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SMAL IMMIGRATION LAW OFFICE

INFORMATION ABOUT YOU					
Last Name:		First Name:		Middle Name:	
All other names used including maiden name, names in prior marriages, aliases:					
Your Home Address (in USA or address abroad):					
Contact Telephone number, Email address, Skype (what is your preferred method of contact):				Days/Hours we can call you:	
A# Alien Registration Number or USCIS number If you have it				Copy of the 1st page of your current passport and US visas <i>Please attach, if any</i>	
What is your citizenship(-s), and countries issued you passports):		City & Country of Birth:		Date of Birth:	
What type of immigration assistance are you seeking? What do you need help with? Please explain.					
If you are presently in the USA, date of your last entry to the USA? Have you ever left and re-entered again? In what status/visa you came to the USA (provide dates and copies of I-94 card if any).					
Are you currently employed in the U.S.?		Name and address of U.S. employer:			
Are you seeking a job in the U.S.		What type of position/job are you seeking?			
List all your previous entries / travel to U.S.A.:					
Date of arrival in USA and date of departure from USA:		What visa, how long you stayed in USA?		Where did you arrive in USA (city & state), where did you travel in USA? Purpose of your visit?	

FAMILY INFORMATION – YOUR WIFE or HUSBAND, CHILDREN & PARENTS

Your marital status: Married, Single, Divorced, Widowed, Engaged		Spouse/Fiancée in the U.S.- What is your Spouse's/Fiance's Immigrant Status in USA?		Is Spouse applying with you?	
Spouse's Last Name (Surname):		First Name:		Middle Name:	
All other names used by your Spouse including maiden name:		Citizenship(-s) of your Spouse:		Date & City & Country of Birth:	
Date and Place (City, State & Country) of Your Current Marriage:		Your Total number of all prior marriages		Spouse's total number of marriages	

PREVIOUS MARRIAGES (YOURS & YOUR SPOUSE'S)

	Name of <u>Former</u> Husband or Wife	Date & Place of Birth	Date & Place of Marriage	Children? (Y/N)	Date of Termination of Marriage	Country of Termination of Marriage	How terminated (death, divorce, annulment)
Yours							
Spouse's							

CHILDREN (YOUR & YOUR SPOUSE'S)

Total Number of Sons and Daughters: _____ **Step children:** _____ **Adopted Children:** _____

Name of the Child	Sex (M/F)	Date and City & Country of Birth	Citizenship	Immigration Status/Visa if in USA	Applying With You? (Yes/No)

PARENTS

	Full Legal Name	Date of birth & City/Country of Birth	City/Country of residence (if deceased, year of death)	Citizenship	Immigration Status if in USA
Your Father					
Your Mother					
Father-in-law					
Mother-in-law					

ADDITIONAL QUESTIONS ABOUT YOU:

Have you EVER been **arrested, charged or convicted of a crime anywhere in the world?** (even if the conviction was expunged, or removed from your record). Including offenses, such as, drunk driving (DUI/DWI), drug related offenses, prostitution, fraud, theft, etc.

Yes/No	If yes, please explain in detail including dates and criminal charges/convictions (attach a separate sheet and copies of the court/arrest documents, if relevant):	Result (convicted, acquitted, etc)

- 1) Have you ever **claimed to be a citizen of the U.S.A., or**
 2) Have you ever **used another name for immigration purposes, or for any other reason?**

Yes/No	If yes, please explain in detail including dates:	Result (benefit denied, etc)

- 1) Have you ever been **refused, or denied a VISA to come to the U.S.** When and what US Embassy.
 2) Have you ever been **denied admission to the USA on the border, at the airport when arriving from abroad?** (expedited removal or withdrawal of application for admission).

Yes/No	If yes, when and what kind of visa and the circumstances of the refusal/denial?

- 1) Have you ever been **“out of status” (illegal or undocumented) while staying in the U.S.?** (Dates: from

what date to what date; how did you enter the U.S. on what visa, if applicable?)
 2) Have you ever been **deported**? **Ordered removed/deported from USA** by Immigration Judge?
 3) Removed from USA by CBP officer at the airport or border?

Yes/No If yes, please explain and give the dates you were out of status:

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Yes/No
 1) Are you an **alcoholic or drug addict**?
 2) Do you have any **alcohol or drug related convictions (DUI)**?
 3) Have you ever participated in any court-ordered or voluntary **alcohol or drug related treatment (rehab)**? If yes, explain.

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Yes/No
 1) Do you have **AIDS/HIV positive, or sexually transmitted disease (STD) or Tuberculosis**?
 2) Any other serious health issues/diseases?

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What is your **education (high or middle school/college/university/graduate degree)** and **work / job experience (past 10 years)**? Please provide brief information below or/and attach **your current resume**.

Name and address of school	Dates when you attended school	Degree or Diploma upon graduation

Name and address of the employer(-s)	Dates of employment	Job or occupation, job functions

DO YOU HAVE ANY TATTOOS? (SPECIFICALLY, ANY GANG, PRISON TATTOOS) IF YES, EXPLAIN.	
List the professional Licenses or Certifications you possess, from any state or country	
Have you ever applied for a Work Permit / EAD in the USA? Was is approved? Provide dates and copies of work permits and/or Approval Notices.	
Have you ever paid TAXES in U.S.A.? If yes, for what years? Do you keep copies of Tax Returns? Do you have SSN or ITIN taxpayer numbers? Did you use another person's SSN or ITIN?	
Have you or anyone EVER filed an immigrant visa petition on your behalf (forms I-130, I-140, I-360), or Fiancée visa petition (form I-129F) or I-485 , Application for adjustment of status (Green Card)?	
Do you have any Military or Paramilitary Experience or Training, Foreign Languages?	
Do you currently have an immigration attorney? Or have you had an immigration attorney (lawyer) in the past? If yes, provide their names and firm name. Have you had an attorney assisting with these immigration matters or some other case? Explain.	

By submitting this completed questionnaire, I certify that I understand the instructions above and below; and that all of the information contained in this form is true and correct to the best of my knowledge.

Signed: _____ Dated: _____ (please sign & date here)

Please be advised that by submitting this confidential Questionnaire to us, no Attorney-Client relationship is established. The Attorney-Client relationship can be formed only after both sides agree and accept representation, sign Legal Services Agreement and pay the legal fee. Information provided during preliminary email or telephone communication and on our website is general in nature and does not constitute legal advice.

All information that you provide to us in this Questionnaire is CONFIDENTIAL.