



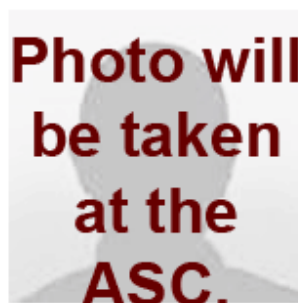
Next

Online Nonimmigrant Visa Application (DS-160)

Application - *Sensitive But Unclassified(SBU)*

We **do not need a printed copy** of your application at any point during your interview process. Only print this application if you want a copy for your own records. If you print your application, please keep it secure.

Photo Provided:



Confirmation Number:



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Personal, Address, Phone, and Passport/Travel Document Information

Name Provided:	GONABOYINA, NAGA VENKATA SOMESWARA RAO
Full Name in Native Language:	DOES NOT APPLY
Other Names Used:	NO
Telecode Name Used:	NO
Sex:	MALE
Marital Status:	MARRIED
Date of Birth:	10 JUNE 1993
Place of Birth:	SEETANAPALLI, ANDHRA PRADESH, INDIA
Country/Region of Origin (Nationality):	INDIA
Do you hold or have you held any nationality other than the one indicated above on nationality?	NO
Are you a permanent resident of a country/region other than your country/region of origin (nationality) above?	NO
National Identification Number:	DOES NOT APPLY
U.S. Social Security Number:	657424170
U.S. Taxpayer ID Number:	DOES NOT APPLY
Home Address:	17300 NW 68 TH AVE

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City:	HIALEAH
State/Province:	FLORIDA
Postal Zone/ZIP Code:	33015
Country/Region:	UNITED STATES OF AMERICA
Same Mailing Address?	YES
Primary Phone Number:	9379299592
Secondary Phone Number:	DOES NOT APPLY
Work Phone Number:	DOES NOT APPLY
Do you have any additional phone numbers?	NO
Email Address:	SOMESWARAO10@GMAIL.COM
Do you have any additional email addresses?	NO
Do you have a social media presence?	
Social Media Platform: (1):	NONE
Social Media Identifier:	
Do you have any additional social media presence?	NO
Passport/Travel Document Type:	REGULAR
Passport/Travel Document Number:	W6119989
Passport Book Number:	DOES NOT APPLY
Country/Authority that Issued Passport/Travel Document:	UNITED STATES OF AMERICA
City Where Issued:	SANDY SPRINGS
State/Province Where Issued:	ATLANTA
Country/Region Where Issued:	UNITED STATES OF AMERICA
Issuance Date:	26 APRIL 2023
Expiration Date:	25 APRIL 2033
Have you ever lost a passport or had one stolen?	NO

Travel Information

The List of Purposes of Trip to the U.S.

Purpose of Trip to the U.S. (1):	TEMPORARY WORKER (H)
Specify:	SPECIALTY OCCUPATION (H1B)
Application Receipt/Petition Number:	IOE8613983931
Have you made specific travel plans?	NO
Intended Date of Arrival:	01 SEPTEMBER 2023
Intended Length of Stay in U.S.:	1 MONTH(S)
Address where you will stay in the U.S.:	17300 NW 68TH AVE
City, State, Postal/Zip Code:	HIALEAH, FLORIDA 33015
Person/Entity Paying for Your Trip:	SELF
Are there other persons traveling with you?	NO
Have you ever been in the U.S.?	YES
Date Arrived (1):	01 JANUARY 2022

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Length of Stay:	3 YEAR(S)
Do you or did you hold a U.S. Driver's License?	YES
Driver's License Number (1):	G515620932100
State of Driver's License:	FLORIDA
Have you ever been issued a U.S. Visa?	YES
Date Last Visa was Issued:	30 DECEMBER 2021
Visa Number:	R2186136
Are you applying for the same type of visa?	YES
Are you applying in the same country where the visa above is issued and is this country your principal country of residence?	YES
Have you been ten-printed?	YES
Has your U.S. Visa ever been lost or stolen?	NO
Has your U.S. Visa ever been cancelled or revoked?	NO
Have you ever been refused a U.S. Visa, or been refused admission to the United States, or withdrawn your application for admission at the port of entry?	NO
Has anyone ever filed an immigrant petition on your behalf with the United States Citizenship and Immigration Services?	YES
Explain:	I140 GOT APPROVED CASE NUMBER IOE8020106207

