

DS-260 IV Application **SAMPLE**

September 2025

SBU



Bureau of Consular
Affairs Consular Systems
and Technology

Sign In Page

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U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

Immigrant Visa

Sign In

Welcome to the Consular Electronic Application Center – Immigrant/Diversity Visa portal. To access your case, please enter your case number below.

Please do not use the browser's back or refresh buttons while using the CEAC site. Instead, use the navigation links on the page. You will lose information if you use the browser's back or refresh button, and will need to log back into the application.

Privacy Act

AUTHORITIES: The information sought is pursuant to 8 U.S.C. §§ 1201-1202.

PURPOSE: The information solicited on this form will be used by consular officers to determine an applicant's eligibility for a visa.

ROUTINE USES: The information on this form may be shared with federal, state, and local government agencies, members of Congress, and officials of foreign governments in accordance with certain approved routine uses. More information on the Routine Uses for the system can be found in the System of Records Notice State-39, Visa Records.

DISCLOSURE: Although providing this information is voluntary, failure to provide the information requested on this form may result in the applicant's inability to receive an immigrant or nonimmigrant visa.

☐ I have read the terms of the Privacy Act Notice

Case Number

Continue

Important: Before You Begin

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☒ I have read the terms of the Privacy Act Notice

Case Number

Enter the Invoice ID Number that the National Visa Center sent you

I am the

-- SELECT ONE --



Enter the characters as shown:

Continue

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Enter the Invoice ID Number that the National Visa Center sent you

I am the

-- SELECT ONE --

-- SELECT ONE --

APPLICANT

ATTORNEY

PETITIONER

THIRD-PARTY AGENT

Continue

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Summary Information Page

Example of a piVot case Summary page.



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U.S. DEPARTMENT of STATE

CONSULAR ELECTRONIC APPLICATION CENTER

CHOICE OF ADDRESS & AGENT

FEES

IV APPLICATION

Immigrant Visa

CASE NUMBER: CSB2024755003

VISA CLASS: IR1

NVC

FRENCH POLYNESIA

CASABLANCA

PRIORITY DATE: 27-SEP-2021

YOUR CASE IS CURRENTLY AT:

FOREIGN STATE OF CHARGEABILITY:

INTERVIEW LOCATION:

PRIORITY DATE:

Summary Information

The National Visa Center (NVC) has received your approved immigrant visa petition from the U.S. Citizenship and Immigration Services. Before NVC can schedule your visa interview, you need to complete the following steps:

Step 1: Pay fees.

Step 2: Complete an Immigrant Visa (IV) Application (form DS-260).

Step 3: Submit required financial and civil documents.

After all required documents are submitted, if something is missing or incorrect, NVC will send you an email to check your CEAC Messages. You can access your CEAC Messages by clicking "View Messages". To verify the email addresses on your case and provide updates as required, click 'Edit' in the Contact Information section.

After your documentation has been accepted by NVC, your interview will be scheduled at the local U.S. Embassy or Consulate.

Refer to <https://nvc.state.gov> and the [Frequently Asked Questions \(FAQs\)](#), for additional instructions and helpful hints. If you have further questions, contact NVC online via [Ask NVC](#).

[View: FBI Privacy Act Statement](#)

MESSAGES

No Messages

TOTAL 0

NEW 0

CONTACT INFORMATION

Email Addresses

Edit

FAQs

Pay Affidavit of Support Fee

Submit Affidavit of Support and Financial Evidence

Pay IV Fee

Submit IV Application


Submit Civil Documents

NVC Reviews Case

NVC Schedules Appointments

APPLICANT INFORMATION

	Status	IV Fee	IV Application	Civil Documents
POUNDS, SEVEN PRINCIPAL	PRINCIPAL APPLICANT	N/A	INCOMPLETE	N/A



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Getting Started Page – Immigration Visa and Alien Registration Application

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CONSULAR ELECTRONIC APPLICATION CENTER

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COMPLETE

REVIEW

SIGN

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

Getting Started

✓ Getting Started ▶
✓ Personal
✓ Address and Phone
✓ Family
✓ Previous U.S. Travel
✓ Work / Education / Training
✓ Petitioner
✓ Security and Background
✓ Social Security Number

NOTE: If there is no activity for 20 minutes or more in the process of completing this online application, your session will expire and some data might be lost. Data entered will be saved as you advance through the application by clicking the Next button. However, data on the current page will be lost if there is no activity for 20 minutes.

You selected the Online Application for Immigrant Visa and Alien Registration. This application is for individuals who are applying for an immigrant visa and alien registration. Please have your passport (or travel documentation), previous visa information (if applicable), and any other documents relevant to your intended immigration to the United States ready and available for your reference before you start the application process.

The following instructions contain important information about the application process. Please read all the instructions carefully.

Instructions for completing the Online Application for Immigrant Visa Application and Alien Registration:

1. Provide true and complete answers to all questions you are asked. Failure to provide an answer to a question that is applicable to you may result in your application being rejected.
2. Please have all of your required documentation with you while completing this form as it will be helpful for some of the questions. If you have not already collected your documentation, then please click [here](#) for more information.
3. Your answers must be in English and must use English characters, unless you are specifically directed to provide an answer in your native alphabet. Applications submitted in any language other than English may be rejected. Letters like ñ, é, ü, ç are not recognized by the system. Please enter words like Muñoz or Sémonin as Munoz or Semonin, unless otherwise asked.
4. Review all the information you entered for accuracy.
5. We recommend that you print or email the confirmation page for your records before you exit the application. Do not mail the confirmation page to NVC. You should bring your confirmation page with you to your visa interview.
6. Once you have submitted the DS-260 forms for you and your accompanying family members, you must then submit your required civil documents, photographs and embassy-specific documents to the NVC.

If your case is NOT processing electronically, find additional information for submitting documents to NVC at <https://nvc.state.gov/mail>.

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.

Continue

Personal Information 1 Page

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

U.S. DEPARTMENT of STATE

CONSULAR ELECTRONIC APPLICATION CENTER

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COMPLETE

REVIEW

SIGN

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

OMB CONTROL NUMBER: 1405-0185

FORM NUMBER: DS-260

EXPIRATION DATE: 10/31/2025

ESTIMATED BURDEN: 155 MIN

Personal Information 1

NOTE: Data on this page must match the information as it is written in your passport or travel documents.

Surnames

(e.g., FERNANDEZ GARCIA)

Given Names

(e.g., JUAN MIGUEL)

Full Name in Native Alphabet

☐ Does Not Apply/Technology Not Available

Q: Have you ever used other names (i.e., maiden, religious, professional, alias, etc.)?

A: ☐ Yes ☒ No

Sex

☒ Male ☐ Female

Current Marital Status

-SELECT ONE-

Date and Place of Birth

Date of Birth

13 AUG 1997

(Format: DD-MMM-YYYY)

City of Birth

State/Province of Birth

☐ Does Not Apply

Country/Region of Birth

- SELECT ONE -

Help: Surnames

Enter all surnames as listed in your passport or travel documentation. If only one name is listed, enter that as your surname.

Help: Given Names

Your given name includes any first name and any middle name that is listed in your passport or travel documentation. If your passport or travel documentation does not include a given name, please enter 'FNU' in Given Names.

Help: Other Names Used

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.

Help: Date of Birth

If day or month is unknown, enter as shown in passport or travel document.

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 born.

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: PRA_BurdenComments@state.gov

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.

Back: Getting Started

Save

Next: Personal 2

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Current Marital Status

DIVORCED

-SELECT ONE-

MARRIED

SINGLE

WIDOWED

DIVORCED

LEGALLY SEPARATED

Date of Birth

01	JAN
02	FEB
03	MAR
04	APR
05	MAY
06	JUN
07	JUL
08	AUG
09	SEP
10	OCT
11	NOV
12	DEC
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Personal Information 1 Page

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

[illegible]

Country/Region of Birth

- SELECT ONE -

AFGHANISTAN

ALBANIA

ALGERIA

AMERICAN SAMOA

ANDORRA

ANGOLA

ANGUILLA

ANTIGUA AND BARBUDA

ARGENTINA

ARMENIA

ARUBA

AT SEA

AUSTRALIA

AUSTRIA

AZERBAIJAN

BAHAMAS

BAHRAIN

BANGLADESH

BARBADOS

See all options for "Country/Region of Birth" on following page.

Country/Region of Birth
Select One, AFGHANISTAN, ALBANIA, ALGERIA, AMERICAN SAMOA, ANDORRA, ANGOLA, ANGUILLA, ANTIGUA AND BARBUDA, ARGENTINA, ARMENIA, ARUBA, AT SEA, AUSTRALIA, AUSTRIA, AZERBAIJAN, BAHAMAS, BAHRAIN, BANGLADESH, BARBADOS, BELARUS, BELGIUM, BELIZE, BENIN, BERMUDA, BHUTAN, BOLIVIA, BONAIRE, BOSNIA-HERZEGOVINA, BOTSWANA, BRAZIL, BRITISH INDIAN OCEAN TERRITORY, BRUNEI, BULGARIA, BURKINA FASO, BURMA, BURUNDI, CAMBODIA, CAMEROON, CANADA, CABO VERDE, CAYMAN ISLANDS, CENTRAL AFRICAN REPUBLIC, CHAD, CHILE, CHINA, CHRISTMAS ISLAND, COCOS KEELING ISLANDS, COLOMBIA, COMOROS, CONGO, DEMOCRATIC REPUBLIC OF THE, CONGO, REPUBLIC OF THE, COOK ISLANDS, COSTA RICA, COTE D`IVOIRE, CROATIA, CUBA, CURACAO, CYPRUS, CZECH REPUBLIC, DENMARK, DJIBOUTI, DOMINICA, DOMINICAN REPUBLIC, ECUADOR, EGYPT, EL SALVADOR, EQUATORIAL GUINEA, ERITREA, ESTONIA, ESWATINI, ETHIOPIA, FALKLAND ISLANDS, FAROE ISLANDS, FIJI, FINLAND, FRANCE, FRENCH GUIANA, FRENCH POLYNESIA, FRENCH SOUTHERN AND ANTARCTIC TERRITORIES, GABON, GAMBIA, THE, GAZA STRIP, GEORGIA, GERMANY, GHANA, GIBRALTAR, GREECE, GREENLAND, GRENADA, GUADELOUPE, GUAM, GUATEMALA, GUINEA, GUINEA - BISSAU, GUYANA, HAITI, HEARD AND MCDONALD ISLANDS, HOLY SEE (VATICAN CITY), HONDURAS, HONG KONG BNO, HONG KONG SAR, HOWLAND ISLAND, HUNGARY, ICELAND, IN THE AIR, INDIA, INDONESIA, IRAN, IRAQ, IRELAND, ISRAEL, ITALY, JAMAICA, JAPAN, JERUSALEM, JORDAN, KAZAKHSTAN, KENYA, KIRIBATI, KOREA, DEMOCRATIC REPUBLIC OF (NORTH), KOREA, REPUBLIC OF (SOUTH), KOSOVO, KUWAIT, KYRGYZSTAN, LAOS, LATVIA, LEBANON, LESOTHO, LIBERIA, LIBYA, LIECHTENSTEIN, LITHUANIA, LUXEMBOURG, MACAU, MADAGASCAR, MALAWI, MALAYSIA, MALDEN ISLAND, MALDIVES, MALI, MALTA, MARSHALL ISLANDS, MARTINIQUE, MAURITANIA, MAURITIUS, MAYOTTE, MEXICO - AGUASCALIENTES, MEXICO - BAJA CALIFORNIA NORTE, MEXICO - BAJA CALIFORNIA SUR, MEXICO - CAMPECHE, MEXICO - CHIAPAS, MEXICO - CHIHUAHUA, MEXICO - COAHUILA, MEXICO - COLIMA, MEXICO - DISTRITO FEDERAL, MEXICO - DURANGO, MEXICO - GUANAJUATO, MEXICO - GUERRERO, MEXICO - HIDALGO, MEXICO - JALISCO, MEXICO - MICHOACAN, MEXICO - MORELOS, MEXICO - NAYARIT, MEXICO - NUEVO LEON, MEXICO - OAXACA, MEXICO - PUEBLA, MEXICO - QUERETARO, MEXICO - QUINTANA ROO, MEXICO - SAN LUIS POTOSI, MEXICO - SINALOA, MEXICO - SONORA, MEXICO - STATE OF MEXICO, MEXICO - TABASCO, MEXICO - TAMAULIPAS, MEXICO - TLAXCALA, MEXICO - VERACRUZ, MEXICO - YUCATAN, MEXICO - ZACATECAS, MICRONESIA, MIDWAY ISLANDS, MOLDOVA, MONACO, MONGOLIA, MONTENEGRO, MONTSERRAT, MOROCCO, MOZAMBIQUE, NAMIBIA, NAURU, NEPAL, NETHERLANDS, NEW CALEDONIA, NEW ZEALAND, NICARAGUA, NIGER, NIGERIA, NIUE, NORFOLK ISLAND, NORTH MACEDONIA, NORTH MARIANA ISLANDS, NORTHERN IRELAND, NORWAY, OMAN, PAKISTAN, PALAU, PALMYRA ATOLL, PANAMA, PAPUA NEW GUINEA, PARAGUAY, PERU, PHILIPPINES, PITCAIRN ISLANDS, POLAND, PORTUGAL, PUERTO RICO, QATAR, REUNION, ROMANIA, RUSSIA, RWANDA, SABA ISLAND, SAINT MARTIN, SAMOA, SAN MARINO, SAO TOME AND PRINCIPE, SAUDI ARABIA, SENEGAL, SERBIA, SEYCHELLES, SIERRA LEONE, SINGAPORE, SINT MAARTEN, SLOVAKIA, SLOVENIA, SOLOMON ISLANDS, SOMALIA, SOUTH AFRICA, SOUTH GEORGIA AND THE SOUTH SANDWICH ISLAND, SOUTH SUDAN, SPAIN, SRI LANKA, ST. BARTHELEMY, ST. EUSTATIUS, ST. HELENA, ST. KITTS AND NEVIS, ST. LUCIA, ST. PIERRE AND MIQUELON, ST. VINCENT AND THE GRENADINES, SUDAN, SURINAME, SVALBARD, SWEDEN, SWITZERLAND, SYRIA, TAIWAN, TAJIKISTAN, TANZANIA, THAILAND, TIMOR-LESTE, TOGO, TOKELAU, TONGA, TRINIDAD AND TOBAGO, TUNISIA, TURKEY, TURKMENISTAN, TURKS AND CAICOS ISLANDS, TUVALU, UGANDA, UKRAINE, UNITED ARAB EMIRATES, UNITED KINGDOM, UNITED STATES OF AMERICA, URUGUAY, UZBEKISTAN, VANUATU, VENEZUELA, VIETNAM, VIRGIN ISLANDS (U.S.), VIRGIN ISLANDS, BRITISH, WAKE ISLAND, WALLIS AND FUTUNA ISLANDS, WEST BANK, WESTERN SAHARA, YEMEN, ZAMBIA, ZIMBABWE

