

UFV&A Long Format IAP-66

Visitor/Assignee:

* First Name: _____ *Middle: _____ *Last: _____
*Gender (circle one): Male Female Is Visitor currently in the US? Yes No
*Permanent Resident Alien: Yes No
*Country of Citizenship: _____ *Date of Birth (mm/dd/yyyy): _____
*Country of Birth: _____ *City of Birth: _____

Employer Information

Affiliation or Company Info:

*Institution or Company Name: _____ Phone Number: _____
Street (1): _____ Fax Number: _____
Street (2): _____ E-mail Address: _____
City: _____ State: _____
Zip Code: _____ *Country of Employer: _____
*Title or Position and Duties: _____

Aliases

First Name: _____ Middle: _____ Last: _____
First Name: _____ Middle: _____ Last: _____
First Name: _____ Middle: _____ Last: _____

Visa Information

Visa Number: _____
Visa Type: _____
Expr Date (mm/dd/yyyy): _____

Passport Information

Passport Number: _____
Country of Issue: _____
Expr Date (mm/dd/yyyy): _____

Place of Work (if different from Employer)

Company Name: _____ Phone Number: _____
Street (1): _____ Fax Number: _____
Street (2): _____ E-mail Address: _____
City: _____ State: _____
Zip Code: _____ Title or Position: _____
Country of Employer: _____
Interpreter Needed? (circle one): Yes No
Business Type conducted by Employer: _____
Educational Background: _____
Field of Research: _____

Current U.S. Address

Street (1): _____ City: _____
Street (2): _____ State: _____
Zip Code: _____

Permanent Address

Street (1): _____ City: _____
Street (2): _____ State: _____
Country: _____ Zip Code: _____

** Denotes Required Information*

UFV&A Family Member Information/Long Format IAP-66

Visitor/Assignee Name: _____

Family Member

First Name: _____	Middle: _____	Last: _____
Relationship to Visitor: _____	Gender (circle one): _____	Male _____ Female _____
Citizenship: _____	Date of Birth (mm/dd/yyyy): _____	_____
Country of Birth: _____	City of Birth: _____	_____

Visa Information

Passport Information

Visa Type: _____
Expr Date (mm/dd/yyyy): _____
Visa Number: _____

Country of Issue: _____
Expr Date (mm/dd/yyyy): _____
Passport Number: _____

Family Member

First Name: _____	Middle: _____	Last: _____
Relationship to Visitor: _____	Gender (circle one): _____	Male _____ Female _____
Citizenship: _____	Date of Birth (mm/dd/yyyy): _____	_____
Country of Birth: _____	City of Birth _____	_____

Visa Information

Passport Information

Visa Type: _____
Expr Date (mm/dd/yyyy): _____
Visa Number: _____

Country of Issue: _____
Expr Date (mm/dd/yyyy): _____
Passport Number: _____

Family Member

First Name: _____	Middle: _____	Last: _____
Relationship to Visitor: _____	Gender (circle one): _____	Male _____ Female _____
Citizenship: _____	Date of Birth (mm/dd/yyyy): _____	_____
Country of Birth: _____	City of Birth _____	_____

Visa Information

Passport Information

Visa Type: _____
Expr Date (mm/dd/yyyy): _____
Visa Number: _____

Country of Issue: _____
Expr Date (mm/dd/yyyy): _____
Passport Number: _____

Family Member

First Name: _____	Middle: _____	Last: _____
Relationship to Visitor: _____	Gender (circle one): _____	Male _____ Female _____
Citizenship: _____	Date of Birth (mm/dd/yyyy): _____	_____
Country of Birth: _____	City of Birth _____	_____

Visa Information

Passport Information

Visa Type: _____
Expr Date (mm/dd/yyyy): _____
Visa Number: _____

Country of Issue: _____
Expr Date (mm/dd/yyyy): _____
Passport Number: _____

Remarks/Comments
