

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

Personal, Address, and Phone Information

Name Provided: _____
Full Name in Native Language: _____
Other Names Used: _____
Sex: _____
Current Marital Status: _____
Date of Birth: _____
City of Birth: _____
State/Province of Birth: _____
Country/Region of Birth: _____
Country/Region of Origin (Nationality): _____

Document Type: _____
Document ID: _____
Country/Authority that Issued Document: _____
Document Type: _____
Document ID: _____
Country/Authority that Issued Document: _____
Issuance Date: _____
Expiration Date: _____

Do you hold or have you held any nationality other than the one you have indicated above?

Yes No

Other Country/Region of Origin (Nationality): _____

Do you hold a passport from the country/region of origin (nationality) above? Yes No

Passport Number: _____

Present Address: _____
City: _____
State/Province: _____
Postal Zone/ZIP Code: _____
Country/Region: _____
From Date: _____

Have you lived anywhere other than this address since the age of sixteen? Yes No

Previous Address (1): _____
City: _____
State/Province: _____
Postal Zone/ZIP Code: _____
Country/Region: _____
From: _____
To: _____
Previous Address (2): _____
City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

From: _____

To: _____

Previous Address (3): _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

From: _____

To: _____

Previous Address (4): _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

From: _____

To: _____

Previous Address (5): _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

From: _____

To: _____

Primary Phone Number: _____

Secondary Phone Number: _____

Work Phone Number: _____

Email Address: _____

Is your Mailing Address the same as your Present Address? Yes No

Address: _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

Do you have an address in the United States where you intend to live? Yes No

Name of person currently living at address: _____

U.S. Address: _____

Phone Number: _____

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

Yes No

Contact Person: _____
Address: _____
City: _____
State: _____
ZIP Code: _____
Phone Number: _____

Family Information

Father's Surnames: _____
Father's Given Names: _____
Date of Birth: _____
City of Birth: _____
State/Province of Birth: _____
Country/Region of Birth: _____
Is your father still living? Yes No
Year of death: _____

Mother's Surnames: _____
Mother's Given Names: _____
Date of Birth: _____
City of Birth: _____
State/Province of Birth: _____
Country/Region of Birth: _____
Is your mother still living? Yes No
Year of death: _____

Do you have any previous spouses? Yes No
Previous Spouse Name (1): _____
Date of Birth: _____
Date of Marriage: _____
Date Marriage Ended: _____
How was your marriage terminated? _____
Country/Region where marriage was terminated: _____
Previous Spouse Name (2): _____
Date of Birth: _____
Date of Marriage: _____
Date Marriage Ended: _____
How was your marriage terminated? _____
Country/Region where marriage was terminated: _____

Do you have any children? Yes No
Number of Children: _____
Child Name (1): _____
Date of Birth: _____
City of Birth: _____

State of Birth: _____

Country/Region of Birth: _____

Does this child live with you? Yes No

Address: _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

Is this child immigrating to the U.S. with you? Yes No

Is this child immigrating to the U.S. at a later date to join you? Yes No

Child Name (2): _____

Date of Birth: _____

City of Birth: _____

State of Birth: _____

Country/Region of Birth: _____

Does this child live with you? Yes No

Address: _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

Is this child immigrating to the U.S. with you? Yes No

Is this child immigrating to the U.S. at a later date to join you? Yes No

Child Name (3): _____

Date of Birth: _____

City of Birth: _____

State of Birth: _____

Country/Region of Birth: _____

Does this child live with you? Yes No

Address: _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

Is this child immigrating to the U.S. with you? Yes No

Is this child immigrating to the U.S. at a later date to join you? Yes No

Child Name (4): _____

Date of Birth: _____

City of Birth: _____

State of Birth: _____

Country/Region of Birth: _____

Does this child live with you? Yes No

Address: _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

Is this child immigrating to the U.S. with you? Yes No

Is this child immigrating to the U.S. at a later date to join you? Yes No

Child Name (5): _____

Date of Birth: _____

City of Birth: _____

State of Birth: _____

Country/Region of Birth: _____

Does this child live with you? Yes No

Address: _____

City: _____

State/Province: _____

Postal Zone/ZIP Code: _____

Country/Region: _____

Is this child immigrating to the U.S. with you? Yes No

Is this child immigrating to the U.S. at a later date to join you? Yes No

Previous U.S. Travel Information

Have you even been in the U.S.? Yes No

Where you issued an Alien Registration Number by the Department of Homeland Security?