Displayed for all applicants. Answered “Passport” for “Document Type”. Answered ‘No’ to all remaining questions.

Document Type

- SELECT ONE -
PASSPORT
OTHER TRAVEL DOCUMENT

Country/Region of Origin (Nationality):
Select One, AFGHANISTAN, ALBANIA, ALGERIA, ANDORRA, ANGOLA, ANGUILLA, ANTIGUA AND BARBUDA, ARGENTINA, ARMENIA, ARUBA, AUSTRALIA, AUSTRIA, AZERBAIJAN, BAHAMAS, BAHRAIN, BANGLADESH, BARBADOS, BELARUS, BELGIUM, BELIZE, BENIN, BERMUDA, BHUTAN, BOLIVIA, BOSNIA-HERZEGOVINA, BOTSWANA, BRAZIL, BRITISH INDIAN OCEAN TERRITORY, BRUNEI, BULGARIA, BURKINA FASO, BURMA, BURUNDI, CAMBODIA, CAMEROON, CANADA, CABO VERDE, CAYMAN ISLANDS, CENTRAL AFRICAN REPUBLIC, CHAD, CHILE, CHINA, COLOMBIA, COMOROS, CONGO, DEMOCRATIC REPUBLIC OF THE, CONGO, REPUBLIC OF THE, COSTA RICA, COTE D`IVOIRE, CROATIA, CUBA, CYPRUS, CZECH REPUBLIC, DENMARK, DJIBOUTI, DOMINICA, DOMINICAN REPUBLIC, ECUADOR, EGYPT, EL SALVADOR, EQUATORIAL GUINEA, ERITREA, ESTONIA, ESWATINI, ETHIOPIA, FIJI, FINLAND, FRANCE, GABON, GAMBIA, THE, GEORGIA, GERMANY, GHANA, GIBRALTAR, GREECE, GRENADA, GUATEMALA, GUINEA, GUINEA - BISSAU, GUYANA, HAITI, HOLY SEE (VATICAN CITY), HONDURAS, HONG KONG BNO, HONG KONG SAR, HUNGARY, ICELAND, INDIA, INDONESIA, IRAN, IRAQ, IRELAND, ISRAEL, ITALY, JAMAICA, JAPAN, JORDAN, KAZAKHSTAN, KENYA, KIRIBATI, KOREA, DEMOCRATIC REPUBLIC OF (NORTH), KOREA, REPUBLIC OF (SOUTH), KOSOVO, KUWAIT, KYRGYZSTAN, LAOS, LATVIA, LEBANON, LESOTHO, LIBERIA, LIBYA, LIECHTENSTEIN, LITHUANIA, LUXEMBOURG, MACAU, MADAGASCAR, MALAWI, MALAYSIA, MALDIVES, MALI, MALTA, MARSHALL ISLANDS, MAURITANIA, MAURITIUS, MEXICO, MICRONESIA, MOLDOVA, MONACO, MONGOLIA, MONTENEGRO, MONTSERRAT, MOROCCO, MOZAMBIQUE, NAMIBIA, NAURU, NEPAL, NETHERLANDS, NEW ZEALAND, NICARAGUA, NIGER, NIGERIA, NORTH MACEDONIA, NORWAY, OMAN, PAKISTAN, PALAU, PALESTINIAN AUTHORITY, PANAMA, PAPUA NEW GUINEA, PARAGUAY, PERU, PHILIPPINES, PITCAIRN ISLANDS, POLAND, PORTUGAL, QATAR, ROMANIA, RUSSIA, RWANDA, SAMOA, SAN MARINO, SAO TOME AND PRINCIPE, SAUDI ARABIA, SENEGAL, SERBIA, SEYCHELLES, SIERRA LEONE, SINGAPORE, SLOVAKIA, SLOVENIA, SOLOMON ISLANDS, SOMALIA, SOUTH AFRICA, SOUTH SUDAN, SPAIN, SRI LANKA, ST. HELENA, ST. KITTS AND NEVIS, ST. LUCIA, ST. VINCENT AND THE GRENADINES, STATELESS, SUDAN, SURINAME, SWEDEN, SWITZERLAND, SYRIA, TAIWAN, TAJIKISTAN, TANZANIA, THAILAND, TIMOR-LESTE, TOGO, TONGA, TRINIDAD AND TOBAGO, TUNISIA, TURKEY, TURKMENISTAN, TURKS AND CAICOS ISLANDS, TUVALU, UGANDA, UKRAINE, UNITED ARAB EMIRATES, UNITED KINGDOM, URUGUAY, UZBEKISTAN, VANUATU, VENEZUELA, VIETNAM, VIRGIN ISLANDS, BRITISH, WALLIS AND FUTUNA ISLANDS, WESTERN SAHARA, YEMEN, ZAMBIA, ZIMBABWE.

Country/Authority that Issued document:
Select One, AFGHANISTAN, ALBANIA, ALGERIA, AMERICAN SAMOA, ANDORRA, ANGOLA, ANGUILLA, ANTIGUA AND BARBUDA, ARGENTINA, ARMENIA, ARUBA, AUSTRALIA, AUSTRIA, AZERBAIJAN, BAHAMAS, BAHRAIN, BANGLADESH, BARBADOS, BELARUS, BELGIUM, BELIZE, BENIN, BERMUDA, BHUTAN, BOLIVIA, BOSNIA-HERZEGOVINA, BOTSWANA, BRAZIL, BRITISH INDIAN OCEAN TERRITORY, BRUNEI, BULGARIA, BURKINA FASO, BURMA, BURUNDI, CAMBODIA, CAMEROON, CANADA, CABO VERDE, CAYMAN ISLANDS, CENTRAL AFRICAN REPUBLIC, CHAD, CHILE, CHINA, COLOMBIA, COMOROS, CONGO, DEMOCRATIC REPUBLIC OF THE, CONGO, REPUBLIC OF THE, COSTA RICA, COTE D`IVOIRE, CROATIA, CUBA, CYPRUS, CZECH REPUBLIC, DENMARK, DJIBOUTI, DOMINICA, DOMINICAN REPUBLIC, ECUADOR, EGYPT, EL SALVADOR, EQUATORIAL GUINEA, ERITREA, ESTONIA, ESWATINI, ETHIOPIA, FIJI, FINLAND, FRANCE, GABON, GAMBIA, THE, GEORGIA, GERMANY, GHANA, GIBRALTAR, GREECE, GRENADA, GUATEMALA, GUINEA, GUINEA - BISSAU, GUYANA, HAITI, HEARD AND MCDONALD ISLANDS, HOLY SEE (VATICAN CITY), HONDURAS, HONG KONG SAR, HONG KONG, BRITISH CONSULATE GENERAL, HUNGARY, ICELAND, INDIA, INDONESIA, IRAN, IRAQ, IRELAND, ISRAEL, ITALY, JAMAICA, JAPAN, JORDAN, KAZAKHSTAN, KENYA, KIRIBATI, KOREA, DEMOCRATIC REPUBLIC OF (NORTH), KOREA, REPUBLIC OF (SOUTH), KOSOVO, KUWAIT, KYRGYZSTAN, LAOS, LATVIA, LEBANON, LESOTHO, LIBERIA, LIBYA, LIECHTENSTEIN, LITHUANIA, LUXEMBOURG, MACAU, MADAGASCAR, MALAWI, MALAYSIA, MALDIVES, MALI, MALTA, MARSHALL ISLANDS, MARTINIQUE, MAURITANIA, MAURITIUS, MEXICO, MICRONESIA, MOLDOVA, MONACO, MONGOLIA, MONTENEGRO, MONTSERRAT, MOROCCO, MOZAMBIQUE, NAMIBIA, NAURU, NEPAL, NETHERLANDS, NEW ZEALAND, NICARAGUA, NIGER, NIGERIA, NORTH MACEDONIA, NORWAY, OMAN, PAKISTAN, PALAU, PALESTINIAN AUTHORITY, PANAMA, PAPUA NEW GUINEA, PARAGUAY, PERU, PHILIPPINES, PITCAIRN ISLANDS, POLAND, PORTUGAL, QATAR, ROMANIA, RUSSIA, RWANDA, SAMOA, SAN MARINO, SAO TOME AND PRINCIPE, SAUDI ARABIA, SENEGAL, SERBIA, SEYCHELLES, SIERRA LEONE, SINGAPORE, SLOVAKIA, SLOVENIA, SOLOMON ISLANDS, SOMALIA, SOUTH AFRICA, SOUTH SUDAN, SPAIN, SRI LANKA, ST. HELENA, ST. KITTS AND NEVIS, ST. LUCIA, ST. VINCENT AND THE GRENADINES, STATUS NEUTRAL TRAVEL DOCUMENT, SUDAN, SURINAME, SWEDEN, SWITZERLAND, SYRIA, TAIWAN, TAJIKISTAN, TANZANIA, THAILAND, TIMOR-LESTE, TOGO, TONGA, TRINIDAD AND TOBAGO, TUNISIA, TURKEY, TURKMENISTAN, TURKS AND CAICOS ISLANDS, TUVALU, UGANDA, UKRAINE, UNITED ARAB EMIRATES, UNITED KINGDOM, UNITED NATIONS LAISSEZ-PASSER, URUGUAY, UZBEKISTAN, VANUATU, VENEZUELA, VIETNAM, VIRGIN ISLANDS, BRITISH, WALLIS AND FUTUNA ISLANDS, YEMEN, ZAMBIA, ZIMBABWE.

Personal Information 2 Page

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?' and 'answer "Yes" to the question "Have you owned any other passports within the past fifteen years that have not already been mentioned above?"

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

Personal Information 2

Country/Region of Origin (Nationality)
- SELECT ONE -

Provide the following information on your travel documentation:

Document Type
OTHER TRAVEL DOCUMENT

Q: Do you hold or have you held any nationality other than the one you have indicated above?
A: Yes No

Provide the following information:

Other Country/Region of Origin (Nationality)
- SELECT ONE -
Add Another Remove

Q: Have you owned any other passports within the past fifteen years that have not already been mentioned above?
A: Yes No

Provide the following information:

Country/Region of Issuance
- SELECT ONE -
Passport Number
Do not know
Add Another Remove

Help: Travel Documentation

Enter the information on the travel document you will be using when traveling to the U.S. Your travel document should be a valid, unexpired passport or other valid, unexpired documentation that is sufficient to establish your identity and nationality.

Help: Other Country/Region of Origin (Nationality)

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.

