			
City TEST	State/Province/Region TEST		Country ANGUILLA (AIA)			
Telephone Type Mobile	Country Code BAHAMAS (BHS) (+1)		Phone Number 7037293822			

SOCIAL MEDIA (OPTIONAL)

N/A

GE/NEXUS/SENTRI MEMBERSHIP

Are you a member of the CBP Global Entry/NEXUS/SENTRI Program? No

PARENTS		
Family Name TEST	First (Given) Name TEST	
Family Name TEST	First (Given) Name TEST	
EMPLOYMENT INFORMATION		
Do you have a current or previous employer? Yes		
Job Title	Employer Name TEST	
Address Line 1 TEST	Address Line 2	
City TEST	State/Province/Region TEST	Country ALGERIA (DZA)
Country Code BAHRAIN (BHR) (+973)	Phone Number 7038293831	

CONFIRM & CONTINUE

> TRAVEL INFORMATION

Is your travel to the US occurring in transit to another country? $\ensuremath{\,\text{No}}$

U.S. Point of Contact Information

Name TEST

Address Line 1 Address Line 2 Apartment Number TEST City State/Province/Region TEST IDAHO Country Code Phone Number UNITED STATES (USA) (+1) 7038293833 Address While in the U.S. Address Line 2 Address Line 1 Apartment Number City State/Province/Region EMERGENCY CONTACT INFORMATION IN OR OUT OF THE U.S. Family Name First (Given) Name E-mail Address TEST UNKNOWN TEST

Country Code BAHAMAS (BHS) (+1) Phone Number 0000

CONFIRM & CONTINUE

Edit 🖋

> ELIGIBILITY QUESTIONS	Edit 🖋
 Do you have a physical or mental disorder; or are you a drug abuser or addict; or do you currently have any of the following diseases (communicable diseases are specified pursuant to section 361(b) of the Public Health Service Act): Cholera Diphtheria Tuberculosis, infectious Plague Smallpox Yellow Fever Viral Hemorrhagic Fevers, including Ebola, Lassa, Marburg, Crimean-Congo Severe acute respiratory illnesses capable of transmission to other persons and likely to cause mortality. 	No
2) Have you ever been arrested or convicted for a crime that resulted in serious damage to property, or serious harm to another person or government authority?	No
3) Have you ever violated any law related to possessing, using, or distributing illegal drugs?	No
4) Do you seek to engage in or have you ever engaged in terrorist activities, espionage, sabotage, or genocide?	No
5) Have you ever committed fraud or misrepresented yourself or others to obtain, or assist others to obtain, a visa or entry into the United States?	No
6) Are you currently seeking employment in the United States or were you previously employed in the United States without prior permission from the U.S. government?	No
7) Have you ever been denied a U.S. visa you applied for with your current or previous passport, or have you ever been refused admission to the United States or withdrawn your application for admission at a U.S. port of entry?	No
8) Have you ever stayed in the United States longer than the admission period granted to you by the U.S. government?	No
9) Have you traveled to, or been present in Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011?	No
CONFIRM & C	CONTINUE

> APPLICANT INFORMATION				Reviewed 🗸	Edit 🖋
> PERSONAL INFORMATION				Reviewed 🗸	Edit 🖋
> TRAVEL INFORMATION				Reviewed 🗸	Edit 🖋
> ELIGIBILITY QUESTIONS				Reviewed 🗸	Edit 🖋
> VERIFICATION					
For verification purposes, please re-enter the following inform	nation, as shown on your ESTA-eligib	le passport.			
Passport Number *	Issuing Country *		*		
Family Name *	🗂 Date of Birth * 🚱 Day 🔻 Month	▼ Year	*		
SAVE AND EXIT	Step 6 of 7	PREVI	OUS	NEXT	

PAY NOW AND COMPLETE APPLICATION

)
Disclaimers	Applicant Information	Personal Information	Travel Information	Eligibility Questions	Review Application	Pay	
PAY NOW AN This application is not ye Required fields are indic	D COMPLETE AF et complete and will not be prov ated by a red asterisk*.	PPLICATION cessed until after the application	on fee is paid in full.			Download 📩	Print 🖨
Name	Date of Birth	Application Number	Passport Numbe	r Status			
TEST TEST	Feb 28, 1938	150570201P406650	TESTTEST1	Unpaid	🖋 Update	Q View	
NOT READY TO PAY?				PAYMENT SUMMARY			
You will need the above information (Date of Birth, Application Number, and Passport Number) in order to make a payment, if you choose not to pay now.				Application Fee:			US \$21.0
				# of Applications:			x [1
elect "Print" to print you oplication information. '	ir application information, and Your application will not be rev	"Download" to download a PDF iewed until a payment is made	of your				
PAYMENT DUE BY: March 30, 2023				TOTAL DUE:			US \$21.0
l ote: If unpaid, your appl	lication will be deleted after thi	is date.					
exit this page, please close your browser window.				DISCLAIMER *			6
				I understand that a request by the cardholder to the bank or PayPal for a refund of the fees will result in an automatic denial of the application.			

PAY NOW

NEED HELP?

PAY.GOV



U.S. Customs and Border Protection

< Cancel

Electronic System for Travel Authorization (ESTA) QAX

STA

Electronic System for Travel Authorization

Payment Information Payment Amount \$21.00 I want to pay with my O PayPal account Debit or credit card \cap Cancel

Electronic System for Travel Authorization (ESTA) QAX

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\$

Please provide the payment information below. Required fields are marked with an * Agency Tracking ID

301115168

Payment Amount \$21.00

* Cardholder Name

* Cardholder Billing Address

Billing Address 2
City
City
Select Country

State/Province

ZIP/Postal Code

* Card Number

VISA 😄 🔤 "🔤 🖬 🕕 🕕

* Expiration Date

Select ... 🗢 Select ...

* Security Code