

**PERSONAL INFORMATION**

NAME: \_\_\_\_\_

SURNAME: \_\_\_\_\_

SEX: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

COUNTRY & PLACE OF BIRTH: \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_

CURRENT NATIONALITY: \_\_\_\_\_

OTHER NATIONALITY: \_\_\_\_\_

FORMER NATIONALITY: \_\_\_\_\_

NATIONAL ID #: \_\_\_\_\_

COMPLETE PRIVATE ADDRESSE: \_\_\_\_\_

PRIVATE PHONE NUMBER: \_\_\_\_\_

BUSINESS PHONE NUMBER: \_\_\_\_\_

E-MAIL ADDRESSE: \_\_\_\_\_

**PASSPORT**

PASSPORT NUMBER: \_\_\_\_\_

ISSUING COUNTRY/AUTHORITY: \_\_\_\_\_

CITY OF ISSUE: \_\_\_\_\_

DATE OF ISSUE: \_\_\_\_\_

DATE OF EXPIRY: \_\_\_\_\_

DID YOU EVER LOSE YOUR PASSPORT OR WAS IT EVER STOLEN (WHEN, WHY, WHERE):  
\_\_\_\_\_

**TRAVEL INFORMATIONEN**

PURPOSE OF VISIT (WORK, HOLIDAY, STUDY, ETC.): \_\_\_\_\_

PLANNED DATE OF ENTRY: \_\_\_\_\_

CITY (AIRPORT) OF ENTRY IN USA: \_\_\_\_\_

DATE OF EXIT: \_\_\_\_\_

PLANNED DURATION OF STAY: \_\_\_\_\_

ACCOMPANYING PERSONS (WITH RELATION TO THEM): \_\_\_\_\_

HAVE YOU EVER GOTTEN A US VISA: \_\_\_\_\_

IF YES, PLEASE SEND A COPY OF THE VISA, OR WRITE MONTH/YEAR WHEN THE VISA WAS ISSUED  
\_\_\_\_\_

YOU HAVE BEEN REFUSED A VISA APPLICATION BEFORE: \_\_\_\_\_

HAVE YOU EVER BEEN TO THE USA, IF SO, WHEN (DATE OF ENTRY & EXIT):  
\_\_\_\_\_

COUNTRIES YOU HAVE VISITED WITHIN THE LAST 5 YEARS  
\_\_\_\_\_

**CONTACT IN THE USA**

ADDRESS IN THE USA WHERE YOU WILL BE STAYING (FOR EXAMPLE, HOTEL):  
\_\_\_\_\_

NAME, ADDRESS AND TELEPHONE NUMBER OF THE CONTACT PERSON IN THE USA  
\_\_\_\_\_

RELATIONSHIP WITH THIS PERSON (FRIEND, RELATIVE OR BUSINESS CONTACT):  
\_\_\_\_\_

IF YOU ARE TRAVELLING ON BUSINESS; NAME, ADDRESS AND TELEPHONE NUMBER OF THE US COMPANIES YOU INTEND TO VISIT:  
\_\_\_\_\_  
\_\_\_\_\_

**FAMILY INFORMATION**

SURNAME OF FATHER: \_\_\_\_\_

NAME OF FATHER: \_\_\_\_\_

DATE OF BIRTH (FATHER): \_\_\_\_\_

IS YOUR FATHER CURRENTLY IN THE USA: \_\_\_\_\_

SURNAME OF MOTHER: \_\_\_\_\_

NAME OF MOTHER: \_\_\_\_\_

DATE OF BIRTH (MOTHER): \_\_\_\_\_

IS YOUR MOTHER CURRENTLY IN THE USA: \_\_\_\_\_

OTHER RELATIVES IN THE USA: \_\_\_\_\_  
IF MARRIED; NAME OF SPOUSE \_\_\_\_\_  
DATE OF BIRTH (SPOUSE): \_\_\_\_\_  
NATIONALITY OF SPOUSE: \_\_\_\_\_  
PLACE OF BIRTH (SPOUSE): \_\_\_\_\_  
ADDRESSE OF SPOUSE: \_\_\_\_\_  
IF DIVORCED; NAME OF EX-SPOUSE: \_\_\_\_\_  
DATE OF BIRTH (EX-SPOUSE): \_\_\_\_\_  
PLACE OF BIRTH (EX-SPOUSE): \_\_\_\_\_  
NATIONALITY OF EX-SPOUSE: \_\_\_\_\_  
DATE AND PLACE OF MARRIAGE: \_\_\_\_\_  
DATE AND PLACE OF DIVORCE: \_\_\_\_\_  
IF MORE THAN ONE EX-SPOUSE, INFORMATION FOR EVERYONE:  
\_\_\_\_\_