Back: Personal 1SaveNext: Address and Phone

C

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Other Country/Region of Origin:
Select One, AFGHANISTAN, ALBANIA, ALGERIA, ANDORRA, ANGOLA, ANGUILLA, ANTIGUA AND BARBUDA, ARGENTINA, ARMENIA, ARUBA, AUSTRALIA, AUSTRIA, AZERBAIJAN, BAHAMAS, BAHRAIN, BANGLADESH, BARBADOS, BELARUS, BELGIUM, BELIZE, BENIN, BERMUDA, BHUTAN, BOLIVIA, BOSNIA-HERZEGOVINA, BOTSWANA, BRAZIL, BRITISH INDIAN OCEAN TERRITORY, BRUNEI, BULGARIA, BURKINA FASO, BURMA, BURUNDI, CAMBODIA, CAMEROON, CANADA, CABO VERDE, CAYMAN ISLANDS, CENTRAL AFRICAN REPUBLIC, CHAD, CHILE, CHINA, COLOMBIA, COMOROS, CONGO, DEMOCRATIC REPUBLIC OF THE, CONGO, REPUBLIC OF THE, COSTA RICA, COTE D'IVOIRE, CROATIA, CUBA, CYPRUS, CZECH REPUBLIC, DENMARK, DJIBOUTI, DOMINICA, DOMINICAN REPUBLIC, ECUADOR, EGYPT, EL SALVADOR, EQUATORIAL GUINEA, ERITREA, ESTONIA, ESWATINI, ETHIOPIA, FIJI, FINLAND, FRANCE, GABON, GAMBIA, THE, GEORGIA, GERMANY, GHANA, GIBRALTAR, GREECE, GRENADA, GUATEMALA, GUINEA, GUINEA - BISSAU, GUYANA, HAITI, HOLY SEE (VATICAN CITY), HONDURAS, HONG KONG BNO, HONG KONG SAR, HUNGARY, ICELAND, INDIA, INDONESIA, IRAN, IRAQ, IRELAND, ISRAEL, ITALY, JAMAICA, JAPAN, JORDAN, KAZAKHSTAN, KENYA, KIRIBATI, KOREA, DEMOCRATIC REPUBLIC OF (NORTH), KOREA, REPUBLIC OF (SOUTH), KOSOVO, KUWAIT, KYRGYZSTAN, LAOS, LATVIA, LEBANON, LESOTHO, LIBERIA, LIBYA, LIECHTENSTEIN, LITHUANIA, LUXEMBOURG, MACAU, MADAGASCAR, MALAWI, MALAYSIA, MALDIVES, MALI, MALTA, MARSHALL ISLANDS, MAURITANIA, MAURITIUS, MEXICO, MICRONESIA, MOLDOVA, MONACO, MONGOLIA, MONTENEGRO, MONTSERRAT, MOROCCO, MOZAMBIQUE, NAMIBIA, NAURU, NEPAL, NETHERLANDS, NEW ZEALAND, NICARAGUA, NIGER, NIGERIA, NORTH MACEDONIA, NORWAY, OMAN, PAKISTAN, PALAU, PALESTINIAN AUTHORITY, PANAMA, PAPUA NEW GUINEA, PARAGUAY, PERU, PHILIPPINES, PITCAIRN ISLANDS, POLAND, PORTUGAL, QATAR, ROMANIA, RUSSIA, RWANDA, SAMOA, SAN MARINO, SAO TOME AND PRINCIPE, SAUDI ARABIA, SENEGAL, SERBIA, SEYCHELLES, SIERRA LEONE, SINGAPORE, SLOVAKIA, SLOVENIA, SOLOMON ISLANDS, SOMALIA, SOUTH AFRICA, SOUTH SUDAN, SPAIN, SRI LANKA, ST. HELENA, ST. KITTS AND NEVIS, ST. LUCIA, ST. VINCENT AND THE GRENADINES, SUDAN, SURINAME, SWEDEN, SWITZERLAND, SYRIA, TAIWAN, TAJIKISTAN, TANZANIA, THAILAND, TIMOR-LESTE, TOGO, TONGA, TRINIDAD AND TOBAGO, TUNISIA, TURKEY, TURKMENISTAN, TURKS AND CAICOS ISLANDS, TUVALU, UGANDA, UKRAINE, UNITED ARAB EMIRATES, UNITED KINGDOM, UNITED STATES OF AMERICA, URUGUAY, UZBEKISTAN, VANUATU, VENEZUELA, VIETNAM, VIRGIN ISLANDS, BRITISH, WALLIS AND FUTUNA ISLANDS, WESTERN SAHARA, YEMEN, ZAMBIA, ZIMBABWE.

Country/Region of Issuance: Same options as "Country/Authority that Issued Document" dropdown.

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.

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Street Address (Line 2) *Optional

City

State/Province

Postal Zone/ZIP Code

Country/Region

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Phone

Email

Social Media

Other Social Media

Does Not Apply

Does Not Apply

Has Lived Elsewhere

Help: Previous Addresses

Primary Phone Number

Secondary Phone Number

Work Phone Number

Help: Phone

Have Used Other Telephone Numbers

Help: Email

Have Used Other Email Addresses

Help: Social Media

Add Another

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Social Media Provider/Platform

- Select One -

BlueSky

Discord

Douyin

Facebook

GroupMe

IMO

Instagram

Jodel

Kuaishou

LinkedIn

MySpace

Pinterest

QQ

QZone

Reddit

RedNote (Xiaohongshu)

Skype

Snapchat

Telegram

Threads

TikTok

Truth Social

Tumblr

Twitch

VKontakte (VK)

WeChat

Weibo Sina

Weibo Tencent

Weixin

WhatsApp

X (Formerly Twitter)

YouTube

None

Country/Region:

Select One, AFGHANISTAN, ALBANIA, ALGERIA, AMERICAN SAMOA, ANDORRA, ANGOLA, ANGUILLA, ANTIGUA AND BARBUDA, ARGENTINA, ARMENIA, ARUBA, AUSTRALIA, AUSTRIA, AZERBAIJAN, BAHAMAS, BAHRAIN, BANGLADESH, BARBADOS, BELARUS, BELGIUM, BELIZE, BENIN, BERMUDA, BHUTAN, BOLIVIA, BONAIRE, BOSNIA-HERZEGOVINA, BOTSWANA, BRAZIL, BRITISH INDIAN OCEAN TERRITORY, BRUNEI, BULGARIA, BURKINA FASO, BURMA, BURUNDI, CAMBODIA, CAMEROON, CANADA, CABO VERDE, CAYMAN ISLANDS, CENTRAL AFRICAN REPUBLIC, CHAD, CHILE, CHINA, CHRISTMAS ISLAND, COCOS KEELING ISLANDS, COLOMBIA, COMOROS, CONGO, DEMOCRATIC REPUBLIC OF THE, CONGO, REPUBLIC OF THE, COOK ISLANDS, COSTA RICA, COTE D'IVOIRE, CROATIA, CUBA, CURACAO, CYPRUS, CZECH REPUBLIC, DENMARK, DJIBOUTI, DOMINICA, DOMINICAN REPUBLIC, ECUADOR, EGYPT, EL SALVADOR, EQUATORIAL GUINEA, ERITREA, ESTONIA, ESWATINI, ETHIOPIA, FALKLAND ISLANDS, FAROE ISLANDS, FIJI, FINLAND, FRANCE, FRENCH GUIANA, FRENCH POLYNESIA, FRENCH SOUTHERN AND ANTARCTIC TERRITORIES, GABON, GAMBIA, THE, GAZA STRIP, GEORGIA, GERMANY, GHANA, GIBRALTAR, GREECE, GREENLAND, GRENADA, GUADELOUPE, GUAM, GUATEMALA, GUINEA, GUINEA - BISSAU, GUYANA, HAITI, HEARD AND MCDONALD ISLANDS, HOLY SEE (VATICAN CITY), HONDURAS, HONG KONG, HOWLAND ISLAND, HUNGARY, ICELAND, INDIA, INDONESIA, IRAN, IRAQ, IRELAND, ISRAEL, ITALY, JAMAICA, JAPAN, JERUSALEM, JORDAN, KAZAKHSTAN, KENYA, KIRIBATI, KOREA, DEMOCRATIC REPUBLIC OF (NORTH), KOREA, REPUBLIC OF (SOUTH), KOSOVO, KUWAIT, KYRGYZSTAN, LAOS, LATVIA, LEBANON, LESOTHO, LIBERIA, LIBYA, LIECHTENSTEIN, LITHUANIA, LUXEMBOURG, MACAU, MADAGASCAR, MALAWI, MALAYSIA, MALDEN ISLAND, MALDIVES, MALI, MALTA, MARSHALL ISLANDS, MARTINIQUE, MAURITANIA, MAURITIUS, MAYOTTE, MEXICO, MICRONESIA, MIDWAY ISLANDS, MOLDOVA, MONACO, MONGOLIA, MONTENEGRO, MONTSERRAT, MOROCCO, MOZAMBIQUE, NAMIBIA, NAURU, NEPAL, NETHERLANDS, NEW CALEDONIA, NEW ZEALAND, NICARAGUA, NIGER, NIGERIA, NIUE, NORFOLK ISLAND, NORTH MACEDONIA, NORTH MARIANA ISLANDS, NORTHERN IRELAND, NORWAY, OMAN, PAKISTAN, PALAU, PALMYRA ATOLL, PANAMA, PAPUA NEW GUINEA, PARAGUAY, PERU, PHILIPPINES, PITCAIRN ISLANDS, POLAND, PORTUGAL, PUERTO RICO, QATAR, REUNION, ROMANIA, RUSSIA, RWANDA, SABA ISLAND, SAINT MARTIN, SAMOA, SAN MARINO, SAO TOME AND PRINCIPE, SAUDI ARABIA, SENEGAL, SERBIA, SEYCHELLES, SIERRA LEONE, SINGAPORE, SINT MAARTEN, SLOVAKIA, SLOVENIA, SOLOMON ISLANDS, SOMALIA, SOUTH AFRICA, SOUTH GEORGIA AND THE SOUTH SANDWICH ISLAND, SOUTH SUDAN, SPAIN, SRI LANKA, ST. EUSTATIUS, ST. HELENA, ST. KITTS AND NEVIS, ST. LUCIA, ST. PIERRE AND MIQUELON, ST. VINCENT AND THE GRENADINES, SUDAN, SURINAME, SVALBARD, SWEDEN, SWITZERLAND, SYRIA, TAIWAN, TAJIKISTAN, TANZANIA, THAILAND, TIMOR-LESTE, TOGO, TOKELAU, TONGA, TRINIDAD AND TOBAGO, TUNISIA, TURKEY, TURKMENISTAN, TURKS AND CAICOS ISLANDS, TUVALU, UGANDA, UKRAINE, UNITED ARAB EMIRATES, UNITED KINGDOM, UNITED STATES OF AMERICA, URUGUAY, UZBEKISTAN, VANUATU, VENEZUELA, VIETNAM, VIRGIN ISLANDS (U.S.), VIRGIN ISLANDS, BRITISH, WAKE ISLAND, WALLIS AND FUTUNA ISLANDS, WEST BANK, WESTERN SAHARA, YEMEN, ZAMBIA, ZIMBABWE.

Present and Previous Address Information Page

Displayed for all applicants. All questions answered 'Yes'. "Facebook" selected for "Social Media Provider/Platform". Please note sections added for Additional Telephone, Email Address, Social Media, and Other Social Media.

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Present Address

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province
 ☒ Does Not Apply

Postal Zone/ZIP Code
 ☒ Does Not Apply

Country/Region
- SELECT ONE -

Started Living Here

(Format: MMM-YYYY)

Previous Addresses

Q: Have you lived anywhere other than this address since the age of sixteen? (Date you turned sixteen: 04-Jan-2015)

A: ☒ Yes ☐ No

Please provide the following information on all addresses you lived at since turning sixteen. Begin with your address immediately before your current address.

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province
 ☐ Does Not Apply

Postal Zone/ZIP Code
 ☐ Does Not Apply

Country/Region
- SELECT ONE -

Started Living Here

(Format: MMM-YYYY)

To Date

(Format: MMM-YYYY)

Add Another Remove

Phone

Primary Phone Number

Secondary Phone Number
 ☐ Does Not Apply

Work Phone Number
 ☐ Does Not Apply

Q: Have you used any other telephone numbers during the last five years?

A: ☒ Yes ☐ No

Additional Phone Number

Add Another Remove

Email

Email Address

(e.g., emailaddress@example.com)

Help: Previous Addresses

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 you stayed for vacation).

Help: Phone

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 additional land line or a cellular/mobile number please list that as your secondary phone number.

Help: Email

You must provide an email address. The email address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you

Q: Have you used any other email addresses during the last five years?

