



## 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:



## Your Personal Copy -- Do Not Bring to Interview

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

|  |  |
|--|--|
| Name Provided:   | PAVON REYES, MARVIN HERNAN                     |
| Full Name in Native Language:  | MARVIN HERNAN PAVON REYES                      |
| Other Names Used:  | NO   |
| Telecode Name Used:  | NO   |
| Sex:   | MALE   |
| Marital Status:  | MARRIED  |
| Date of Birth:   | 05 APRIL 1988                                  |
| Place of Birth:  | TEGUCIGALPA, FRANCISCO MORAZAN, HONDURAS       |
| Country/Region of Origin (Nationality):  | HONDURAS                                       |
| 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:  | 0801198813978                                  |
| U.S. Social Security Number:   | DOES NOT APPLY                                 |
| U.S. Taxpayer ID Number:   | DOES NOT APPLY                                 |
| Home Address:  | LA GUADALUPE CARRETERA HACIA EL VOLCAN<br>KM 3 |
| City:  | COMAYAGUA                                      |
| State/Province:  | COMAYAGUA                                      |
| Postal Zone/ZIP Code:  | 12101  |
| Country/Region:  | HONDURAS                                       |
| Same Mailing Address?  | YES  |
| Primary Phone Number:  | 98657019                                       |
| Secondary Phone Number:  | 96600890                                       |
| Work Phone Number:   | 27722538                                       |
| Do you have any additional phone numbers?  | NO   |
| Email Address:   | marvinpavon22@gmail.com                        |
| Do you have any additional email addresses?  | NO   |
| Do you have a social media presence?   |  |

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|   |                    |
|---|--------------------|
| Social Media Platform: (1):                             | FACEBOOK           |
| Social Media Identifier:                                | MARVIN PAVON REYES |
| Do you have any additional social media presence?       | NO                 |
| Passport/Travel Document Type:                          | REGULAR            |
| Passport/Travel Document Number:                        | G492240            |
| Passport Book Number:                                   | G492240            |
| Country/Authority that Issued Passport/Travel Document: | HONDURAS           |
| City Where Issued:                                      | TEGUCIGALPA        |
| State/Province Where Issued:                            | FRANCISCO MORAZAN  |
| Country/Region Where Issued:                            | HONDURAS           |
| Issuance Date:  | 08 MARCH 2021      |
| Expiration Date:  | 08 MARCH 2031      |
| 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):  | TEMP. BUSINESS PLEASURE VISITOR (B)            |
| Specify:  | BUSINESS & TOURISM (TEMPORARY VISITOR) (B1/B2) |
| Have you made specific travel plans?  | NO   |
| Intended Date of Arrival:   | 01 NOVEMBER 2022                               |
| Intended Length of Stay in U.S.:  | 1 WEEK(S)                                      |
| Address where you will stay in the U.S.:  | 85 MADISON STREET                              |
| Person/Entity Paying for Your Trip:   | SELF   |
| Are there other persons traveling with you?   | YES  |
| Are you traveling as part of a group or organization?   | YES  |
| Name of the Group:  | FAMILIAR VACATION                              |
| Have you ever been in the U.S.?   | YES  |
| Date Arrived (1):   | JANUARY 2007                                   |
| Length of Stay:   | 2 YEAR(S)                                      |
| Do you or did you hold a U.S. Driver's License?   | 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 the United States, or withdrawn your application for admission at the port of entry? | YES  |
| Explain:  | 2012, BUT TOLD I COULD APPLY I<br>N THE FUTURE |
| 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.: | ALVARADO, LUIS                               |
| Organization Name in the U.S.:   | DO NOT KNOW                                  |
| Relationship to You:             | RELATIVE                                     |
| U.S. Contact Address:            | 85 MADISON STREET<br>DOVER, NEW JERSEY 07801 |
| Phone Number:                    | 9737967680                                   |
| Email Address:                   | DOES NOT APPLY                               |

### Family Information

|                         |                |
|-------------------------|----------------|
| Father's Surnames:      | REYES          |
| Father's Given Names:   | HERNAN PAVON   |
| Father's Date of Birth: | 02 AUGUST 1955 |

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|   |                               |
|---|-------------------------------|
| Is your father in the U.S.?   | NO                            |
| Mother's Surnames:  | REYES LOPEZ                   |
| Mother's Given Names:   | SILA LIDIA                    |
| Mother's Date of Birth:   | 02 AUGUST 1958                |
| 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?                   | YES                           |
| Spouse's Full Name:   | CASTRO PINEDA, DENIA GABRIELA |
| Spouse's Date of Birth:   | 06 JUNE 1988                  |
| Spouse's Country/Region of Origin (Nationality):                        | HONDURAS                      |
| Spouse's City of Birth:   | SANTA CRUZ DE YOJOA           |
| Spouse's Country/Region of Birth:                                       | HONDURAS                      |
| Spouse's Address:   | SAME AS HOME ADDRESS          |

