


 [Print Page](#)

Deloitte USI Main Questionnaire (SOLE)

Please answer this questionnaire as completely as possible to ensure a prompt review. Please note that required fields/questions will be outlined in red and must be completed before you can submit the form for review.


Name Information

Prefix	Ms. 
Given Name	Anusha
Middle Name	--
Family Name	Konchada
Maiden Name	
Other Names Used, currently or in the past	

Contact Information

Primary Email Address	AKONCHADA@DELOITTE.
Alternate Email Address	anushakonchada@gmail.com
If you have a third email address, other than those listed here, please provide	
Office Phone	+1 615 7186798
Office Fax	+xxx (xxx) xxx-xxxx
Home Phone	+xxx (xxx) xxx-xxxx
Cell/Mobile	+1 623 215-5033

Biographical Information

Gender	Female 
Birth Date	6/5/1988
Birth City	Berhampur
Birth State/Province	Orissa

Birth Country	India
Marital Status	Single
U.S. Social Security #	181-31-8586
USCIS A-Number (if any)	

U.S. Home Address

This is the address in the U.S. where you are currently residing or will reside if currently living abroad.

Attn/Care of	Anusha Konchada
Street 1	9272 Deercross Parkway
Street 2	Apt 2D
City	Blue Ash
State/Province	Ohio
Zip/Postal Code	45236

Address Outside of the U.S.

Please note that if you currently reside in the United States, you may enter the address of a relative or friend living abroad.

Attn/Care of	Anusha Konchada
Street 1	B4-305, Indu Aranya Pallavi
Street 2	Near GSI,Bandlaguda,Nagol
City	Hyderabad
State/Province	Telangana
Zip/Postal Code	500068
Country	India


Citizenship

Country of Citizenship	India
Country of Citizenship 2 (if any)	(Select a Value)

If you have additional citizenships, please provide the details here.

Current Passport

Your name as it appears on your passport	ANUSHA KONCHADA
Full Name in Native Alphabet	

Passport Number	J0645424
Passport Issue Date	7/14/2020
Passport Expiration Date	7/13/2030
Country/Authority that Issued Passport	United States 

U.S. Status and I-94 Information (Existing Information on File at Seyfarth)

If you are in the U.S. and have provided us with a copy of your I-94/Visa in the past, the details we have on file should be displayed below. Please compare this information with your current I-94/Visa. If the information below is out of date, or if this is the first time you are providing us with I-94/Visa information, please complete the "Most Recent U.S. Status and I-94 Information" section below.

U.S. Immigration Status indicated on I-94	H-1B 
Status Expiration Date	5/9/2021
Duration of Status	<input type="checkbox"/>
I-94 Number	242367822 56
Date of last entry into U.S.	8/7/2018
Place of last entry into the U.S. (City, State)	

Updates to U.S. Immigration Status and I-94 Information

If you are currently in the U.S., does the information above reflect your current immigration status and the most recently issued I-94, whether attached to a USCIS Approval Notice, or issued to you at the Border, or as obtained from the CBP Portal regarding your most recent Border Crossing? If the information shown above for your current I-94 is incomplete, inaccurate, or blank - or does not accurately reflect your current status in the U.S. - please select "No" and provide updated details here regarding your Current Status in the U.S. and the most recent I-94 provided to you. Please also be sure to submit a copy of that I-94 in the documents you submit to us. If no, please provide updated details. If you are not currently in the U.S. or your Destination Country is not the U.S., please note that in the Comments and select Yes/No as appropriate based on the information displayed above.

<input type="radio"/> Yes	Date of last entry is 8th May 2018. Refer attached I-94 document And the status expiration date: 04/29/2021
<input checked="" type="radio"/> No	





History of Visits/Stays to the U.S.

From	To	Visa Type	Purpose of Visit
7/3/2016	1/15/2017	H1-B	Client Work
3/17/2017	4/22/2018	H1-B	Client work
5/8/2018	mm/dd/yyyy	H1-B	Client work
mm/dd/yyyy	mm/dd/yyyy		

If you have additional visit/stay information, please provide the details here.

--

Education History

Degree/Certificate	Major	Institute	From	To
Bachelor of Engineering 	Information Technolo	Chaitanya Bharathi Institute	8/28/2006	7/14/2010
(Select a Value) 			mm/dd/yyyy	mm/dd/yyyy
(Select a Value) 			mm/dd/yyyy	mm/dd/yyyy
(Select a Value) 			mm/dd/yyyy	mm/dd/yyyy

Please list all post-secondary educational institutions attended, beginning with the highest degree obtained. Please include exact dates of enrollment, and field of study.