A: ☒ Yes ☐ No

Email Address

[+ Add Another](#) [- Remove](#)

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 platforms name, enter the User ID (Email address, Username, Handle, Telephone Number, etc.) 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, handle or telephone number 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

Facebook

Social Media User ID

Add Another
Remove

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.

Other Social Media


Within the last five years, did you have a presence on any social media platforms not available on the dropdown list under the previous question?


A: ☒ Yes ☐ No

Please provide the name of the platform and the associated unique social media User ID (Email address, Username, Handle, Telephone Number, etc.) for each social media platform you would like to list. This does not include private messaging on person-to-person messaging services, such as WhatsApp.

Other Social Media Provider/Platform
<input type="text"/>

Other Social Media User ID
<input type="text"/>

 [Add Another](#)

 [Remove](#)

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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Current Mailing Address

Q: Is your Current Mailing Address the same as your Present Address?

A: ☒ Yes ☐ No

U.S. Permanent Address

Please provide the following information on where you intend to live after arrival in the United States.

Name of person currently living at address

☐ Does Not Apply

U.S. Street Address (Line 1)

U.S. Street Address (Line 2) *Optional

City

State

- SELECT ONE -

ZIP Code

(e.g., 12345 or 12345-1234)

Phone Number

() -

☐ Does Not Apply

(e.g., 555-555-5555)

Q: Is this address where you want your Permanent Residence Card (Green Card) mailed?

A: ☒ Yes ☐ No

Back: Present/Previous

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Next: Family

C

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State

- SELECT ONE -

ALABAMA

ALASKA

AMERICAN SAMOA

ARIZONA

ARKANSAS

CALIFORNIA

COLORADO

CONNECTICUT

DELAWARE

DISTRICT OF COLUMBIA

FLORIDA

GEORGIA

GUAM

HAWAII

IDAHO

ILLINOIS

INDIANA

IOWA

KANSAS

See full list below:

Select one, ALABAMA, ALASKA, AMERICAN SAMOA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, GUAM, HAWAII, IDAHO, ILLINOIS, INDIANA, IOWA, KANSAS, KENTUCKY, LOUISIANA, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, MINNESOTA, MISSISSIPPI, MISSOURI, MONTANA, NEBRASKA, NEVADA, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEW YORK, NORTH CAROLINA, NORTH DAKOTA, NORTHERN MARIANA ISLANDS, OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, SOUTH DAKOTA, TENNESSEE, TEXAS, UTAH, VERMONT, VIRGIN ISLANDS, VIRGINIA, WASHINGTON, WEST VIRGINIA, WISCONSIN, WYOMING.

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'.

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Current Mailing Address

Q:

Is your Current Mailing Address the same as your Present Address?

A:

☐ Yes

☒ No

Complete the additional items below:

Address (Line 1)

Address (Line 2) *Optional

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

U.S. Permanent Address

Please provide the following information on where you intend to live after arrival in the United States.

Name of person currently living at address

☐ Does Not Apply

U.S. Street Address (Line 1)

U.S. Street Address (Line 2) *Optional

City

State

- SELECT ONE -

ZIP Code

(e.g., 12345 or 12345-1234)

Phone Number

() -

☐ Does Not Apply

(e.g., 555-555-5555)

Q:

Is this address where you want your Permanent Residence Card (Green Card) mailed?

A:

☐ 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 -

ZIP Code

Help: Current Mailing Address

This is the address where we will send correspondence regarding your application.

(e.g., 12345 or 12345-1234)

Phone Number

() -

(e.g., 555-555-5555)

☐ Does Not Apply

◀ Back: Present/Previous

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Mailing and Permanent Address

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



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Current Mailing Address

Q:

Is your Current Mailing Address the same as your Present Address?

A:

☒ Yes
☐ No

Q:

Is this address where you want your Permanent Residence Card (Green Card) mailed?

A:

☒ Yes
☐ No

Help: Current Mailing Address

This is the address where we will send correspondence regarding your application.

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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?’.



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Current Mailing Address

Q: Is your Current Mailing Address the same as your Present Address?

A:

☐ Yes
☒ No

Complete the additional items below:

Address (Line 1)

Address (Line 2) *Optional

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

Q: Is this address where you want your Permanent Residence Card (Green Card) mailed?

A:

☐ 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 -

ZIP Code

(e.g., 12345 or 12345-1234)

Phone Number

() -


☐ Does Not Apply

(e.g., 555-555-5555)

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Family Information: Parents Page

Displayed for all applicants. Answers to all questions are “Yes”.

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Family Information: Parents

NOTE: Please provide the following information concerning your biological parents. If you are adopted, please provide the following information on your adoptive parents.

Father

Surnames

(e.g., Hernandez Garcia) ☐ Do Not Know

Given Names

(e.g., Juan Miguel) ☐ Do Not Know

Date of Birth

☐ Do Not Know

(Format: DD-MMM-YYYY)

Place of Birth

City

☐ Do Not Know

State/Province

☐ Do Not Know

Country/Region

- SELECT ONE -

☐ Do Not Know

Q: Is your father still living?

A: ☒ Yes ☐ No

Current Address ☐ Do Not Know

Street Address (Line 1)

Street Address (Line 2) **Optional*

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

Mother

Surnames at Birth

(e.g., Hernandez Garcia) ☐ Do Not Know

Given Names

(e.g., Juanita Miguel) ☐ Do Not Know

Date of Birth

☐ Do Not Know

(Format: DD-MMM-YYYY)

Place of Birth

City

☐ Do Not Know

State/Province

☐ Do Not Know

Country/Region

- SELECT ONE -

☐ Do Not Know

Q: Is your mother still living?

A: ☒ Yes ☐ No

Current Address ☐ Do Not Know

Street Address (Line 1)

Street Address (Line 2) **Optional*

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply


Country/Region

- SELECT ONE -

Back: Address and Phone

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Family Information: Parents Page

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

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Family Information: Parents

NOTE: Please provide the following information concerning your biological parents. If you are adopted, please provide the following information on your adoptive parents.

Father

Surnames

(e.g., Hernandez Garcia)

Do Not Know

Given Names

(e.g., Juan Miguel)

Do Not Know

Date of Birth

(Format: DD-MMM-YYYY)

Do Not Know

Place of Birth

City

State/Province

Country/Region

- SELECT ONE -

Do Not Know

Q: Is your father still living?

A:

No

Year of Death

Mother

Surnames at Birth

(e.g., Hernandez Garcia)

Do Not Know

Given Names

(e.g., Juanita Miguel)

Do Not Know

Date of Birth

(Format: DD-MMM-YYYY)

Do Not Know

Place of Birth

City

State/Province

Country/Region

- SELECT ONE -

Do Not Know

Q: Is your mother still living?

A:

No

Year of Death

Back: Address and Phone

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Family Information: Parents Page

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



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NOTE: Please provide the following information concerning your biological parents. If you are adopted, please provide the following information on your adoptive parents.

Father

Surnames

(e.g., Hernandez Garcia)☒ Do Not Know

Given Names

(e.g., Juan Miguel)☒ Do Not Know

Mother

Surnames at Birth

(e.g., Hernandez Garcia)☒ Do Not Know

Given Names

(e.g., Juanita Miguel)☒ Do Not Know


Back: Address and Phone

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Next: Spouse

Family Information: Spouse or Civil/Domestic Partner Page

Displayed for applicants who indicate they are currently married or separated. Answered 'No' to the question 'Is your spouse or civil/domestic partner applying for a U.S. immigrant visa with you?'.



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NOTE: Please provide the following information on your current spouse or civil/domestic partner.

Current Spouse or Civil/Domestic Partner

Surnames

Given Names

Date of Birth

(Format: DD-MMM-YYYY)

Place of Birth

City

Do Not Know

State/Province of Birth

Does Not Apply

Country/Region

- SELECT ONE -

Nationality

-SELECT ONE-

Spouse or Civil/Domestic Partner's Address

-SELECT ONE-

Occupation

-SELECT ONE-

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 applying for a U.S. immigrant visa with you?

A: ☐ Yes ☒ No

Q: Is your spouse applying for a U.S. immigrant visa at a later date to join you?

A: ☒ Yes ☐ No

Back: Parents

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Next: Previous Spouse

Spouse or Civil/Domestic Partner's Address

-SELECT ONE-
SAME AS PRESENT ADDRESS
SAME AS INTENDED U.S. ADDRESS
DO NOT KNOW
OTHER (SPECIFY ADDRESS)

Occupation

-SELECT ONE-
AGRICULTURE
ARTIST/PERFORMER
BUSINESS
COMMUNICATIONS
COMPUTER SCIENCE
CULINARY/FOOD SERVICES
DO NOT KNOW
EDUCATION
ENGINEERING
GOVERNMENT
HOMEMAKER
LEGAL PROFESSION
MEDICAL/HEALTH
MILITARY
NATURAL SCIENCE
NOT EMPLOYED
PHYSICAL SCIENCES
RELIGIOUS VOCATION
RESEARCH
RETIRED
SOCIAL SCIENCE
STUDENT
OTHER

Drop down options for "Nationality" are listed on page 11.

Family Information: Spouse or Civil/Domestic Partner Page

Displayed for applicants who indicate they are currently married or separated. Answered 'Yes' to the question 'Is your spouse or civil/domestic partner applying for a U.S. immigrant visa with you?'.

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NOTE: Please provide the following information on your current spouse or civil/domestic partner.

Current Spouse or Civil/Domestic Partner

Surnames

Given Names

Date of Birth

(Format: DD-MMM-YYYY)

Place of Birth

City

☐ Do Not Know

State/Province of Birth

☐ Does Not Apply

Country/Region

- SELECT ONE -

Nationality

-SELECT ONE-

Spouse or Civil/Domestic Partner's Address

-SELECT ONE-

Occupation

-SELECT ONE-

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 ☐ No

Back: Parents

Save

Next: Previous Spouse

Family Information: Spouse or Civil/Domestic Partner Page

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

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NOTE: Please provide the following information on your current spouse or civil/domestic partner.

Current Spouse or Civil/Domestic Partner

Surnames

Given Names

Date of Birth

(Format: DD-MMM-YYYY)

Place of Birth

City

☐ Do Not Know

State/Province of Birth

☐ Does Not Apply

Country/Region

- SELECT ONE -

Nationality

-SELECT ONE-

Spouse or Civil/Domestic Partner'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: ☒ Yes ☐ No

◀ Back: Parents

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Family Information: Spouse or Civil/Domestic Partner Page

Displayed for applicants who indicate they are currently married or separated. Selected 'Other (Specify Address)' for 'Spouse or Civil/Domestic Partner's Address' and 'Not Employed' for 'Occupation'.

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NOTE: Please provide the following information on your current spouse or civil/domestic partner.

Current Spouse or Civil/Domestic Partner

Surnames

Given Names

Date of Birth

(Format: DD-MMM-YYYY)

Place of Birth

City

☐ Do Not Know

State/Province of Birth

☐ Does Not Apply

Country/Region

- SELECT ONE -

Nationality

-SELECT ONE-

Spouse or Civil/Domestic Partner's Address

OTHER (SPECIFY ADDRESS)

Provide your Spouse or Civil/Domestic Partner'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

☐ Does Not Apply

Country/Region

- SELECT ONE -

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: ☒ Yes ☐ No

Back: Parents

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Family Information: Previous Spouse or Civil/ Domestic Partner Page

Displayed for all applicants. Answered ‘No’ to the question ‘Do you have any previous spouses or civil/
domestic partners?’.



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Family Information: Previous Spouse or Civil/Domestic Partner

NOTE: Please provide the following information on all of your previous spouses or civil/domestic partners, including those deceased.

Q: Do you have any previous spouses or civil/domestic partners?

A:


Yes

No

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Family Information: Previous Spouse or Civil/Domestic Partner Page

Displayed for all applicants. Answered 'Yes' to the question 'Do you have any previous spouses or civil/domestic partners?'
Answered 'Other' to the question 'How was your marriage terminated?'.



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Family Information: Previous Spouse or Civil/Domestic Partner

NOTE: Please provide the following information on all of your previous spouses or civil/domestic partners, including those deceased.

Q: Do you have any previous spouses or civil/domestic partners?

A: ☒ Yes ☐ No

Number of Previous Spouses or Civil/Domestic Partners:

Provide the following information:

Surnames

Given Names

Date of Birth

(Format: DD-MMM-YYYY)

Nationality

- SELECT ONE -

Date of Marriage

(Format: DD-MMM-YYYY)

Date Marriage Ended

(Format: DD-MMM-YYYY)

How was your marriage terminated?

OTHER

Explain Other

Country/Region where marriage was terminated

- SELECT ONE -

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-SELECT ONE- 

-SELECT ONE-

ANNULMENT

DEATH

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Family Information: Children Page

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

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Family Information: Children

NOTE: The Immigration and Nationality Act (INA) does not allow derivative status to family members of immediate relatives. For example, IR1, CR1, IR2, CR2 and IR5 classifications are immediate relative visa categories. The petitioner must file separate immediate relative petitions for the spouse, each natural child, adopted child, stepchild and each parent.

