

**QUESTIONNAIRE FOR
ADJUSTMENT OF STATUS
APPLICATION**

The information below will be used to draft the appropriate forms and documentation for the permanent residency application.

Applicant:

Name: _____
(First / Middle / Last)

Other Names Used (including maiden name, if applicable): _____

Address: _____
(Number and Street / Town or City / State / Country / Zip or Postal Code)

Daytime Telephone Number: _____

Place of Birth: _____
(Town or City / State / Country)

Date of Birth: _____ Citizenship: _____
(mm/dd/yyyy)

U.S. Social Security Number: _____ Alien Registration # (if any): _____

Current Occupation: _____

Marital Status (Married / Single / Divorced / Widowed): _____

Current Immigration Status: _____ Status Expires: _____

Date of Last Arrival in U.S.: _____ I-94 #: _____

Place of Last Entry into U.S. (City/State): _____

Have you ever before applied for permanent resident status (Yes/No): _____

If yes, please explain and give date and place of filing and final decision:

As part of the permanent residency process, the U.S. Citizenship and Immigration Services requires all foreign nationals to answer the following:

Part 3. Processing information. (Continued)

Please answer the following questions. (If your answer is "Yes" on any one of these questions, explain on a separate piece of paper. Answering "Yes" does not necessarily mean that you are not entitled to adjust status or register for permanent residence.)

1. Have you ever, in or outside the United States:
 - a. knowingly committed any crime of moral turpitude or a drug-related offense for which you have not been arrested? Yes No
 - b. been arrested, cited, charged, indicted, fined or imprisoned for breaking or violating any law or ordinance, excluding traffic violations? Yes No
 - c. been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action? Yes No
 - d. exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? Yes No
2. Have you received public assistance in the United States from any source, including the United States government or any state, county, city or municipality (other than emergency medical treatment), or are you likely to receive public assistance in the future? Yes No
3. Have you ever:
 - a. within the past ten years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future? Yes No
 - b. engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling? Yes No
 - c. knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the United States illegally? Yes No
 - d. illicitly trafficked in any controlled substance, or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance? Yes No
4. Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to any person or organization that has ever engaged or conspired to engage in sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity? Yes No
5. Do you intend to engage in the United States in:
 - a. espionage? Yes No
 - b. any activity a purpose of which is opposition to, or the control or overthrow of, the government of the United States, by force, violence or other unlawful means? Yes No
 - c. any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information? Yes No
6. Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party? Yes No
7. Did you, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion? Yes No
8. Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin or political opinion? Yes No
9. Have you ever been deported from the United States, or removed from the United States at government expense, excluded within the past year, or are you now in exclusion, deportation, removal or rescission proceedings? Yes No
10. Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States or any immigration benefit? Yes No
11. Have you ever left the United States to avoid being drafted into the U.S. Armed Forces? Yes No
12. Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and have not yet complied with that requirement or obtained a waiver? Yes No
13. Are you now withholding custody of a U.S. citizen child outside the United States from a person granted custody of the child? Yes No
14. Do you plan to practice polygamy in the United States? Yes No

The foreign national is also required to complete a G-325 Biographic Information Sheet found below:

U.S. Department of Justice
Immigration and Naturalization Service

OMB No. 1115-0066
BIOGRAPHIC INFORMATION

(Family name)	(First name)	(Middle name)	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.)	NATIONALITY	FILE NUMBER A
ALL OTHER NAMES USED (Including names by previous marriages)				CITY AND COUNTRY OF BIRTH		SOCIAL SECURITY NO. (If any)
FATHER		FAMILY NAME	FIRST NAME	DATE, CITY AND COUNTRY OF BIRTH (If known)		CITY AND COUNTRY OF RESIDENCE.
MOTHER (Maiden name)						
HUSBAND (If none, so state) OR WIFE	FAMILY NAME (For wife, give maiden name)	FIRST NAME	BIRTHDATE	CITY & COUNTRY OF BIRTH	DATE OF MARRIAGE	PLACE OF MARRIAGE
FORMER HUSBANDS OR WIVES (if none, so state)						
FAMILY NAME (For wife, give maiden name)	FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE	DATE AND PLACE OF TERMINATION OF MARRIAGE		
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.						
				FROM		TO
STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	MONTH	YEAR	MONTH YEAR PRESENT TIME
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR						
				FROM		TO
STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	MONTH	YEAR	MONTH YEAR PRESENT TIME
APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE) LIST PRESENT EMPLOYMENT FIRST						
			OCCUPATION (SPECIFY)	FROM		TO
FULL NAME AND ADDRESS OF EMPLOYER				MONTH	YEAR	MONTH YEAR PRESENT TIME
<i>Show below last occupation abroad if not shown above. (Include all information requested above.)</i>						
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR			SIGNATURE OF APPLICANT		DATE	
<input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHER (SPECIFY):						
<input type="checkbox"/> STATUS AS PERMANENT RESIDENT						
Submit both copies of this form.			IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET IN THIS SPACE:			

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

APPLICANT BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.

COMPLETE THIS BOX (Family name)	(Given name)	(Middle name)	(Alien registration number)
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