--

General Employment

Please review the following details concerning your employment with your Deloitte U.S. Firm.

Have you ever traveled to the U.S. for Deloitte in any status other than B-1 Visitor?

☐ Yes
☒ No

If Yes, please provide details re: previous visa classification and assignment dates/duration.

--

USI Employer in India

Deloitte Consulting

Original Start Date at Deloitte U.S. Firm

6/22/2010

PID/Personnel ID
Please enter Global (U.S.) ID if currently or previously in U.S. Otherwise, please enter the USI (India) ID.
If not started at Deloitte yet, and if you have not received your PID or your RMS# is not already listed here, please enter "RMS#notprovided"

301582

U.S. Destination Employer

Deloitte USI CONSULTING -

Business

Consulting

Business Area

Core Business Operations

Business Line	Systems Engineering
Primary Market Offering	
If anything above is inaccurate or incomplete re: your proposed/ongoing assignment, please provide details here.	
Deloitte U.S. office assignment	Deloitte - PA - Philadelphia-M
Additional Deloitte U.S. Offices: If you will need to work at an office other than your assigned Deloitte office listed above, or if the above office is incorrect, please provide details here.	
If no additional Deloitte U.S. Offices and if the office assignment listed above is correct, please enter "N/A - only Deloitte Office listed above"	
Deloitte offices: 250 E 5th St #1900, Cincinnati, OH 45202 One PPG Place Suite 2600, Pittsburgh, PA 15222	
For each additional Deloitte U.S. office you list above, please be sure to include the anticipated start and end dates of your deployment to that location.	
Client or other non-Deloitte U.S. Office worksites: If you already know that you will need to work at a location other than the Deloitte U.S. office(s) listed above, please provide details here including the full address of each additional worksite, with what company it is associated and the relationship to Deloitte.	
If no client or other non-Deloitte U.S. Office worksites, please enter "N/A"	
new client (Highmark): 120 Fifth Ave, Pittsburgh, PA 15222	
Current Home address: 9272 Deercross	
For each additional client or other non-Deloitte U.S. office worksite you list above, please be sure to include the anticipated start and end dates of your deployment to that location.	
Target assignment dates (if you have noted multiple new worksites above, please list earliest here.)	
project start date: 31 Aug 2020 project end date: 30 June 2022	


U.S. Assignment Job Details

Please provide the following details concerning your proposed/ongoing assignment duties with your Deloitte U.S. Firm.	
Job Title	Senior Consultant
If already in the US, please provide annual compensation in USD. In the documents submitted to Seyfarth, please also provide your Talent on Demand Total Rewards Compensation Summary, evidencing this salary.	105910.00
Rate is Per:	Annually

Detailed Job Description (5-6 sentences)	1.Participate in user stories grooming sessions to gather the understanding of requirement in detail and keep track of scope or requirement change during sprint
If part-time, average hours worked per week	N/A
Proposed Start Date at Deloitte U.S. Firm	6/22/2010
Supervisor Full Name	Senthil Subbiah
Supervisor Email	ssubbiah@deloitte.com
Supervisor Phone	
Resource Manager Full Name	Mishra, Anishok
Resource Manager Email Address	anishomishra@deloitte.com
Immigration Champion/Single Point of Contact (SPOC) Full Name	Prabhakar Podugu
Immigration Champion/Single Point of Contact (SPOC) Email Address	ppodugu@deloitte.com

Current Job


Please provide/review the following details concerning your current job (not the job that you will hold once your assignment begins.)

Job Title	QA Lead
Detailed Job Description (5-6 sentences)	1.Responsible for understanding of requirement in detail and develop detailed test plan aligned with the overarching Release level objectives- results during
If part-time, average hours worked per week	N/A
Salary	105910.0000
Rate is Per:	Year 
Start Date	4/30/2018
Employer Name	Deloitte USI CONSULTING -
Supervisor Full Name	
Supervisor Phone	
Supervisor E-mail	
Job Address is the exact location where you work, not the Employer's Headquarters address.	
Street 1	1700 Market Street
Street 2	
City	Philadelphia
State/Province	Pennsylvania

Zip/Postal Code	19103-3984
Country	United States 


Please ensure Employment History section below is complete. This information is especially critical for L-1 Applicants. Please provide us with a breakdown of your employment history at any Deloitte Entity/Member Firm.