Q: Do you have any children?

A: ☐ Yes ☒ No

Help: Children Information

The Immigration and Nationality Act (INA) does not allow derivative status for family members of immediate relatives. IR1, CR1, IR2, CR2 and IR5 classifications are immediate relative visa categories. If you have questions about whether or not your child is allowed to immigrate to the U.S. with you or is allowed to follow to join in the U.S., please see travel.state.gov for more information.

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Family Information: Children Page

Displayed for all applicants. Answered ‘Yes’ to all questions

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Family Information: Children

NOTE: The Immigration and Nationality Act (INA) does not allow derivative status to family members of immediate relatives. For example, IR1, CR1, IR2, CR2 and IR5 classifications are immediate relative visa categories. The petitioner must file separate immediate relative petitions for the spouse, each natural child, adopted child, stepchild and each parent.

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- ✓ Previous U.S. Travel

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Q: Do you have any children?

A: ☒ Yes ☐ 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

Date of Birth

▼

▼

(Format: DD-MMM-YYYY)

Place of Birth

City

☐ Do Not Know

State/Province

☐ Does Not Apply

Country/Region

- SELECT ONE -

▼

Nationality

- SELECT ONE -

▼

Q: Does this child live with you?

A: ☒ Yes ☐ No

Q: Is your child applying for a U.S. immigrant visa with you?

A: ☒ Yes ☐ No

+

[Add Another](#)

-

[Remove](#)

Help: Children Information

The Immigration and Nationality Act (INA) does not allow derivative status for family members of immediate relatives. IR1, CR1, IR2, CR2 and IR5 classifications are immediate relative visa categories. If you have questions about whether or not your child is allowed to immigrate to the U.S. with you or is allowed to follow to join in the U.S., please see travel.state.gov for more information.

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Family Information: Children Page

Displayed for all applicants. Answered ‘Yes’ to the question ‘Do you have any children?’. Answered ‘No’ to the question ‘Is your child applying for a U.S. immigrant visa with you?’.

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Family Information: Children

NOTE: The Immigration and Nationality Act (INA) does not allow derivative status to family members of immediate relatives. For example, IR1, CR1, IR2, CR2 and IR5 classifications are immediate relative visa categories. The petitioner must file separate immediate relative petitions for the spouse, each natural child, adopted child, stepchild and each parent.

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Q: Do you have any children?

A: ☒ Yes ☐ 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

Date of Birth

(Format: DD-MMM-YYYY)

Place of Birth

City

☐ Do Not Know

State/Province

☐ Does Not Apply

Country/Region

- SELECT ONE -

Nationality

- SELECT ONE -

Q: Does this child live with you?

A: ☒ Yes ☐ No

Q: Is your child applying for a U.S. immigrant visa with you?

A: ☐ Yes ☒ No

Q: Is your child applying for a U.S. immigrant visa at a later date to join you?

A: ☐ Yes ☐ No

Add Another

Remove

Help: Children Information

The Immigration and Nationality Act (INA) does not allow derivative status for family members of immediate relatives. IR1, CR1, IR2, CR2 and IR5 classifications are immediate relative visa categories. If you have questions about whether or not your child is allowed to immigrate to the U.S. with you or is allowed to follow to join in the U.S., please see [travel.state.gov](#) for more information.

Back: Previous SpouseSaveNext: Siblings

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Family Information: Siblings Page

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



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Family Information: Siblings

Please provide the following information on all of your siblings. This includes all full, half, step, and adopted siblings.

Q: Do you have any siblings?

A:

Yes

No

Back: Children

Save

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Family Information: Siblings Page

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



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Family Information: Siblings

Please provide the following information on all of your siblings. This includes all full, half, step, and adopted siblings.

Q: Do you have any siblings?

A: ☒ Yes ☐ No

Number of Siblings:

Provide the following information on each of your siblings (this includes all full siblings, half siblings, step siblings, and adopted siblings).

Sibling 1

Surnames

Given Names

Date of Birth
☐ Do Not Know
(Format: DD-MMM-YYYY)

Nationality

+ Add Another

- Remove

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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

NOTE: Provide the following previous U.S. travel information. Provide complete and accurate information to all questions that require an explanation.

Q:

Have you ever been in the U.S.?

A:

☐ Yes

☒ No

Q:

Have you ever been issued a U.S. Visa?

A:

☐ Yes

☒ No

Q:

Have you ever been refused a U.S. Visa, been refused admission to the United States, or withdrawn your application for admission at the port of entry?

A:

☐ Yes

☒ No

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Previous U.S. Travel Information Page

Displayed for all applicants that answer 'Yes' for all questions.

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NOTE: Provide the following previous U.S. travel information. Provide complete and accurate information to all questions that require an explanation.

Q: Have you ever been in the U.S.?

A: Yes No

Provide the following information:

Q: Were you issued an Alien Registration Number by the Department of Homeland Security?

A: Yes No

Provide Alien Registration Number

Alien Registration Number

Do Not Know

(e.g., A123456789)

Provide information on your last five U.S. visits:

Date Arrived

(Format: DD-MMM-YYYY)

Length of Stay

-SELECT ONE-

Add Another

Remove

Help: Previous U.S. Visits

If you are unsure about when you visited the U.S., please provide a best estimate.

Q: Have you ever been issued a U.S. Visa?

A: Yes No

Provide the following information on your last U.S. visa:

Date Visa Was Issued

(Format: DD-MMM-YYYY)

Visa Classification

- SELECT ONE -

Do Not Know

Visa Number

Do Not Know

Q: Have any of your U.S. visas ever been lost or stolen?

A: Yes No

Enter year visa was lost or stolen:

Year

Explain

Q: Have any of your U.S. visas ever been cancelled or revoked?

A: Yes No

Explain

Q: Have you ever been refused a U.S. Visa, been refused admission to the United States, or withdrawn your application for admission at the port of entry?

A: Yes No

Explain

Length of Stay

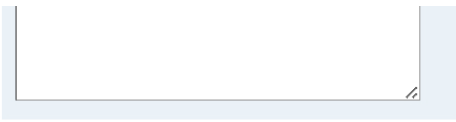
-SELECT ONE-
-SELECT ONE-
YEAR(S)
MONTH(S)
WEEK(S)
DAY(S)

Visa Classification

- SELECT ONE -

- AMBASSADOR OR PUBLIC MINISTER (A1)
- CHILD OF AN A1 (A1)
- CAREER DIPLOMAT/CONSULAR OFFICER (A1)
- SPOUSE OF AN A1 (A1)
- CHILD OF AN A2 (A2)
- FOREIGN OFFICIAL/EMPLOYEE (A2)
- SPOUSE OF AN A2 (A2)
- CHILD OF AN A3 (A3)
- PERSONAL EMP. OF AN A1 OR A2 (A3)
- SPOUSE OF AN A3 (A3)
- BUSINESS & TOURISM (TEMPORARY VISITOR) (B1/B2)
- BUSINESS/CONFERENCE (B1)
- TOURISM/MEDICAL TREATMENT (B2)
- BORDER CROSSING CARD (MEXICO ONLY) (BCC)
- CREWMEMBER IN TRANSIT (C1/D)
- TRANSIT (C1)
- TRANSIT TO U.N. HEADQUARTERS (C2)
- CHILD OF A C3 (C3)
- PERSONAL EMP. OF A C3 (C3)

Full list of "Visa Classification" options on following page.



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Visa Classification

Select one, AMBASSADOR OR PUBLIC MINISTER (A1), CHILD OF AN A1 (A1), CAREER DIPLOMAT/CONSULAR OFFICER (A1), SPOUSE OF AN A1 (A1), CHILD OF AN A2 (A2), FOREIGN OFFICIAL/EMPLOYEE (A2), SPOUSE OF AN A2 (A2), CHILD OF AN A3 (A3), PERSONAL EMP. OF AN A1 OR A2 (A3), SPOUSE OF AN A3 (A3), BUSINESS & TOURISM (TEMPORARY VISITOR) (B1/B2), BUSINESS/ CONFERENCE (B1), TOURISM/MEDICAL TREATMENT (B2), BORDER CROSSING CARD (MEXICO ONLY) (BCC), CREWMEMBER IN TRANSIT (C1/D), TRANSIT (C1), TRANSIT TO U.N. HEADQUARTERS (C2), CHILD OF A C3 (C3), PERSONAL EMP. OF A C3 (C3), FOREIGN OFFICIAL IN TRANSIT (C3), SPOUSE OF A C3 (C3), NONCITIZEN IN TRANSIT TO LIGHTERING OPERATION (C4), LIGHTERING CREW MEMBER IN TRANSIT (C4/D3), CNMI TEMPORARY WORKER (CW1), CHILD OF CW1 (CW2), SPOUSE OF CW1 (CW2), CREWMEMBER (D), LIGHTERING CREW MEMBER (D3), CHILD OF AN E1 (E1), EXECUTIVE/MGR/ESSENTIAL EMP (E1), SPOUSE OF AN E1 (E1), TREATY TRADER (E1), CHILD OF AN E2 (E2), EXECUTIVE/MGR/ESSENTIAL EMP (E2), SPOUSE OF AN E2 (E2), TREATY INVESTOR (E2), CNMI LONG TERM INVESTOR (E2C), AUSTRALIAN IN SPEC. OCCUPATION (E3), CHILD OF AN E3 (E3D), SPOUSE OF AN E3 (E3D), RETURNING AUSTRALIAN IN A SPEC. OCCUPATION (E3R), STUDENT (F1), CHILD OF AN F1 (F2), SPOUSE OF AN F1 (F2), COMMUTER STUDENT (F3), CHILD OF A G1 (G1), PRINCIPAL REPRESENTATIVE (G1), SPOUSE OF A G1 (G1), STAFF OF PRINCIPAL REPRESENTATIVE (G1), CHILD OF A G2 (G2), REPRESENTATIVE (G2), SPOUSE OF A G2 (G2), CHILD OF A G3 (G3), NON-RECOGNIZED/-MEMBER COUNTRY REP(G3), SPOUSE OF A G3 (G3), CHILD OF AN G4 (G4), INTERNATIONAL ORG. EMPLOYEE (G4), SPOUSE OF A G4 (G4), CHILD OF A G5 (G5), PERSONAL EMP. OF A G1, 2, 3, OR 4 (G5), SPOUSE OF A G5 (G5), NURSES (H1A), SPECIALTY OCCUPATION (H1B), CHILEAN SPEC. OCCUPATION (H1B1), SINGAPOREAN SPEC. OCCUPATION (H1B1), NURSE IN SHORTAGE AREA (H1C), AGRICULTURAL WORKER (H2A), NONAGRICULTURAL WORKER (H2B), TRAINEE (H3), CHILD OF AN H (H4), SPOUSE OF AN H (H4), CHILD OF AN I (I), FOREIGN MEDIA REPRESENTATIVE (I), SPOUSE OF AN I (I), EXCHANGE VISITOR (J1), CHILD OF A J1 (J2), SPOUSE OF A J1 (J2), FIANCÉ(E) OF A U.S. CITIZEN (K1), CHILD OF A K1 (K2), SPOUSE OF A U.S. CITIZEN (K3), CHILD OF A K3 (K4), INTRACOMPANY TRANSFEREE (L1), CHILD OF A L1 (L2), SPOUSE OF A L1 (L2), STUDENT (M1), CHILD OF M1 (M2), SPOUSE OF M1 (M2), COMMUTER STUDENT (M3), CHILD OF A N8 (N9), PARENT OF CERTAIN SPECIAL IMMIGRANT (N8), CHILD OF NATO 1 (NATO1), PRINCIPAL REPRESENTATIVE (NATO1), SPOUSE OF NATO1 (NATO1), CHILD OF NATO2 (NATO2), REPRESENTATIVE (NATO2), SPOUSE OF NATO2 (NATO2), CHILD OF NATO3 (NATO3), SPOUSE OF NATO3 (NATO3), CLERICAL STAFF (NATO3), CHILD OF NATO4 (NATO4), OFFICIAL (NATO4), SPOUSE OF NATO4 (NATO4), CHILD OF NATO5 (NATO5), EXPERT (NATO5), SPOUSE OF NATO5 (NATO5), CHILD OF NATO6 (NATO6), SPOUSE OF NATO6 (NATO6), CIVILIAN STAFF (NATO6), CHILD OF NATO7 (NATO7), PERSONAL EMP. OF NATO1-NATO6 (NATO7), SPOUSE OF NATO7 (NATO7), EXTRAORDINARY ABILITY (O1), ALIEN ACCOMPANYING/ASSISTING (O2), CHILD OF O1 OR O2 (O3), SPOUSE OF O1 OR O2 (O3), OTHER - IMMIGRANT VISA, OTHER - NOT LISTED, INTERNATIONALLY RECOGNIZED ALIEN (P1), ARTIST/ENTERTAINER EXCHANGE PROG. (P2), ARTIST/ ENTERTAINER IN CULTURAL PROG. (P3), CHILD OF P1, P2 OR P3 (P4), SPOUSE OF P1, P2 OR P3 (P4), USCIS HUMANITARIAN PAROLE (HPCIS), ICE HUMANITARIAN PAROLE (HPICE), USCIS SIGNIFICANT PUBLIC BENEFIT PAROLE (SBCIS), ICE SIGNIFICANT PUBLIC BENEFIT PAROLE (SBICE), CULTURAL EXCHANGE VISITOR (Q1), RELIGIOUS WORKER (R1), CHILD OF R1 (R2), SPOUSE OF R1 (R2), FAMILY MEMBER OF AN INFORMANT (S7), VICTIM OF TRAFFICKING (T1), SPOUSE OF T1 (T2), CHILD OF T1 (T3), PARENT OF T1 (T4), SIBLING OF T1 (T5), ADULT/MINOR CHILD OF A DERIV BEN OF A T1 (T6), CHILD OF TN (TD), SPOUSE OF TN (TD), NAFTA PROFESSIONAL (TN), VICTIM OF CRIME (U1), SPOUSE OF U1 (U2), CHILD OF U1 (U3), PARENT OF U1 (U4), SIBLING OF U1 (U5), LIFE ACT - SPOUSE OF LPR (V1), LIFE ACT - CHILD OF LPR (V2), LIFE ACT - CHILD OF A V1 OR V2 (V3).