Yes No

Alien Registration Number: _____

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

Date Arrived (1): _____

Length of Stay: _____

Date Arrived (2): _____

Length of Stay: _____

Date Arrived (3): _____

Length of Stay: _____

Date Arrived (4): _____

Length of Stay: _____

Date Arrived (5): _____

Length of Stay: _____

Have you even been issued a U.S. Visa? Yes No

Date Visa Was Issued: _____

Visa Classification: _____

Visa Number: _____

If you answer yes to any of the following questions, please explain below:

Have any of your U.S. visas ever been lost or stolen? Yes No

Have any of your U.S. visas ever been cancelled or revoked? Yes No

Have you ever been refused a U.S. visa, been refused admission to the U.S., or withdrawn your application for admission at the port of entry? Yes No

If you answered yes to any of these questions, please explain: _____

Work, Education, and Training Information

Primary Occupation: _____

Do you have any other occupations? Yes No

Other Occupations: _____

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

Were you previously employed? Yes No

Employer Name (1): _____

Employer Street Address: _____

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: _____

Employer Name (2): _____

Employer Street Address: _____

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: _____

Employer Name (3): _____

Employer Street Address: _____

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: _____
Employer Name (4): _____
Employer Street Address: _____
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: _____
Employer Name (5): _____
Employer Street Address: _____
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: _____

Have you attended any educational institutions at a secondary level or above? Yes No

Number of Educational Institutions Attended: _____
Name of Institution (1): _____
Address of Institution: _____
City: _____
State/Province: _____
Postal Zone/ZIP Code: _____
Country/Region: _____
Course of Study: _____
Degree or Diploma: _____
Date of Attendance From: _____
Date of Attendance To: _____
Name of Institution (2): _____
Address of Institution: _____
City: _____
State/Province: _____
Postal Zone/ZIP Code: _____
Country/Region: _____
Course of Study: _____

Degree or Diploma: _____
Date of Attendance From: _____
Date of Attendance To: _____

Have you ever served in the military? Yes No
Name of Country/Region: _____
Branch of Service: _____
Rank/Position: _____
Military Specialty: _____
Date of Service From: _____
Date of Service To: _____

Petitioner Information

Petitioner is my: _____
Petitioner Name: _____
Petitioner Address: _____
City: _____
State/Province: _____
Postal Zone/ZIP Code: _____
Country/Region: _____
Telephone: _____
Mobile/Cell Telephone: _____
Email Address: _____

Security and Background Information

- Do you have a communicable disease of public health significance such as tuberculosis (TB)?
Yes No
- Do you have documentation to establish that you have received vaccinations in accordance with U.S. law? Yes No
- 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? Yes No
- Are you or have you ever been a drug abuser or addict? Yes No
- Have you ever been arrested or convicted for any offense or crime, even though subject or a pardon, amnesty, or other similar action? Yes No
- Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances? Yes No
- 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? Yes No
- 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? Yes No
- Have you ever been involved in, or do you seek to engage in, money laundering?
Yes No
- Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the United States? Yes No

- 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? Yes No
- 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?
Yes No
- Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States? Yes No
- Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities? Yes No
- Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations? Yes No
- Are you a member or representative of a terrorist organization? Yes No
- Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide?
Yes No
- Have you ever committed, ordered, incited, assisted, or otherwise participated in torture?
Yes No
- Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence? Yes No
- Have you ever engaged in the recruitment of or the use of child soldiers? Yes No
- Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? Yes No
- Are you a member of or affiliated with the Communist or other totalitarian party?
Yes No
- Have you ever directly or indirectly assisted or supported any of the groups in Columbia known as the Revolutionary Armed Forces of Columbia (FARC), National Liberation Army (ELN), or United Self-Defense Forces of Columbia (AUC)? Yes No
- 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? Yes No
- 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?
Yes No
- 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? Yes No
- Have you ever disclosed or trafficked in confidential U.S. business information obtained in connection with U.S. participation in the Chemical Weapons Convention? Yes No
- 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? Yes No

- 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? Yes No
- Have you ever been the subject of a removal or deportation hearing? Yes No
- Have you failed to attend a hearing on removability or inadmissibility within the last five years? Yes No
- 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? Yes No
- Are you subject to a civil penalty under INA 274C? Yes No
- Have you been ordered removed from the U.S. during the last five years? Yes No
- Have you been ordered removed from the U.S. for a second time within the last 20 years? Yes No
- Have you ever been unlawfully present and ordered removed from the U.S. during the last ten years? Yes No
- Have you ever been convicted of an aggravated felony and been ordered removed from the U.S.? Yes No
- 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? Yes No
- 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? Yes No
- 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? Yes No
- 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? Yes No
- Have you voted in the United States in violation of any law or regulation? Yes No
- Have you ever renounced United States citizenship for the purpose of avoiding taxation? Yes No
- Have you attended a public elementary school or a public secondary school on student (F) status after November 30, 1996 without reimbursing the school? Yes No
- 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? Yes No
- 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? Yes No
- 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? Yes No
- Are you permanently ineligible for U.S. citizenship? Yes No
- Have you ever departed the United States in order to evade military service during a time of war? Yes No
- Are you coming to the U.S. to practice polygamy? Yes No
- Are you a former exchange visitor (J) who has not yet fulfilled the two-year foreign residence requirement? Yes No

- Has the Secretary of Homeland Security of the United States ever determined that you knowingly made a frivolous application for asylum? Yes No
- Are you likely to become a public charge after you are admitted to the United States? Yes No

If you answer yes to any of the following questions, please explain below: _____

Social Security Number Information

Have you every applied for a Social Security number? Yes No

Do you want the Social Security Administration to issue a Social Security number and a card? Yes No

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? Yes No