Employment History: Previous Job #1


Previous Job History (This is not information about your current or an intended US assignment).	
Start Date	mm/dd/yyyy
End Date	mm/dd/yyyy
Salary	105910.0000
Job Title	XIN-DC Senior Consultant
Detailed Job Description (5-6 sentences)	
Employer Name	Deloitte USI CONSULTING -
Job Address is the exact location where you worked for your previous job, not the Employer's Headquarters address.	
Street 1	1700 Market St
Street 2	
City	Philadelphia
State/Province	Pennsylvania
Zip/Postal Code	19103-3984
Country	United States 

Employment History: Previous Job #2

Previous Job History (This is not information about your current or an intended US assignment).	
Start Date	mm/dd/yyyy
End Date	mm/dd/yyyy
Salary	
Job Title	
Detailed Job Description (5-6 sentences)	
Employer Name	
Job Address is the exact location where you worked for your previous job, not the Employer's Headquarters address.	
Street 1	
Street 2	


City	<input type="text"/>
State/Province	<input type="text"/>
Zip/Postal Code	<input type="text"/>
Country	(Select a Value) 

Employment History: Previous Job #3

Previous Job History (This is not information about your current or an intended US assignment).	
Start Date	<input type="text" value="mm/dd/yyyy"/>
End Date	<input type="text" value="mm/dd/yyyy"/>
Salary	<input type="text"/>
Job Title	<input type="text"/>
Detailed Job Description (5-6 sentences)	<div><div></div></div>
Employer Name	<input type="text"/>
Job Address is the exact location where you worked for your previous job, not the Employer's Headquarters address.	
Street 1	<input type="text"/>
Street 2	<input type="text"/>
City	<input type="text"/>
State/Province	<input type="text"/>
Zip/Postal Code	<input type="text"/>
Country	(Select a Value) 







Employment History: Previous Job #4

Previous Job History (This is not information about your current or an intended US assignment).	
Start Date	<input type="text" value="mm/dd/yyyy"/>
End Date	<input type="text" value="mm/dd/yyyy"/>
Salary	<input type="text"/>
Job Title	<input type="text"/>
Detailed Job Description (5-6 sentences)	<div><div></div></div>
Employer Name	<input type="text"/>
Job Address is the exact location where you worked for your previous job, not the Employer's Headquarters address.	
Street 1	<input type="text"/>
Street 2	<input type="text"/>

City	<input type="text"/>
State/Province	<input type="text"/>
Zip/Postal Code	<input type="text"/>
Country	(Select a Value) 







If not listed above, please provide the same information concerning your most recent employment outside the U.S.

Current Spouse (if not applicable, please leave all fields blank)






Given Name	<input type="text"/>
Middle Name	<input type="text"/>
Family Name	<input type="text"/>
Maiden Name	<input type="text"/>
Marital Status	(Select a Value) 
Birth Date	<input type="text" value="mm/dd/yyyy"/>
Gender	(Select a Value) 
Birth City	<input type="text"/>
Birth State/Province	<input type="text"/>
Birth Country	(Select a Value) 
Country of Citizenship	(Select a Value) 
Passport Number	<input type="text"/>
Country where passport was issued	(Select a Value) 
Passport Expiration Date	<input type="text" value="mm/dd/yyyy"/>
U.S. Social Security #	<input type="text"/>
USCIS A-Number (if any)	<input type="text"/>
Current U.S. Immigration Status	(Select a Value) 
Status Expiration Date	<input type="text" value="mm/dd/yyyy"/>
I-94 Number	<input type="text"/>
Date of last entry to the U.S.	<input type="text" value="mm/dd/yyyy"/>


Child #1 (if not applicable, please leave all fields blank)

Given Name	<input type="text"/>
Middle Name	<input type="text"/>







Family Name	<input type="text"/>
Maiden Name	<input type="text"/>
Marital Status	(Select a Value) 
Birth Date	<input type="text" value="mm/dd/yyyy"/>
Gender	(Select a Value) 
Birth City	<input type="text"/>
Birth State/Province	<input type="text"/>
Birth Country	(Select a Value) 
Country of Citizenship	(Select a Value) 
Passport Number	<input type="text"/>
Country where passport was issued	(Select a Value) 
Passport Expiration Date	<input type="text" value="mm/dd/yyyy"/>
U.S. Social Security #	<input type="text"/>
USCIS A-Number (if any)	<input type="text"/>
Current U.S. Immigration Status	(Select a Value) 
Status Expiration Date	<input type="text" value="mm/dd/yyyy"/>
I-94 Number	<input type="text"/>
Date of last entry to the U.S.	<input type="text" value="mm/dd/yyyy"/>