U.S. Contact Information

Contact Person Name in the U.S.:	SHARMA, VINDHYACHAL
Organization Name in the U.S.:	DO NOT KNOW
Relationship to You:	OTHER
U.S. Contact Address:	1394 SW 179TH TERRACE PEMBROKE PINES, FLORIDA 33029
Phone Number:	9544940465
Email Address:	vindhyachal.sh@hcl.com

Family Information

Father's Surnames:	GONABOYINA
Father's Given Names:	APPALA NARASAYYA
Father's Date of Birth:	10 AUGUST 1970
Is your father in the U.S.?	NO
Mother's Surnames:	GONABOYINA
Mother's Given Names:	LAKSHMI KUMARI
Mother's Date of Birth:	01 JUNE 1972
Is your mother in the U.S.?	NO
Do you have any immediate relatives, not including parents in the U.S.?	NO
Do you have any other relatives in the United States?	NO
Spouse's Full Name:	THURAGA, PURNADIVYA
Spouse's Date of Birth:	27 AUGUST 1987
Spouse's Country/Region of Origin (Nationality):	INDIA
Spouse's City of Birth:	MARKAPUR

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Spouse's Country/Region of Birth:

INDIA

Spouse's Address:

SAME AS HOME ADDRESS

Work/Education/Training Information

Primary Occupation:

COMPUTER SCIENCE

Present Employer or School Name:

HCL AMERICA INC

Address:

330 POTRERO AVE

City:

SUNNYVALE

State/Province:

CALIFORNIA

Postal Zone/Zip Code:

94085

Country/Region:

UNITED STATES OF AMERICA

Work Phone Number:

3058765547

Monthly Salary in Local Currency (if employed):

5350

Briefly Describe your Duties:

1. WORKS ON DAILY INCIDENTS 2. WORKS WITH BUSINESS TO RESOLVE THE ISSUE AND KEEP THE BUSINESS RUNNING. 3. WORKS ON THE CONFIGURATION CHANGES WHEN REQUIRED. 4. GATHERS INFORMATION FROM BUSINESS FOR NEW REQUIREMENTS. 5. WORKS ON THE ROOT CAUSE ANALYSIS TO FIND THE CAUSE OF THE ISSUE AND MOVES TO THE DEVELOPER QUEUE WHEN NEEDED. 6. PROVIDES GUIDANCE AND INSTRUCTIONS TO THE TEAM. 7. PROVIDES DAILY REPORT TO THE USERS AS PER THE BUSINESS ASK. 8. WORKS ON THE CHANGE REQUESTS TO RESOLVE THE ISSUES ONCE FOR ALL. 9. ATTENDS DAILY AND WEEKLY MEETINGS.

Were you previously employed?

YES

Employer Name (1):

SUMMITWORKS
TECHNOLOGIES INC

Employer Address:

50 CRAGWOOD RD

SUITE 301

City:

SOUTH PLAINFIELD

State/Province:

NJ

Postal Zone/Zip Code:

07080

Country/Region:

UNITED STATES OF
AMERICA

Telephone Number:

9084584161

Job Title:

SOFTWARE ENGINEER

Supervisor's Surname:

GAURAV

Supervisor's Given Name:

PRASHANT

Employment Date From:

27 OCTOBER 2016

Employment Date To:

17 JULY 2020

Briefly describe your duties:

1. ATTENDED DAILY MEETINGS FOR UPDATING THE DAIL

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TASKS. 2. GATHERED INFORMATION ABOUT NEW REQUIREMENTS FROM CLIENTS 3. WORKED ON DESIGNING THE NEW PAGES AND FEEL OF THE PAGE. 4. WROTE QUERIES, STORED PROCEDURES AND FUNCTIONS ON DATABASE. 5. IMPLEMENTED A LAYER TO CONNECT FRONT END UI AND DATABASE. 6. TESTING AND EVALUATING NEW PROGRAMS. 7. WRITING AND IMPLEMENTING EFFICIENT CODE. 8. TRAINING USER ABOUT THE NEW PROGRAMS

