

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)

Alien Registration Number (A-Number) Country of Birth

► A-

Province of Birth

Country of Citizenship or Nationality

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

Date of Last Arrival (mm/dd/yyyy)

I-94 Arrival-Departure Record Number

►

Passport or Travel Document Number

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

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

Passport or Travel Document Country of Issuance

Current Nonimmigrant Status

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

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

Employment Authorization Document (EAD) Number (if any)

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

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

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)

c. U.S. State or Foreign Country

d. Beneficiary's Foreign Address

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

Province

Postal Code

Country

- 2.** Does each person in this petition have a valid passport? ☐ Yes ☐ No. If no, go to **Part 9.** and type or print your explanation.