Child #2 (if not applicable, please leave all fields blank)

Given Name	<input type="text"/>
Middle Name	<input type="text"/>
Family Name	<input type="text"/>
Maiden Name	<input type="text"/>
Marital Status	(Select a Value) 
Birth Date	<input type="text" value="mm/dd/yyyy"/>
Gender	(Select a Value) 
Birth City	<input type="text"/>
Birth State/Province	<input type="text"/>
Birth Country	(Select a Value) 
Country of Citizenship	(Select a Value) 
Passport Number	<input type="text"/>
Country where passport was issued	(Select a Value) 







Passport Expiration Date	<input type="text" value="mm/dd/yyyy"/>
U.S. Social Security #	<input type="text"/>
USCIS A-Number (if any)	<input type="text"/>
Current U.S. Immigration Status	(Select a Value) 
Status Expiration Date	<input type="text" value="mm/dd/yyyy"/>
I-94 Number	<input type="text"/>
Date of last entry to the U.S.	<input type="text" value="mm/dd/yyyy"/>

Child #3 (if not applicable, please leave all fields blank)

Given Name	<input type="text"/>
Middle Name	<input type="text"/>
Family Name	<input type="text"/>
Maiden Name	<input type="text"/>
Marital Status	(Select a Value) 
Birth Date	<input type="text" value="mm/dd/yyyy"/>
Gender	(Select a Value) 
Birth City	<input type="text"/>
Birth State/Province	<input type="text"/>
Birth Country	(Select a Value) 
Country of Citizenship	(Select a Value) 
Passport Number	<input type="text"/>
Country where passport was issued	(Select a Value) 
Passport Expiration Date	<input type="text" value="mm/dd/yyyy"/>
U.S. Social Security #	<input type="text"/>
USCIS A-Number (if any)	<input type="text"/>
Current U.S. Immigration Status	(Select a Value) 
Status Expiration Date	<input type="text" value="mm/dd/yyyy"/>
I-94 Number	<input type="text"/>
Date of last entry to the U.S.	<input type="text" value="mm/dd/yyyy"/>

Child #4 (if not applicable, please leave all fields blank)

Given Name	<input type="text"/>
Middle Name	<input type="text"/>
	<input type="text"/>

Family Name	<input type="text"/>
Maiden Name	<input type="text"/>
Marital Status	(Select a Value) 
Birth Date	<input type="text" value="mm/dd/yyyy"/>
Gender	(Select a Value) 
Birth City	<input type="text"/>
Birth State/Province	<input type="text"/>
Birth Country	(Select a Value) 
Country of Citizenship	(Select a Value) 
Passport Number	<input type="text"/>
Country where passport was issued	(Select a Value) 
Passport Expiration Date	<input type="text" value="mm/dd/yyyy"/>
U.S. Social Security #	<input type="text"/>
USCIS A-Number (if any)	<input type="text"/>
Current U.S. Immigration Status	(Select a Value) 
Status Expiration Date	<input type="text" value="mm/dd/yyyy"/>
I-94 Number	<input type="text"/>
Date of last entry to the U.S.	<input type="text" value="mm/dd/yyyy"/>

Planning Questions

Please answer the following questions truthfully and completely.

Do you have any upcoming travel plans? If so, please provide the dates of expected travel and destination (city/country).

☐ Yes
☒ No

I am currently in the USA and haven't had a chance to travel back to India. Although there are no immediate plans to visit home but there might be depending on the

Will your family (spouse/children) be included in your nonimmigrant petition/application?

☐ Yes
☒ No

If no, please explain (ex: Will remain outside of the U.S., or Has own H-1B work authorization)

N/A (Don't have spouse/ children)

Will you and/or your family be applying for a nonimmigrant visa stamp? If so, please provide the U.S. Embassy/Consulate location (city/country) where you intend to apply. If you are a

☐ Yes
☒ No

Canadian citizen, please confirm the Preflight Inspection Station or Land Crossing.

Immigration Questions

You must answer these questions in order to submit this questionnaire for review.

Please answer the following questions truthfully and completely.

Have you and/or any of your family members ever violated your immigration status? If yes, please explain.

☐ Yes
☒ No

Have you ever been in J-1 or J-2 non-immigrant status, or been issued a J visa stamp? If so, please provide the nature of your J-1 program and indicate whether you received government funding either from your home country or from the U.S. government. Also, please indicate whether you were subject to the two-year home residence requirement and if so, whether you have fulfilled that requirement or obtained a waiver.