### Work/Education/Training Information

|   |  |
|---|--|
| Primary Occupation:                             | BUSINESS   |
| Present Employer or School Name:                | IMPORTADORA Y DISTRIBUIDORA BID-MAR  |
| Address:  | BARRIO CABANAS   |
| City:   | COMAYAGUA  |
| State/Province:                                 | COMAYAGUA  |
| Postal Zone/Zip Code:                           | 12101  |
| Country/Region:                                 | HONDURAS   |
| Work Phone Number:                              | 27722538   |
| Monthly Salary in Local Currency (if employed): | DOES NOT APPLY   |
| Briefly Describe your Duties:                   | GERENTE GENERAL, ENCARGADO DE ADMINISTRACION GENERAL DE LA EMPRESA, COORDINACION DE PEDIDOS Y NEGOCIACIONES CON PROVEEDORES, ENCARGADO DE TODA LA PARTE FINANCIERA Y REPRESENTANTE LEGAL,. |

|                               |               |
|-------------------------------|---------------|
| Were you previously employed? | YES           |
| Employer Name (1):            | GRUPO INFERRA |

Employer Address:

BOULEVARD  
ROBERTO  
ROMERO  
LARIOS

|                               |                         |
|-------------------------------|-------------------------|
| City:                         | COMAYAGUA               |
| State/Province:               | COMAYAGUA               |
| Postal Zone/Zip Code:         | 12101                   |
| Country/Region:               | HONDURAS                |
| Telephone Number:             | 25541848                |
| Job Title:                    | SUPERVISOR DE PROYECTOS |
| Supervisor's Surname:         | DEL VALLE               |
| Supervisor's Given Name:      | UNIVERSIDAD             |
| Employment Date From:         | NOVEMBER 2005           |
| Employment Date To:           | DECEMBER 2006           |
| Briefly describe your duties: | SUPERVISOR DE PROYECTOS |

|   |                                    |
|---|------------------------------------|
| Have you attended any educational institutions at a secondary level or above? | YES                                |
| Name of Institution (1):  | UNIVERSIDAD JOSE CECILIO DEL VALLE |
| Address of Institution:   | BOULEVARD ROBERTO ROMEROLARIOS     |
| City:   | COMAYAGUA                          |

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State/Province: COMAYAGUA

Postal Zone/ZIP Code: 12101

Country/Region: HONDURAS

Course of Study: PASANTE DE INGENIERIA CIVIL

Date of Attendance From: JANUARY 2012

Date of Attendance To: MARCH 2015

Do you belong to a clan or tribe? NO

Provide a List of Languages You Speak:

Language Name (1): SPANISH

Have you traveled to any countries/regions within the last five years? YES

Provide a List of Countries/Regions Visited

Country/Region (1): CHINA

Country/Region (2): PERU

Country/Region (3): COLOMBIA

Country/Region (4): PANAMA

Country/Region (5): DOMINICAN REPUBLIC

Country/Region (6): MEXICO

Country/Region (7): EL SALVADOR

Country/Region (8): GUATEMALA

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

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|---|----|
| 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 |
| 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 |
| 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 |

### Location Information

Location where you will be submitting your application

Current Location: TEGUCIGALPA, HONDURAS

### Preparer of Application

|  |   |
|--|---|
| Did anyone assist you in filling out this application? | YES   |
| Preparer Names:  | DOES NOT APPLY  |
| Organization Name:                                     | USA SOLUTIONS   |
| Street Address:  | BARRIO SAN FRANCISCO, ESQUINA OPUESTA AL<br>BANCO POPULAR |
| City:  | COMAYAGUA   |
| State/Province:  | COMAYAGUA   |
| Postal Zone/ZIP Code:                                  | 12101   |
| Country/Region:  | HONDURAS  |
| Relationship to You:                                   | AGENT   |

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Usted firmó su solicitud de manera electrónica el 02-Aug-2022 05:33:38 (GMT-05:00). Se le requirió firmar su solicitud personalmente y de manera electrónica al menos que por reglamento quede exento de ello y aún si el formulario fue elaborado a su nombre por alguien más. Su firma electrónica certifica que usted ha leído y entendido las preguntas en su solicitud de Visa de No-Inmigrante y que además todas sus respuestas son verdaderas y realizadas a su mejor entender y convicción. La entrega de una solicitud conteniendo declaraciones falsas y engañosas pueden resultar en la negativa permanente de una visa para entrar a los Estados Unidos de Norteamérica. Todas las declaraciones hechas en esta solicitud no están sujetas a juramento pero deben ser hechas bajo protesta de decir verdad. (28 U.S.C. 1746).

La información que usted ha proporcionado en su solicitud y alguna otra enviada junto con ésta, puede ser puesta a disposición de otras agencias del gobierno con el derecho y la autoridad legal que les confiere para usar dicha información, incluso para propósitos del orden público y leyes de inmigración. Si se obtienen huellas dactilares como parte de su proceso de solicitud, éstas pueden ser usadas con el propósito de compararlas con otras huellas dactilares en el Sistema de Identificación de Siguiente Generación (Next Generation Identification System) NGI por sus siglas en inglés, de la Oficina Federal de Investigación (Federal Bureau of Investigation - FBI por sus siglas en inglés) o por sus sistemas subsecuentes (incluyendo civiles, criminales y archivos existentes de huellas dactilares). La fotografía que proporcione junto con su solicitud puede ser utilizada para verificación de empleo u otros propósitos competentes a la legislación de los Estados Unidos de Norteamérica.