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

Name of Institution (1):	WRIGHT STATE UNIVERSITY
Address of Institution:	3640 COLONEL GLENN HWY
City:	DAYTON
State/Province:	OHIO
Postal Zone/ZIP Code:	45435
Country/Region:	UNITED STATES OF AMERICA
Course of Study:	ELECTRICAL AND ELECTRONICS ENGINEERING
Date of Attendance From:	08 JANUARY 2015
Date of Attendance To:	16 APRIL 2016
Name of Institution (2):	AMRITA SAI INSTITUTION OF SCIENCE AND TECHNOLOGY
Address of Institution:	GANI ATUKURU ROAD
	BATHINAPADU, PARITALA
City:	VIJAYAWADA
State/Province:	ANDHRA PRADESH
Postal Zone/ZIP Code:	521180
Country/Region:	INDIA
Course of Study:	ELECTRICAL AND ELECTRONICS ENGINEERING
Date of Attendance From:	10 JUNE 2010
Date of Attendance To:	25 APRIL 2014
Do you belong to a clan or tribe?	NO
Provide a List of Languages You Speak:	
Language Name (1):	ENGLISH
Language Name (2):	HINDI

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Language Name (3): TELUGU

Have you traveled to any countries/regions within the last five years? NO

Have you belonged to, contributed to, or worked for any professional, social, or charitable organization? NO

Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience? NO

Have you ever served in the military? NO

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? NO

Security and Background Information

Do you have a communicable disease of public health significance? (Communicable diseases of public significance include chancroid, gonorrhea, granuloma inguinale, infectious leprosy, lymphogranuloma venereum, infectious stage syphilis, active tuberculosis, and others diseases as determined by the Department of Health and Human Services.) 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? NO

Are you or have you ever been a drug abuser or addict? NO

Have you ever been arrested or convicted for any offense or crime, even though subject of a pardon, amnesty, or other similar action? NO

Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances? 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? NO

Have you ever been involved in, or do you seek to engage in, money laundering? NO

Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the United States? 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? NO

Have you knowingly aided, abetted, assisted or colluded with an individual who has committed or conspired to commit a severe human trafficking offense in the United States or outside the United States? NO

Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States? NO

Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities? NO

Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations? NO

Are you a member or representative of a terrorist organization? NO

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? NO

Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide? NO

Have you ever committed, ordered, incited, assisted, or otherwise participated in torture? NO

Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence? NO

Have you ever engaged in the recruitment or the use of the child soldiers? 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? NO

Have you ever been directly involved in the establishment or enforcement of the 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 will? NO

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Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue?	NO
Have you ever been the subject of a removal or deportation hearing?	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?	NO
Have you failed to attend a hearing on removability or inadmissibility within the last five years?	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?	NO
Have you ever been removed or deported from any country?	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?	NO
Have you voted in the United States in violation of any law or regulation?	NO
Have you ever renounced United States citizenship for the purpose of avoiding taxation?	NO
Are you a former exchange visitor (J) who has not yet fulfilled the two-year foreign residence requirement?	NO
Have you attended a public elementary school on student (F) status or a public secondary school after November 30, 1996 without reimbursing the school?	NO

Temporary Work Visa Information

Application Receipt/Petition Number:	IOE8613983931
Name of Person/Company who Filed Petition:	HCL AMERICA INC
Where Do You Intend to Work?	
Name of Employer:	HCL AMERICA INC
Street Address:	330 POTRERO AVE SUNNYVALE, CALIFORNIA 94085
Phone Number:	3058765547
Monthly Income (in USD):	\$5,350

Location Information

Location where you will be submitting your application	
Current Location:	HYDERABAD, INDIA

Preparer of Application

Did anyone assist you in filling out this application?	NO
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You electronically signed your application on 30-May-2023 02:24:34 (GMT-05:00). You were required to electronically sign your application yourself, unless otherwise exempt by regulation, even if the application was 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).

You certified that you understand that you are required to submit your visa to the United States Immigration Officer at the port where you apply to enter the United States, and that possession of the visa does not entitle you to enter the United States if, upon your arrival, you are found to be inadmissible under U.S. immigration laws. You certified that you understand that any willfully false or misleading statement or willful concealment of a material fact made by you within the application may subject you to permanent exclusion from the United States and, if you are admitted to the United States, may subject you to criminal prosecution and/or deportation.

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. 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). The photograph that you provide with your application may be used for employment verification or other U.S. law purposes.