Present Work/Education/Training Information Page

Displayed for all applicants over the age of 14



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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

-SELECT ONE-

In which occupation do you intend to work in the U.S.?

-SELECT ONE-

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Present Work/Education/Training Information Page

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’.

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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

AGRICULTURE

Provide the following information:

Present Employer or School Name

Present Employer or School address:

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

Q: Do you have other occupations?

A:

☐ Yes

☒ No

In which occupation do you intend to work in the U.S.?

AGRICULTURE

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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'.

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NOTE: Provide the following information concerning your current employment or education.

Primary OccupationAGRICULTURE

Provide the following information:

Present Employer or School Name

Present Employer or School address:

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/ProvinceDoes Not Apply

Postal Zone/ZIP CodeDoes Not Apply

Country/Region- SELECT ONE -

Q: Do you have other occupations?

A: Yes No

Provide the following information:

Other OccupationAGRICULTURE

Other Employer or School Name

Other Employer or School address:

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/ProvinceDoes Not Apply

Postal Zone/ZIP CodeDoes Not Apply

Country/Region- SELECT ONE -


Add AnotherRemove

In which occupation do you intend to work in the U.S.?AGRICULTURE

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Present Work/Education/Training Information Page

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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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

AGRICULTURE

Provide the following information:

Present Employer or School Name

Present Employer or School address:

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

Q: Do you have other occupations?

A: ☒ Yes ☐ No

Provide the following information:

Other Occupation

HOMEMAKER

Add Another

Remove

In which occupation do you intend to work in the U.S.?

AGRICULTURE

Back: Previous U.S. Travel

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Present Work/Education/Training Information Page

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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Primary Occupation

OTHER

Provide the following information:

Specify Other

Present Employer or School Name

Present Employer or School address:

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province

Does Not Apply

Postal Zone/ZIP Code

Does Not Apply

Country/Region

- SELECT ONE -

Q: Do you have other occupations?

A: Yes No

In which occupation do you intend to work in the U.S.?

OTHER

Provide the following information:

Specify Other

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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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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

NOT EMPLOYED

In which occupation do you intend to work in the U.S.?

NOT EMPLOYED

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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

HOMEMAKER

Q: Do you have other occupations?

A: ☐ Yes ☐ No

In which occupation do you intend to work in the U.S.?

HOMEMAKER

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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

AGRICULTURE

Provide the following information:

Present Employer or School Name

Present Employer or School address:

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

Q: Does this job require at least 2 years of training or experience?

A: ☐ Yes ☐ No

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: ☐ Yes ☒ No

In which occupation do you intend to work in the U.S.?

BUSINESS

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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

AGRICULTURE

Provide the following information:

Present Employer or School Name

Present Employer or School address:

Street Address (Line 1)

Street Address (Line 2) **Optional*

City

State/Province

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

Q: Does this job require at least 2 years of training or experience?

A: ☒ Yes ☐ No

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: ☒ Yes ☐ No

Provide the following information:

Other Occupation


-SELECT ONE-

In which occupation do you intend to work in the U.S.?

BUSINESS

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NOTE: Provide the following information concerning your current employment or education.

Primary Occupation

HOMEMAKER

Q: Do you have other occupations?

A: ☒ Yes ☐ No

Provide the following information:

Other Occupation

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

☒ Does Not Apply

Postal Zone/ZIP Code

☒ Does Not Apply

Country/Region

- SELECT ONE -

Q: Does this job require at least 2 years of training or experience?

A: ☐ Yes ☐ No

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.?


CULINARY/FOOD SERVICES

◀ Back: Previous U.S. Travel

 Save

Next: 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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Previous Work/Education/Training Information Page

Displayed for all applicants over the age of 14. The answer to both questions is ‘No’.



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

Previous Work/Education/Training Information

NOTE: Please provide the following information.

Q: Were you previously employed?

A: ☐ Yes ☒ No

Q: Have you attended any educational institutions at a secondary level or above?

A: ☐ Yes ☒ No

Help: Level of Education

You must answer yes to this question if you have ever attended high school, college, university, graduate school, doctoral program, or a vocational program.

Back: Work/Education: Present

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Next: Work/Education: Additional

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Previous Work/Education/Training Information Page

Displayed for all applicants over the age of 14.
The answer to both questions is ‘Yes’.

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

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NOTE: Please provide the following information.

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Q: Were you previously employed?

A: ☒ Yes ☐ No

Provide the following information on all of your employers from the last fifteen years, starting with the most recent employer.

Employer Name

Employer Street Address (Line 1)

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 ☐ 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?

A: ☒ Yes ☐ No

Number of Educational Institutions Attended:

Provide the following information on all educational institutions 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

Country/Region - SELECT ONE -

Course of Study

Degree, Diploma or Certificate Received

Date of Attendance From (Format: DD-MMM-YYYY)

Date of Attendance To (Format: DD-MMM-YYYY)

[Add Another](#) [Remove](#)

Help: Level of Education

You must answer yes to this question if you have 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 "Vocational." For all other educational levels please indicate your major or concentration.

Back: Work/Education: Present | Save | Next: Work/Education: Additional

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

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Previous Work/Education/Training Information Page

Displayed for all DV principal applicants who answer "Yes" to all questions on the page.



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Previous Work/Education/Training Information

NOTE: Please provide the following information.

Q: Were you previously employed?

A: ☒ Yes ☐ No

Provide the following information on all of your employers from the last fifteen years, starting with the most recent employer.

Employer Name

Employer Street Address (Line 1)

Employer Street Address (Line 2) *Optional

City

State/Province

Postal Zone/ZIP Code

Country/Region

Telephone Number

Job Title

Supervisor's Surnames

Supervisor's Given Names

Employment Date From

Employment Date To

Q: Does this job require at least 2 years of training or experience?

A: ☒ Yes ☐ No

Describe the Type of Work you are doing. Be as specific as possible.

Duties

Add Another

Remove

Q: Have you attended any educational institutions at a secondary level or above?

A: ☒ Yes ☐ No

Number of Educational Institutions Attended:

Provide the following information on all educational institutions at a secondary level or above you have attended.

Name of Institution

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province

Postal Zone/ZIP Code

Country/Region

Highest Level of Education Completed

Provide the following information:

Specify Other

Course of Study

Degree, Diploma or Certificate Received

Date of Attendance From

Date of Attendance To

Add Another

Remove

Help: Level of Education

You must answer yes to this question if you have 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 "Vocational." For all other educational levels please indicate your major or concentration.

Back: Work/Education: Present

Save

Next: Work/Education: Additional

Highest Level of Education Completed

-SELECT ONE-

HIGH SCHOOL, NO DEGREE

HIGH SCHOOL DIPLOMA

VOCATIONAL SCHOOL

UNIVERSITY, NO DEGREE


UNIVERSITY DEGREE

ADVANCED DEGREE

OTHER

Additional Work/Education/Training/Travel Information Page

Displayed for all applicants. The answer to all questions is 'No'.



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Additional Work/Education/Training/Travel Information

NOTE: Provide the following work, education, or training related information. Provide complete and accurate information to all questions that require an explanation.

Q: Have you travelled to any countries/regions, other than the United States, within the last fifteen years?

A: ☒ Yes ☐ No

Q: Have you ever served in the military?

A: ☐ Yes ☒ No

Q: Have you belonged to, contributed to, or worked for any professional, social, or charitable organization?

A: ☐ Yes ☒ No

Q: Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience?

A: ☐ Yes ☒ No

Q: 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?

A: ☐ Yes ☒ No

Q: Can you speak and/or read languages other than your native language?

A: ☐ Yes ☒ No

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Additional Work/Education/Training/Travel Information Page

Displayed for all applicants. The answer to all questions is 'Yes'.

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Additional Work/Education/Training/Travel Information

NOTE: Provide the following work, education, or training related information. Provide complete and accurate information to all questions that require an explanation.

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- ☒ Previous U.S. Travel
- ☒ Work / Education / Training ▶

Present

Previous

■ Additional

- ☒ Petitioner
- ☒ Security and Background
- ☒ Social Security Number

Q: Have you travelled to any countries/regions, other than the United States, within the last fifteen years?

A: ☒ Yes ☐ No

Provide a List of Cities Visited in each Country/Region Visited:

Country/Region

 Cities

Date Arrived
(Format: DD-MMM-YYYY)

Length of Stay
 -SELECT ONE-

Person/Entity Who Paid for Trip

[+ Add Another](#) [- Remove](#)

Q: Have you ever served in the military?

A: ☒ Yes ☐ No

Provide the following information:

Name of Country/Region

 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](#)

Q: Have you belonged to, contributed to, or worked for any professional, social, or charitable organization?

A: ☒ Yes ☐ No

Provide a List of Organizations

Organization Name

[+ Add Another](#) [- Remove](#)

Q: Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience?

A: ☒ Yes ☐ No

Explain Skills or Training

Q: 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?

A: ☒ Yes ☐ No


Explain

Q: Can you speak and/or read languages other than your native language?

A: ☒ Yes ☐ No

List the languages that you speak and/or read:

Person/Entity Who Paid for Trip:

SELF 

-SELECT ONE-

SELF

OTHER PERSON

PRESENT EMPLOYER

EMPLOYER IN THE U.S.

OTHER COMPANY/ORGANIZATION

Additional Work/Education/Training/Travel Information Page

Part 2

◀ Back: Work/Education: Previous

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Next: Petitioner ▶



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Petitioner Information Page

Displayed for all applicants.



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NOTE: Please provide the following information concerning the individual/entity that filed a petition on your behalf.

Petitioner is my

- SELECT ONE -

Help: Petitioner

Your petitioner is generally the U.S. person or business who made a formal request that you be considered for an immigrant visa or 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.

Back: Work / Education / Training

Save

Next: Security and Background



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Petitioner is my...

- SELECT ONE -

- SELECT ONE -

FATHER

MOTHER

BROTHER

SISTER

SPOUSE

CHILD

STEPFATHER

STEPMOTHER

UNCLE

AUNT


GRANDPARENT

IN-LAW

SELF

Petitioner Information Page

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.



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Petitioner Information

NOTE: Please provide the following information concerning the individual/entity that filed a petition on your behalf.

Petitioner is my

FATHER

Petitioner

Petitioner Surnames

Petitioner Given Names

Address and Phone Number of Petitioner

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State/Province

Postal Zone/ZIP Code

Country/Region

Telephone

Mobile/Cell Telephone

Email Address

Help: Petitioner

Your petitioner is generally the U.S. person or business who made a formal request that you be considered for an immigrant visa or 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.


Help: Email Address

The email address you provide for the petitioner may be used for correspondence purposes. Please provide an email address that is secure and to which your petitioner has reasonable access.

Back: Work / Education / Training

Save

Next: Security and Background



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Petitioner Information Page

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



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Petitioner Information

NOTE: Please provide the following information concerning the individual/entity that filed a petition on your behalf.

Petitioner is my

SELF

Help: Petitioner

Your petitioner is generally the U.S. person or business who made a formal request that you be considered for an immigrant visa or 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.