**WORK INFORMATION**

OCCUPATION: \_\_\_\_\_  
CURRENT EMPLOYER: \_\_\_\_\_  
ADDRESSE AND PHONE NUMBER OF EMPLOYER:  
\_\_\_\_\_  
MONTHLY SALARY (IN €): \_\_\_\_\_  
BRIEF DESCRIPTION OF YOUR DUTIES: \_\_\_\_\_  
SINCE WHEN DO YOU WORK THERE: \_\_\_\_\_  
PREVIOUS EMPLOYER: \_\_\_\_\_  
ADDRESSE AND PHONE NUMBER OF PREVIOUS EMPLOYER:  
\_\_\_\_\_  
YOUR DUTIES THERE: \_\_\_\_\_  
FROM/TO WHEN DID YOU WORK THERE (MONTH/YEAR): from \_\_\_\_\_ to \_\_\_\_\_  
HIGHEST EDUCATION LEVEL (PRIMARY SCHOOL, SECONDARY SCHOOL, UNIVERSITY, ETC.):  
\_\_\_\_\_

ADDRESS OF THE SCHOOL OR UNIVERSITY: \_\_\_\_\_

WHEN YOU HAVE BEEN STUDYING; WHAT WAS THE MAIN COURSE OF STUDY: \_\_\_\_\_

WHAT DEGREE DID YOU RECEIVE? \_\_\_\_\_

LANGUAGES YOU SPEAK: \_\_\_\_\_

HAVE YOU WORKED FOR A SOCIAL OR CHARITABLE ORGANIZATION, IF SO WHICH:  
\_\_\_\_\_

DO YOU HAVE ANY SPECIALIZED SKILLS OR TRAINING, INCLUDING FIREARMS, EXPLOSIVES, NUCLEAR, BIOLOGICAL,  
OR CHEMICAL EXPERIENCE? \_\_\_\_\_

YOU HAVE SERVED IN THE ARMY, THE NAVY OR THE AIR FORCE: \_\_\_\_\_

IF SO, WERE YOU IN THE ARMY, NAVY OR AIR FORCE \_\_\_\_\_

FROM WHEN TO WHEN (MONTH/YEAR): from \_\_\_\_\_ to \_\_\_\_\_

YOUR MILITARY RANK: \_\_\_\_\_

**CONTACT PERSON IN YOUR HOME COUNTRY**

PLEASE NAME TWO CONTACTS - NO FAMILY MEMBERS - WITH NAME, ADDRESS AND TELEPHONE NUMBER.

CONTACT #1: \_\_\_\_\_  
\_\_\_\_\_

CONTACT #2: \_\_\_\_\_  
\_\_\_\_\_

**INTERVIEW**

WHEN DO YOU WANT TO APPLY FOR A VISA? PLEASE GIVE US TWO DATES AND WE WILL TRY TO ARRANGE ONE OF THEM. (IF NO DATE IS POSSIBLE, WE WILL MAKE AN APPOINTMENT ON THE NEXT POSSIBLE DATE):

FIRST CHOICE: \_\_\_\_\_ SECOND CHOICE: \_\_\_\_\_

YOU HAVE THE CHOICE TO HAVE YOUR PASSPORT RETURNED BY A COURIER (THIS COSTS 20 EURO), OR TO PICK UP YOUR PASSPORT 3 - 4 DAYS AFTER THE VISA INTERVIEW (THIS OPTION IS FREE OF CHARGE). THE PASSPORT CAN ONLY BE PICKED UP AT THE OFFICES OF THE COURIER COMPANY (MAIL BOXES ETC.) IN BERLIN, MUNICH OR FRANKFURT. WHICH OPTION DO YOU PREFER? PLEASE TICK THE BOX:

SEND MY PASSPORT THROUGH THE COURIER SERVICE:: [ ]

TO THE FOLLOWING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

I'M PICKING UP MY PASSPORT: [ ]