☐ Yes
☒ No

Have you ever been arrested, charged, indicted, convicted, fined or imprisoned for any criminal offense (not counting traffic violations)? Note: If a conviction was later pardoned, you should answer "yes" to this question and provide an explanation. Also, if you have any criminal issues or arrests for severe traffic violations (such as driving under the influence/drunken driving), you should also answer "yes" to this question and provide an explanation. If yes, please provide details.

☐ Yes
☒ No

Have you and/or any family member ever been denied an application for a U.S. visa or U.S. entry? If yes, please explain.

☐ Yes
☒ No

Have you filed or has anyone ever filed on your behalf a visa petition or application for permanent residence

☐ Yes
☒ No

(Green Card) status for you and/or your family (including labor certification, I-140 or I-130 immigrant petition, or I-485 Adjustment of Status)? If yes, please give the date and place of filing and final disposition.

Have you and/or any family members been employed since your last entry into the U.S.? If yes, please provide the employer name and basis for work authorization (visa type, EAD, etc.)

☐ Yes
☒ No

Have you and/or any dependent family members accepted any unauthorized employment since last being admitted in your current status? If yes, please provide details.

☐ Yes
☒ No

Are you and/or any family members in exclusion/deportation proceedings?

☐ Yes
☒ No

Have you ever received public assistance in the U.S. from any government source?

☐ Yes
☒ No

Have you ever claimed to be a United States citizen for any reason?

☐ Yes
☒ No

Have you ever used fraud or misrepresentation to procure a visa, entry to the U.S., or any other immigration benefit?

☐ Yes
☒ No

Have you ever left the United States to avoid being drafted into the U.S. Armed Forces?

☐ Yes
☒ No

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

☐ Yes
☒ No

Is there any additional information relevant to your immigration petition? If yes, please explain.

☐ Yes
☒ No

IMPORTANT INFORMATION ABOUT SEYFARTH'S REPRESENTATION OF YOUR EMPLOYER AND ABOUT THE INFORMATION THAT YOU GIVE TO SEYFARTH

Disclosure of Sole Legal Representation of Employer

In this immigration matter, Seyfarth Shaw LLP ("Seyfarth") solely represents and serves as attorneys for your current or future employer and does not represent or serve as your own or your family's personal immigration attorneys. This type of legal representation for one party only is called "sole representation" and is intended for the benefit of your employer based on the company's legitimate business interest in employing or continuing to employ you as a foreign citizen who requires employment authorization in the United States. As lawyers for your employer only and not for you or your family, Seyfarth will disclose to your employer all material information relating to your immigration matter, even if such information is confidential to you or your family (meaning that any information or documents relating to this immigration matter that you or your family members disclose or provide to Seyfarth must and will be provided to your employer). For example, if you are no longer authorized to work, Seyfarth would be required to inform your employer of the legal consequences of continued employment, or, if you disclosed the intention to resign from employment, Seyfarth is required to, and would, disclose that fact to your employer.

In the event that the employment relationship is terminated or materially changed by either your employer or you, you understand and agree that (a) the law may impose legal obligations on your employer and Seyfarth as counsel to your employer to make disclosures of the relevant circumstances to one or more U.S. federal or state government agencies, (b) the law may create opportunities to preserve for your employer certain immigration-related benefits based on applications or petitions initially submitted on your behalf, and (c) Seyfarth would continue to solely represent your employer in fulfilling such legal obligations or securing such immigration-related benefits, even if those actions may be contrary to your or your family members' wishes or interests. In summary, in the sole representation context, Seyfarth is obligated to advise your employer of what is in your employer's best interests -- even if that may not be in the best interests of you or your family members.

Your Waiver of Legal Representation

By clicking "I accept" below, you agree that Seyfarth only represents your employer in connection with your own and your family members' immigration matters and that Seyfarth does not, and will not, represent you or your family. The benefit that you and your family members may enjoy by reason of Seyfarth's representation of your employer is merely an incidental consequence, in the nature of an employee fringe benefit, of Seyfarth's representation of your employer and is not intended to create, and does not create, an attorney-client relationship between or among Seyfarth and you or your family members.