Back: Work / Education / Training

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Next: Security and Background



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Security and Background: Medical and Health Information Page


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

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

Security and Background: Medical and Health Information

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.**

Q: Do you have a communicable disease of public health significance such as tuberculosis (TB)?

A: ☐ Yes ☒ No

Q: Do you have documentation to establish that you have received vaccinations in accordance with U.S. law?

A: ☐ Yes ☒ No

Explain

Q: Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of yourself or others?

A: ☐ Yes ☒ No


Q: Are you or have you ever been a drug abuser or addict?

A: ☐ Yes ☒ No

Back: Petitioner

Save

Next: Criminal



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
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Security and Background: Criminal Information Page

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



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

Security and Background: Criminal Information

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.

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Medical and Health

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Security 2

Immigration Law Violations 1

Miscellaneous 1

Miscellaneous 2

Social Security Number

Q: Have you ever been arrested or convicted for any offense or crime, even though subject of a pardon, amnesty, or other similar action?

A: ☒ Yes ☐ No

Explain

Q: Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances?

A: ☒ Yes ☐ No

Explain

Q: Are you the spouse, son, or daughter of an individual who has violated any controlled substance trafficking law, and have knowingly benefited from the trafficking activities in the past five years?

A: ☒ Yes ☐ No

Explain

Q: Are you coming to the United States to engage in prostitution or unlawful commercialized vice or have you been engaged in prostitution or procuring prostitutes within the past 10 years?

A: ☒ Yes ☐ No

Explain

Q: Have you ever been involved in, or do you seek to engage in, money laundering?

A: ☒ Yes ☐ No

Explain

Q: Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the United States?

A: ☒ Yes ☐ No

Explain

Q: Have you ever knowingly aided, abetted, assisted, or colluded with an individual who has been identified by the President of the United States as a person who plays a significant role in a severe form of trafficking in persons?

A: ☒ Yes ☐ No

Explain

Q: Are you the spouse, son, or daughter of an individual who has committed or conspired to commit a human trafficking offense in the United States or outside the United States and have you within the last five years, knowingly benefited from the trafficking activities?

A: ☒ Yes ☐ No

Explain

Back: Medical and Health

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Next: Security 1

Security and Background: Security Information 1 Page

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

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Immigration Law Violations 1

Miscellaneous 1

Miscellaneous 2

Social Security Number

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.

Q:

Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States?

A:

☐ Yes

☒ No

Q:

Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities?

A:

☐ Yes

☒ No

Q:

Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?

A:

☐ Yes

☒ No

Q:

Are you, or have you ever been, a member or representative of a terrorist organization?

A:

☐ Yes

☒ No

Q:

Are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing financial assistance or other support to terrorists or terrorist organizations, in the last five years?

A:

☐ Yes

☒ No

Q:

Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide?

A:

☐ Yes

☒ No

Q:

Have you ever committed, ordered, incited, assisted, or otherwise participated in torture?

A:

☐ Yes

☒ No

Q:

Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence?

A:

☐ Yes

☒ No

Q:

Have you ever engaged in the recruitment of or the use of child soldiers?

A:

☐ Yes

☒ No

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:

☐ Yes

☒ No

Help: Terrorist organizations

Terrorist organizations include, but are not limited to groups listed here.

Back: Criminal

Save

Next: Security 2

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Security and Background: Security Information 1 Page

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Security and Background: Security Information 1

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.**

Q: Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States?

A: ☒ Yes ☐ No

Explain

Q: Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities?

A: ☒ Yes ☐ No

Explain

Q: Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?

A: ☒ Yes ☐ No

Explain

Q: Are you, or have you ever been, a member or representative of a terrorist organization?

A: ☒ Yes ☐ No

Explain

Q: Are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing financial assistance or other support to terrorists or terrorist organizations, in the last five years?

A: ☒ Yes ☐ No

Explain

Help: Terrorist organizations

Terrorist organizations include, but are not limited to groups listed [here](#).

Q: Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide?

A: ☒ Yes ☐ No

Explain

Q: Have you ever committed, ordered, incited, assisted, or otherwise participated in torture?

A: ☒ Yes ☐ No

Explain

Q: Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence?

A: ☒ Yes ☐ No

Explain

Q: Have you ever engaged in the recruitment of or the use of child soldiers?

A: ☒ Yes ☐ 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: ☒ Yes ☐ No

Explain

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Next: Security 2

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

Security and Background: Security Information 1

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.**

Q: Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States?

A: ☒ Yes ☐ No

Explain

Q: Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities?

A: ☒ Yes ☐ No

Explain

Q: Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?

A: ☒ Yes ☐ No

Explain

Q: Are you, or have you ever been, a member or representative of a terrorist organization?

A: ☒ Yes ☐ No

Explain

Q: Are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing financial assistance or other support to terrorists or terrorist organizations, in the last five years?

A: ☒ Yes ☐ No

Explain

Help: Terrorist organizations

Terrorist organizations include, but are not limited to groups listed [here](#).

Q: Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide?

A: ☒ Yes ☐ No

Explain

Q: Have you ever committed, ordered, incited, assisted, or otherwise participated in torture?

A: ☒ Yes ☐ No

Explain

Q: Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence?

A: ☒ Yes ☐ No

Explain

Q: Have you ever engaged in the recruitment of or the use of child soldiers?

A: ☒ Yes ☐ 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: ☒ Yes ☐ No

Explain

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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.**

Q: Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States?

A: ☒ Yes ☐ No

Explain

Q: Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities?

A: ☒ Yes ☐ No

Explain

Q: Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?

A: ☒ Yes ☐ No

Explain

Q: Are you, or have you ever been, a member or representative of a terrorist organization?

A: ☒ Yes ☐ No

Explain

Q: Are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing financial assistance or other support to terrorists or terrorist organizations, in the last five years?

A: ☒ Yes ☐ No

Explain

Help: Terrorist organizations

Terrorist organizations include, but are not limited to groups listed [here](#).

Q: Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide?

A: ☒ Yes ☐ No

Explain

Q: Have you ever committed, ordered, incited, assisted, or otherwise participated in torture?

A: ☒ Yes ☐ No

Explain

Q: Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence?

A: ☒ Yes ☐ No

Explain

Q: Have you ever engaged in the recruitment of or the use of child soldiers?

A: ☒ Yes ☐ 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: ☒ Yes ☐ No

Explain

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Explain

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A: ☒ Yes ☐ No

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Q: Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?

A: ☒ Yes ☐ No

Explain

Q: Are you, or have you ever been, a member or representative of a

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Q:

Are you, or have you ever been, a member of or affiliated with the Communist or other totalitarian party?

A:

☐ Yes

☒ No

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 Liberation Army (ELN), or United Self-Defense Forces of Colombia (AUC)?

A:

☐ Yes

☒ No

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

☒ No

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:

☐ Yes

☒ No

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

☒ No

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

☒ No

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

☒ No

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Q: Are you, or have you ever been, a member of or affiliated with the Communist or other totalitarian party?

A: ☒ Yes ☐ No

Explain

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 Liberation Army (ELN), or United Self-Defense Forces of Colombia (AUC)?

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Explain

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A: ☒ Yes ☐ 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: ☒ Yes ☐ 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?

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Explain

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A: ☒ Yes ☐ No

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A: ☒ Yes ☐ No

Explain

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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?

A: ☐ Yes ☒ No

Q: Have you ever been removed or deported from any country?

A: ☐ Yes ☒ No

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A: ☒ Yes ☐ No

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Q: Have you ever been removed or deported from any country?


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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?

A:

☐ Yes
☒ No

Q: Have you ever been removed or deported from any country?

A:

☐ Yes
☒ No

Q: Have you ever been the subject of a removal or deportation hearing?

A:

☐ Yes
☒ No

Q: Have you failed to attend a hearing on removability or inadmissibility within the last five years?

A:

☐ Yes
☒ 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:

☐ Yes
☒ No

Q: Are you subject to a civil penalty under INA 274C?

A:

☐ Yes
☒ No

Q: Have you been ordered removed from the U.S. during the last five years?

A:

☐ Yes
☒ No

Q: Have you been ordered removed from the U.S. for a second time within the last 20 years?

A:

☐ Yes
☒ No

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Q:

Have you been ordered removed from the U.S. for a second time within the last 20 years?


A:

☒ Yes

☐ No

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Q: Have you ever been unlawfully present and ordered removed from the U.S. during the last ten years?

A: ☒ Yes ☐ No

Explain

Q: Have you ever been convicted of an aggravated felony and been ordered removed from the U.S.?

A: ☒ Yes ☐ No

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 years?

A: ☒ Yes ☐ 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 ☐ No

Explain

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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?

A:☐ Yes☒ No

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?

A:☐ Yes☒ No

Q: Have you voted in the United States in violation of any law or regulation?

A:☐ Yes☒ No

Q: Have you ever renounced United States citizenship for the purpose of avoiding taxation?

A:☐ Yes☒ No

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☒ No

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☒ No

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☒ No

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A: ☒ Yes ☐ No

Explain

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A: ☒ Yes ☐ No

Explain

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A: ☒ Yes ☐ 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?


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Explain

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A: ☒ Yes ☐ No

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Explain

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A: ☒ Yes ☐ No

Explain

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A: ☒ Yes ☐ No

Explain

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A: ☒ Yes ☐ No

Explain

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Q: Have you voted in the United States in violation of any law or regulation?

A: ☒ Yes ☐ No

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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?

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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 ☐ No

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A: ☒ Yes ☐ No

Explain

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?

A: ☒ Yes ☐ No

Explain

Q: Have you voted in the United States in violation of any law or regulation?

A: ☒ Yes ☐ No

Explain

Q: Have you ever renounced United States citizenship for the purpose of avoiding taxation?

<

Security and Background: Miscellaneous Information 2

Page

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

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

Security and Background: Miscellaneous 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 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.**

Q: Are you a health care worker seeking to perform such work in the United States but have not yet received certification from the Commission on Graduates of Foreign Nursing Schools or from an equivalent approved independent credentialing organization?

A: ☐ Yes ☒ No

Q: Are you permanently ineligible for U.S. citizenship?

A: ☐ Yes ☒ No

Q: Have you ever departed the United States in order to evade military service during a time of war?

A: ☐ Yes ☒ No

Q: Are you coming to the U.S. to practice polygamy?

A: ☐ Yes ☒ No

Q: Are you a former exchange visitor (J) who has not yet fulfilled the two-year foreign residence requirement?

A: ☐ Yes ☒ No

Q: Has an immigration judge or the Board of Immigration Appeals ever determined that you knowingly made a frivolous application for asylum?

A: ☐ Yes ☒ No

Q: Are you likely to become a public charge after you are admitted to the United States?

A: ☐ Yes ☒ No

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Security and Background: Miscellaneous Information 2

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

Security and Background: Miscellaneous 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 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.**

Q: Are you a health care worker seeking to perform such work in the United States but have not yet received certification from the Commission on Graduates of Foreign Nursing Schools or from an equivalent approved independent credentialing organization?

A: ☒ Yes ☐ No

Explain

Q: Are you permanently ineligible for U.S. citizenship?

A: ☒ Yes ☐ No

Explain

Q: Have you ever departed the United States in order to evade military service during a time of war?

A: ☒ Yes ☐ No

Explain

Q: Are you coming to the U.S. to practice polygamy?

A: ☒ Yes ☐ No

Explain

Q: Are you a former exchange visitor (J) who has not yet fulfilled the two-year foreign residence requirement?

A: ☒ Yes ☐ No

Explain

Q: Has an immigration judge or the Board of Immigration Appeals ever determined that you knowingly made a frivolous application for asylum?

A: ☒ Yes ☐ No

Explain

Q: Are you likely to become a public charge after you are admitted to the United States?

A: ☒ Yes ☐ No


Explain

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


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Social Security Number Information Page

Displayed for all applicants. Answers to questions are ‘Yes’.

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

Social Security Number Information

Getting StartedPersonalAddress and PhoneFamilyPrevious U.S. TravelWork / Education / TrainingPetitionerSecurity and BackgroundSocial Security Number

NOTE: Provide the following Social Security Number information. Provide complete and accurate information to all questions that require an explanation.

Q: Have you ever applied for a Social Security number?

A: Yes No

Q: Were you issued a number?

A: Yes No

Provide the following information:

Social Security Number

Do Not Know

Q: Do you need a new card issued?

A: Yes No

Q: Do you want the Social Security Administration to issue a Social Security number and a card?

A: Yes No

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 No

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

Help: Social Security Number

A Social Security Number is a nine-digit number issued to U.S. citizens, permanent residents, and temporary residents present in the U.S. for the purpose of employment and is issued by the Social Security Administration.