## >> ZULASSUNGSFRAGEN | ELIGIBILITY QUESTIONS

	ja   yes	nein   no
<p>1) Leiden Sie an einem körperlichen oder geistigen Gebrechen; missbrauchen Sie Drogen oder sind Sie drogensüchtig; oder leiden Sie gegenwärtig an einer der folgenden Krankheiten (ansteckende Krankheiten werden gemäß Section 361(b) des Public Health Service Act definiert):</p> <p>  Do you have a physical or mental disorder; or are you a drug abuser or addict; or do you currently have any of the following diseases (communicable diseases are specified pursuant to section 361(b) of the Public Health Service Act):</p> <ul style="list-style-type: none"> <li>• Cholera   Cholera</li> <li>• Diphtherie   Diphtheria</li> <li>• Tuberkulose, ansteckende   Tuberculosis, infectious</li> <li>• Plage   Plague</li> <li>• Pocken   Smallpox</li> <li>• Gelbfieber   Yellow Fever</li> <li>• virales hämorrhagisches Fieber, einschließlich Ebola, Lassa, Marburg, Krim-Kongo-Fieber   Viral Hemorrhagic Fevers, including Ebola, Lassa, Marburg, Crimean-Congo</li> <li>• Akutes Atemwegs-Erkrankungen, die auf andere übertragbar sind und wahrscheinlich tödlich sind   Severe acute respiratory illnesses capable of transmission to other persons and likely to cause mortality</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
<p>2) Wurden Sie jemals verhaftet oder eines Verbrechens überführt, das zu ernsthaften Sachschäden oder gravierenden Schäden für andere Personen oder Regierungsbehörden geführt hat?</p> <p>  Have you ever been arrested or convicted for a crime that resulted in serious damage to property, or serious harm to another person or government authority?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>3) Haben Sie jemals Gesetzesübertretungen im Zusammenhang mit dem Besitz oder Gebrauch bzw. der Verteilung von illegalen Drogen begangen?</p> <p>  Have you ever violated any law related to possessing, using, or distributing illegal drugs?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>4) Trachten Sie danach, sich an terroristischen Aktivitäten, Spionage, Sabotage oder Genozid zu beteiligen, oder haben Sie sich jemals an derartigen Aktivitäten beteiligt?</p> <p>  Do you seek to engage in or have you ever engaged in terrorist activities, espionage, sabotage, or genocide?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>5) Haben Sie jemals betrügerische Handlungen begangen oder haben Sie sich Anderen gegenüber fälschlich dargestellt, um ein Visum bzw. den Zutritt zu den Vereinigten Staaten zu erlangen, oder haben Sie anderen Personen dazu verholphen?</p> <p>  Have you ever committed fraud or misrepresented yourself or others to obtain, or assist others to obtain, a visa or entry into the United States?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>6) Versuchen Sie gegenwärtig, Arbeit in den Vereinigten Staaten zu bekommen, oder waren Sie je zuvor ohne vorherige Erlaubnis der U.S. Regierung in den Vereinigten Staaten angestellt?</p> <p>  Are you currently seeking employment in the United States or were you previously employed in the United States without prior permission from the U.S. government?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>7) Hat man Ihnen jemals ein U.S. Visum verweigert, das Sie mit Ihrem gegenwärtigen oder ehemaligen Pass beantragt haben, oder hat man Ihnen jemals den Zutritt zu den Vereinigten Staaten verweigert oder wurde Ihr Antrag auf Zutritt an einem U.S. Ankunftsort zurückgezogen?</p> <p>  Have you ever been denied a U.S. visa you applied for with your current or previous passport, or have you ever been refused admission to the United States or withdrawn your application for admission at a U.S. port of entry?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8) Sind Sie jemals länger als die Ihnen von der U.S. Regierung gewährte Aufenthaltsdauer in den Vereinigten Staaten geblieben?*</p> <p>  Have you ever stayed in the United States longer than the admission period granted to you by the U.S. government?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>9) Sind Sie am oder seit dem 1. März 2011 in den Irak, Iran, Sudan, nach Syrien, Libyen, Somalia oder in den Jemen gereist bzw. waren Sie dort anwesend?</p> <p>  Have you traveled to, or been present in Iraq, Syria, Iran, Sudan, Libya, Somalia or Yemen on or after March 1, 2011?</p>	<input type="checkbox"/>	<input type="checkbox"/>

## >> BESTÄTIGUNG | CERTIFICATION:

- Ich, der Antragsteller / die Antragstellerin bestätige hiermit, dass ich alle Fragen und Aussagen in dem vorliegenden Antrag gelesen habe, bzw. dass man mir diese vorgelesen hat, und dass ich alle Fragen und Aussagen in dem vorliegenden Antrag verstehe. Die im vorliegenden Antrag abgegebene Information ist nach meinem besten Wissen und Gewissen wahr und korrekt.
- | I, the applicant, hereby certify that I have read, or have had read to me, all the questions and statements on this application and understand all the questions and statements on this application. The answers and information furnished in this application are true and correct to the best of my knowledge and belief.

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Unterschrift des Antragstellers | Signature of applicant