

Part 3. Beneficiary Information (Information about the beneficiary/beneficiaries you are filing for. Complete the blocks below. Use the Attachment-1 sheet to name each beneficiary included in this petition.) (continued)

4. Provide all other names the beneficiary has used. Include nicknames, aliases, maiden name, and names from all previous marriages.

Family Name (Last Name)

Given Name (First Name)

Middle Name

5. Other Information

Date of birth (mm/dd/yyyy)

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Gender

☐

Male

☐

Female

U.S. Social Security Number (if any)

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Alien Registration Number (A-Number)

▶ A-																			
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Country of Birth

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Province of Birth

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Country of Citizenship or Nationality

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6. If the beneficiary is in the United States, complete the following:

Date of Last Arrival (mm/dd/yyyy)

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I-94 Arrival-Departure Record Number

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Passport or Travel Document Number

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Date Passport or Travel Document
Issued (mm/dd/yyyy)

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Date Passport or Travel Document
Expires (mm/dd/yyyy)

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Passport or Travel Document Country
of Issuance

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Current Nonimmigrant Status

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Date Status Expires (mm/dd/yyyy) or D/S

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Student and Exchange Visitor Information System (SEVIS)
Number (if any)

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Employment Authorization Document (EAD)
Number (if any)

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7. Current Residential U.S. Address (if applicable) (do not list a P.O. Box)

Street Number and Name

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Apt. Ste. Flr. Number

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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City or Town

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State

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ZIP Code

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Part 4. Processing Information

1. If a beneficiary or beneficiaries named in **Part 3.** is/are outside the United States, or a requested extension of stay or change of status cannot be granted, state the U.S. Consulate or inspection facility you want notified if this petition is approved.

a. Type of Office (select only one box): ☐ Consulate ☐ Pre-flight inspection ☐ Port of Entry

b. Office Address (City)

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c. U.S. State or Foreign Country

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