Help: Social Security Number Issued

If you do not know the Social Security Number, click 'Do Not Know'. You will be assigned one when you complete the immigrant visa process, but you need to make sure you answer Yes to the Consent to Disclose question to authorize the release of your information to the Social Security Administration. An Individual Taxpayer Identification Number (ITIN) is a tax processing number issued by the Internal Revenue Service. Do not enter your ITIN number in this space.

Help: Social Security Card Issuance

Please note that you must answer Yes to the Consent to Disclose question that follows in order for a Social Security Number and Card to be issued.

Help: Social Security Card Issuance

Please note that you must answer Yes to the Consent to Disclose question that follows in order for a Social Security Number and Card to be issued.

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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Social Security Number Information Page

Displayed for all applicants. Answers to the first four questions are ‘Yes’ with the last question answered ‘No’.

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

Getting Started

Personal

Address and Phone

Family

Previous U.S. Travel

Work / Education / Training

Petitioner

Security and Background

Social Security Number

Social Security Number Information

NOTE: Provide the following Social Security Number information. Provide complete and accurate information to all questions that require an explanation.

Q: Have you ever applied for a Social Security number?

A: ☒ Yes ☐ No

Q: Were you issued a number?

A: ☒ Yes ☐ No

Provide the following information:

Social Security Number

☐ Do Not Know

Q: Do you need a new card issued?

A: ☒ Yes ☐ No

Q: Do you want the Social Security Administration to issue a Social Security number and a card?

A: ☒ Yes ☐ No

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 ☒ No

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

Help: Social Security Number

A Social Security Number is a nine-digit number issued to U.S. citizens, permanent residents, and temporary residents present in the U.S. for the purpose of employment and is issued by the Social Security Administration.

Help: Social Security Number Issued

If you do not know the Social Security Number, click 'Do Not Know'. You will be assigned one when you complete the immigrant visa process, but you need to make sure you answer Yes to the Consent to Disclose question to authorize the release of your information to the Social Security Administration. An Individual Taxpayer Identification Number (ITIN) is a tax processing number issued by the Internal Revenue Service. Do not enter your ITIN number in this space.

Help: Social Security Card Issuance

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Help: Social Security Card Issuance

Please note that you must answer Yes to the Consent to Disclose question that follows in order for a Social Security Number and Card to be issued.

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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Sign and Submit Page

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COMPLETE

REVIEW

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

E-Sign and Certification

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 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 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.

Thursday, September 18, 2025 - 12:58:00 PM EDT

Preparer of Application

Q:

Did anyone assist you in filling out this application?

A:

☐ Yes

☒ No

MEDICAL EXAMINATION DISCLOSURE AND CONSENT

Immigrant visa applicants are required to undergo a medical examination with an authorized panel physician to assess visa eligibility in accordance with Immigration and Nationality Act (INA) Sections 212(a) and 221(d). The purpose of the examination is to determine whether the applicant has a medical condition which would render him or her ineligible to receive an immigration benefit. If required to undergo a medical examination, all applicants are advised that their medical information may be collected and temporarily stored in the online eMedical system, which is a platform that is hosted, operated, and maintained by the Australian Department of Home Affairs in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and the Department of State. The eMedical system is protected by a certified "Secure Gateway Environment," which provides the necessary security controls to ensure information in the eMedical system remains private and confidential.

Applicant medical information will be transferred from eMedical to U.S. Government systems to determine medical eligibility and to allow the CDC to fulfill public health functions in accordance with the Public Health Service Act Section 325 and INA Section 212(a). In accordance with INA Section 222(f), this information is considered confidential and is only to be disclosed in certain circumstances enumerated in statute, including for use in the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States.

By signing this application, I understand and consent to the collection and storage of my medical information in the eMedical system. I also understand that by submitting this application, I am consenting to the disclosure of my medical information to any U.S. government agency having statutory or other lawful authority to use such information for the purpose of law enforcement and immigration enforcement. I am aware that while furnishing this information is voluntary, failure to provide requested medical information may cause delay or denial of my visa application.

E-Signature

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 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 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 unconstitutional means.

Enter your NVC Case Number:

Enter your Passport Number:

ACPKVD

Enter the code below as shown:

Click the button below to electronically sign your application:

Sign and Submit Application

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

Sign and Submit

E-Sign and Certification

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 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 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, March 19, 2025 - 1:14:00 PM EDT

Preparer of Application

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

A: Yes No

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

Does Not Apply

Postal Zone/ZIP Code

Does Not Apply

Country/Region

- SELECT ONE -

Relationship to You

MEDICAL EXAMINATION DISCLOSURE AND CONSENT

Immigrant visa applicants are required to undergo a medical examination with an authorized panel physician to assess visa eligibility in accordance with Immigration and Nationality Act (INA) Sections 212(a) and 221(d). The purpose of the examination is to determine whether the applicant has a medical condition which would render him or her ineligible to receive an immigration benefit. If required to undergo a medical examination, all applicants are advised that their medical information may be collected and temporarily stored in the online eMedical system, which is a platform that is hosted, operated, and maintained by the Australian Department of Home Affairs in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and the Department of State. The eMedical system is protected by a certified "Secure Gateway Environment," which provides the necessary security controls to ensure information in the eMedical system remains private and confidential.

Applicant medical information will be transferred from eMedical to U.S. Government systems to determine medical eligibility and to allow the CDC to fulfill public health functions in accordance with the Public Health Service Act Section 325 and INA Section 212(a). In accordance with INA Section 222(f), this information is considered confidential and is only to be disclosed in certain circumstances enumerated in statute, including for use in the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States.

By signing this application, I understand and consent to the collection and storage of my medical information in the eMedical system. I also understand that by submitting this application, I am consenting to the disclosure of my medical information to any U.S. government agency having statutory or other lawful authority to use such information for the purpose of law enforcement and immigration enforcement. I am aware that while furnishing this information is voluntary, failure to provide requested medical information may cause delay or denial of my visa application.

E-Signature

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 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 affirm) that all statements which appear in this application have been made by me as 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 unconstitutional means.

Enter your NVC Case Number:

Enter your Passport Number:

ACPKVD

Enter the code below as shown:

Click the button below to electronically sign your application:

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

Sign and Submit

E-Sign and Certification

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 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 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, September 24, 2025 - 1:50:21 PM EDT

Preparer of Application

Q:

Did anyone assist you in filling out this application?

A:

☐ Yes

☒ No

MEDICAL EXAMINATION DISCLOSURE AND CONSENT

Immigrant visa applicants are required to undergo a medical examination with an authorized panel physician to assess visa eligibility in accordance with Immigration and Nationality Act (INA) Sections 212(a) and 221(d). The purpose of the examination is to determine whether the applicant has a medical condition which would render him or her ineligible to receive an immigration benefit. If required to undergo a medical examination, all applicants are advised that their medical information may be collected and temporarily stored in the online eMedical system, which is a platform that is hosted, operated, and maintained by the Australian Department of Home Affairs in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and the Department of State. The eMedical system is protected by a certified "Secure Gateway Environment," which provides the necessary security controls to ensure information in the eMedical system remains private and confidential.

Applicant medical information will be transferred from eMedical to U.S. Government systems to determine medical eligibility and to allow the CDC to fulfill public health functions in accordance with the Public Health Service Act Section 325 and INA Section 212(a). In accordance with INA Section 222(f), this information is considered confidential and is only to be disclosed in certain circumstances enumerated in statute, including for use in the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States.

By signing this application, I understand and consent to the collection and storage of my medical information in the eMedical system. I also understand that by submitting this application, I am consenting to the disclosure of my medical information to any U.S. government agency having statutory or other lawful authority to use such information for the purpose of law enforcement and immigration enforcement. I am aware that while furnishing this information is voluntary, failure to provide requested medical information may cause delay or denial of my visa application.

E-Signature

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 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 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 unconstitutional means.

Enter your MVC Case Number:

In order to submit your application, please verify your date of birth here:

(Format: DD-MMM-YYYY)

UW

RB

Enter the code below as shown:

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/cutting (FGM/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:

Sign and Submit Application

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E-Sign and Certification

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

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.

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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, September 24, 2025 - 1:50:21 PM EDT

Preparer of Application

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

A: ☒ Yes ☐ No

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

☐ Does Not Apply

Postal Zone/ZIP Code

☐ Does Not Apply

Country/Region

- SELECT ONE -

Relationship to You

MEDICAL EXAMINATION DISCLOSURE AND CONSENT

Immigrant visa applicants are required to undergo a medical examination with an authorized panel physician to assess visa eligibility in accordance with Immigration and Nationality Act (INA) Sections 212(a) and 221(d). The purpose of the examination is to determine whether the applicant has a medical condition which would render him or her ineligible to receive an immigration benefit. If required to undergo a medical examination, all applicants are advised that their medical information may be collected and temporarily stored in the online eMedical system, which is a platform that is hosted, operated, and maintained by the Australian Department of Home Affairs in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and the Department of State. The eMedical system is protected by a certified "Secure Gateway Environment," which provides the necessary security controls to ensure information in the eMedical system remains private and confidential.

Applicant medical information will be transferred from eMedical to the U.S. Government systems to determine medical eligibility and to allow the CDC to fulfill public health functions in accordance with the Public Health Service Act Section 325 and INA Section 212(a). In accordance with INA Section 221(f), this information is considered confidential and is only to be disclosed in certain circumstances enumerated in statute, including for use in the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States.

By signing this application, I understand and consent to the collection and storage of my medical information in the eMedical system. I also understand that by submitting this application, I am consenting to the disclosure of my medical information to any U.S. government agency having statutory or other lawful authority to use such information for the purpose of law enforcement and immigration enforcement. I am aware that while furnishing this information is voluntary, failure to provide requested medical information may cause delay or denial of my visa application.

E-Signature

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 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 wrongful 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 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 unconstitutional means.

Enter your NVC Case Number:

In order to submit your application, please verify your date of birth here:

(Format: DD-MMM-YYYY)

TWBRB

Enter the code below as shown:

Female Genital Mutilation/Cutting (FGM/C) Prevention

Pursuant to Section 644 the Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA), Public Law 104-192 (8 U.S.C. 1374c), 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 (FGM/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:

Sign and Submit Application

Back: REVIEW

Save


Next: Confirmation

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

Immigrant Visa and Alien Registration Application Confirmation

Thank You

Your Immigrant Visa and Alien Registration Application form (Form DS-260) has been automatically forwarded to your interview location.

Print Confirmation

Print Form DS-260

Email Confirmation

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Click to review requirements

Requirements for Civil Documents

Requirements for Photographs

Embassy/Consulate General - Specific Information

This confirms the submission of the Immigrant Visa and Alien Registration application for:

Name Provided:

BARDOX, ELI

Country/Region of Origin (Nationality):


NETHERLANDS


Completed On:

19 MAR 2018

Case No:


Confirmation No:





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the case is at KCC

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SIGN

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

Immigrant Visa and Alien Registration Application Confirmation

Thank You

Your Immigrant Visa and Alien Registration Application (DS-260) was sent to the Kentucky Consular Center (KCC) for review.

Print Confirmation

Print Form DS-260

Email Confirmation

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Next Steps

All Diversity Visa applicants must:

1. Obtain required supporting civil documents.

2. Obtain photographs that meet the Department of State's visa requirements.

3. Review the information specific to the U.S. Embassy/Consulate General where your visa interview will occur.

You do not need to submit any documentation to the Kentucky Consular Center. The KCC will review your application and will notify you if any of the information you have provided is insufficient or incomplete. Your DS-260 application will be kept on file with KCC until a visa number is available for you and your case can be scheduled. When your case is scheduled, the KCC will send you an email message directing you to log into the Entrant Status Check (ESC) website for further instructions.

If you would like to change your interview location, you must contact the Kentucky Consular Center by sending an e-mail to (KCCDV@state.gov) before your interview is scheduled. Your e-mail must include your name and case number, and must clearly indicate where you would like to be interviewed. Please note that once you have an appointment, you must contact the consular section where you have been scheduled in order to request a change. It may not be possible to change the location of your interview after you have been scheduled.

Click to review requirements

Requirements for Photographs

This confirms the submission of the Immigrant Visa and Alien Registration application for:

Name Provided:

TOMA, ALEXANDRU

Country/Region of Origin (Nationality):

NETHERLANDS

Completed On:


19 MAR 2018

Case No:

Confirmation No:

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Immigrant Visa and Alien Registration Application Confirmation

Thank You

Your Immigrant Visa and Alien Registration Application form (Form DS-260) has been automatically forwarded to your interview location.

Print Confirmation

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Print Form DS-260

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Email Confirmation


Click to review requirements

Requirements for Photographs

This confirms the submission of the Immigrant Visa and Alien Registration application for:


Name Provided:	DANIELYAN, ANAHIT KHACHIK
Country/Region of Origin (Nationality):	NETHERLANDS
Completed On:	19 MAR 2018
Case No:	
Confirmation No:	





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202-647-6575
Publicoutreach@state.gov

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