

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

MARTINEZ VASQUEZ, GUSTAVO ABIMELEC Name Provided: Full Name in Native Language: GUSTAVO ABIMELEC MARTINEZ VASQUEZ NO

Other Names Used: NO Telecode Name Used: Sex: MALE Marital Status: SINGLE

Date of Birth: 17 APRIL 1998 Place of Birth: TEGUCIGALPA, FRANCISCO MORAZAN, HONDURAS

Country/Region of Origin (Nationality): **HONDURAS**

NO

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

Are you a permanent resident of a country/region other than your

NO country/region of origin (nationality) above?

0801199808518 National Identification Number: U.S. Social Security Number: DOES NOT APPLY U.S. Taxpayer ID Number: DOES NOT APPLY

Home Address: COLONIA LOMAS DEL RIO, BLOQUE N CASA 15

COMAYAGUA City: COMAYAGUA State/Province:

Postal Zone/ZIP Code: 12101 **HONDURAS** Country/Region: YES Same Mailing Address?

Primary Phone Number: 88070455 Secondary Phone Number: DOES NOT APPLY

33310252 Work Phone Number: Do you have any additional phone numbers?

gustavomv9802@gmail.com Email Address:

Do you have any additional email addresses? NO

Do you have a social media presence?

Social Media Platform: (1): **FACEBOOK**

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NO

TEGUCIGALPA

Social Media Identifier: TAVO MARTINEZ

Do you have any additional social media presence?

Passport/Travel Document Type: REGULAR
Passport/Travel Document Number: G292973
Passport Book Number: G292973
Country/Authority that Issued Passport/Travel Document: HONDURAS

State/Province Where Issued: FRANCISCO MORAZAN

Country/Region Where Issued: HONDURAS

Issuance Date:29 JANUARY 2020Expiration Date:29 JANUARY 2030

Have you ever lost a passport or had one stolen?

Travel Information

City Where Issued:

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

Purpose of Trip to the U.S. (1): TEMP. BUSINESS PLEASURE VISITOR (B)

Specify: BUSINESS & TOURISM (TEMPORARY VISITOR) (B1/B2)

Have you made specific travel plans?

Intended Date of Arrival: 01 NOVEMBER 2022

Intended Length of Stay in U.S.: 15 DAY(S)

Address where you will stay in the U.S.: 1535 MARIPOSA WAY

Person/Entity Paying for Your Trip:

Are there other persons traveling with you?

NO

Have you ever been in the U.S.?

NO

Have you ever been issued a U.S. visa?

NO

Have you ever been refused a U.S. visa or been refused admission to

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?

Has anyone ever filed an immigrant petition on your behalf with the

United States Citizenship and Immigration Services?

NO

U.S. Contact Information

Contact Person Name in the U.S.: RODRIGUEZ CANALES, KEVIN GREYBIN

Organization Name in the U.S.: DO NOT KNOW Relationship to You: RELATIVE

U.S. Contact Address: 1535 MARIPOSA WAY

FAIRFIELD, CALIFORNIA 94533

Phone Number: 17072080850
Email Address: DOES NOT APPLY

Family Information

Father's Surnames: MARTINEZ ALVAREZ
Father's Given Names: LUIS GUSTAVO
Father's Date of Birth: DO NOT KNOW

Is your father in the U.S.?

Mother's Surnames: VASQUEZ MARTINEZ

Mother's Given Names: NORMA LETICIA

Mother's Date of Birth: DO NOT KNOW

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? Work/Education/Training Information

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YES

Work Phone Number:

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Primary Occupation: BUSINESS

Present Employer or School Name: COMERCIAL EDMAR

Address: BARRIO SANTA LUCIA

City: COMAYAGUA
State/Province: COMAYAGUA
Postal Zone/Zip Code: 12101
Country/Region: HONDURAS

Monthly Salary in Local Currency (if employed): DOES NOT APPLY

Briefly Describe your Duties: CONTRATISTA, TIENE PERSONAL A

SU CARGO PARA DESCARGAR PRODUC TOS DE EMPRESAS DE ALIMENTOS.

Were you previously employed? YES

Employer Name (1): EMBOTELLADORA LA REYNA

Employer Address:

BOULEVARD CUARTO CENTENARIO, FRENTE A

CLINICA FAMILIAR

33310252

City: COMAYAGUA
State/Province: COMAYAGUA
Postal Zone/Zip Code: 12101
Country/Region: HONDURAS

Telephone Number: 27722313

Job Title: DEPENDIENTE

Supervisor's Surname: DO NOT KNOW

Supervisor's Given Name: DO NOT KNOW

Employment Date From: 27 FEBRUARY 2017

Employment Date To: 27 APRIL 2017

Briefly describe your duties:

DEPENDIENTE, ENTREGA DE FACTUR
AS Y PRODUCTO A LOS CLIENTES.

Have you attended any educational institutions at a secondary level or

above?

Name of Institution (1): INSTITUTO DEPARTAMENTAL LEON ALVARADO

Address of Institution: BOULEVARD CUARTO CENTENARIO

City: COMAYAGUA
State/Province: COMAYAGUA
Postal Zone/ZIP Code: 12101
Country/Region: HONDURAS

Course of Study: BACHILLERATO TECNICO PROFESIONAL EN INFORMATICA

Date of Attendance From: FEBRUARY 2013

Date of Attendance To: 25 NOVEMBER 2015

Do you belong to a clan or tribe?

Provide a List of Languages You Speak:

Language Name (1): SPANISH
Have you traveled to any countries/regions within the last five years? NO

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

Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience?

Have you ever served in the military?

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?

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Security and Background Information

Do you have a communicable disease of public health significance? (Communicable diseases of public significance include chancroid, NO 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.) 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 NO or procuring prostitutes within the past 10 years? NO Have you ever been involved in, or do you seek to engage in, money laundering? 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 NO United States or outside the United States and have you within the last five years, knowingly benefited from the trafficking activities? Have you knowingly aided, abetted, assisted or colluded with an individual who has committed or conspired to commit a severe human NO trafficking offense in the United States or outside the United States? 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 NO Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations? 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 NO other support to terrorists or terrorist organizations, in the last five years? Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide? NO NO Have you ever committed, ordered, incited, assisted, or otherwise participated in torture? Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of NO violence? Have you ever engaged in the recruitment or the use of the child soldiers? NΩ Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of NO religious freedom? Have you ever been directly involved in the establishment or enforcement of the population controls forcing a woman to undergo an NO abortion against her free choice or a man or a woman to undergo sterilization against his or her free will? Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue? 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 NO benefit by fraud or willful misrepresentation or other unlawful means? 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

Location Information

Location where you will be submitting your application

Current Location: TEGUCIGALPA, HONDURAS

Preparer of Application

City:

Did anyone assist you in filling out this application?

Preparer Names: DOES NOT APPLY
Organization Name: USA SOLUTIONS

Street Address: BARRIO SAN FRANCISCO, ESQUINA OPUESTA AL

BANCO POPULAR
COMAYAGUA

State/Province: COMAYAGUA
Postal Zone/ZIP Code: 12101
Country/Region: HONDURAS

Relationship to You: AGENT

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You electronically signed your application on 13-Jul-2022 02:07:46 (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.