By clicking "I accept" below, you agree for yourself and for your family members to sole representation between Seyfarth and your employer, and you acknowledge and consent on your own behalf and on behalf of each member of your family that any sensitive personal or employment-related information provided to Seyfarth in this questionnaire, and any paper or digital documents you send to Seyfarth now or in the future, may be accessed by Seyfarth or by its third-party service-providers (who abide by security precautions comparable to those we impose upon ourselves) for the purpose of helping you and your family achieve your employer's immigration-related objectives. You also acknowledge and agree that mere payment of attorneys' fees or costs does not cause the person(s) making payment to become a client of a particular attorney or law firm receiving payment. Moreover, in the course of providing legal services solely to your employer, Seyfarth will likely be required to prepare and file one or more Forms G-28 (Notice of Appearance of Attorney) for submission to various government agencies, and you and/or your family members will be asked to cooperate by signing such form and consenting to the disclosure by the government of information bearing on any application or petition or immigration matter involving your family members or you. You acknowledge and agree that such consent will not create

an attorney/client relationship between Seyfarth and you and your family members.

In order to accomplish your employer's objective of obtaining immigration-related legal benefits for your employer, you agree to maintain the confidentiality of information. You also agree that you and your family members shall not disclose such information to any outside third parties (other than for purpose of facilitating your employer's objectives and interests with respect to your immigration matter, e.g., by cooperating in an effort to obtain a credentials evaluation or a work-experience evaluation or employment verification letter, and by verifying the accuracy of and signing application or petition forms for submission to various federal or state government agencies).

Importance of Promptly Providing Information and Documents Requested by Seyfarth

The attorneys' fee for this immigration matter is based on the assumption that you and your employer will furnish accurate and truthful information and documentation, in a timely and efficient manner, as requested by Seyfarth in order to prepare your case. If it is necessary to perform work that is considered outside the scope of these case parameters, extra fees and charges may be incurred. Moreover, even though we file Forms G-28 with respect to immigration matters, government agencies may fail to send to us a copy of the case correspondence or decision. To ensure that the case is handled appropriately and in a timely manner, you agree to send to us a copy of any communication you receive from a government agency relating to the immigration matter that we are handling for your employer.

Importance of Truthful and Accurate Information and Documents Provided to Seyfarth

The information that we provide to the United States government agencies in this immigration matter is based on the information and documentation that you provide to us. Applicable laws may impose civil or criminal penalties on persons who directly or indirectly knowingly provide false, fraudulent or misleading information or who willfully fail to provide material information that under law must be disclosed.

Consent to Seyfarth to access CBP I-94 Record and/or Travel History Information

By clicking "I accept" I grant permission to Seyfarth (including its authorized agents) to access my I-94 record and/or travel history from the Customs and Border Protection (CBP) website. I also provide this consent on behalf of any immediate family members (i.e. spouse and/or children). Even though I am providing this consent, I understand that it remains my obligation to retrieve my I-94 record after each entry to the U.S., confirm that my I-94 record reflects the correct visa classification and the maximum period of authorized stay, and notify Seyfarth of any admission errors or discrepancies. I also understand that I am similarly obligated to retrieve and confirm the I-94 information for each member of my family and notify Seyfarth of any admission errors or discrepancies. In providing this consent, I am in no way giving up my responsibility to provide accurate information to Seyfarth.

Consent to Seyfarth's Sole Legal Representation as Attorneys for My Employer

By clicking "I accept," I consent, on my own behalf and that of my family members, and so certify to Seyfarth, that in this immigration matter: (1) Seyfarth's legal representation is solely as attorneys of and for my employer; (2) Seyfarth is not the lawyer for my family members or for me; (3) my family and I are always free to seek the advice of an attorney or attorneys of my/our choice in any immigration-related matter at my/our sole expense; (4) any legal advice that may be communicated by Seyfarth to my employer of which I and/or my family members become aware is communicated to me with the consent of my employer and without waiver of the attorney-client privilege solely in my capacity as an employee representative of my employer and not as a client of Seyfarth; and (5) that all of the information and

documentation my family members and I will provide to Seyfarth in connection with my immigration matter are truthful, accurate and complete and, to the extent such information changes materially, my family members and I will provide updated information to Seyfarth. I understand that if I do not click "I accept" then no data will be submitted to Seyfarth and I will need to confer with my employer in order to move forward in this immigration matter.

☐ **I Accept**



[Print Page](#)

[Submit changes for review](#) [Save and continue later](#)

Upon clicking the SUBMIT or SAVE links above, please wait for the form to process and to display the "Thank you" banner prior to leaving the page or closing the browser window. Once the "Thank You" has been displayed, do not continue to edit the form in this window. Please instead close the questionnaire and reopen it when you are ready to continue working on a saved questionnaire or to submit a new questionnaire.

11/4/2020 9:28:59 PM

