

ABD



**Embassy of the United States of America
Consular Section
P. O. Box 4009
Abu Dhabi, U.A.E.**

New Medical Center
P. O. Box 6222
ABU DHABI

TEL. NO: 02-6332255

OR

Ahalia Hospital
P. O. Box 2419
ABU DHABI

TEL. NO: 02-6262666

OR

DR. J.P.R. McCulloch
P. O. Box 8031
ABU DHABI

TEL. NO: 02-6333900

OR

Oasis Hospital
P. O. Box 1016
AL AIN

TEL. NO: 03-7221251

OR

The Polyclinic
P. O. Box 3098
DUBAI

TEL. NO: 04-2959444

OR

Mideast Polyclinic
P. O. Box 55742
DUBAI

TEL. NO: 04-2216888

OR

New Medical Center
P. O. Box 7832
DUBAI

TEL. NO: 04-2683131

Dear Doctor:

Mr./Mrs./Miss _____

is/are an applicant(s) for a visa(s) to the United States. Could you, please give him/her/them the completed medical examination form. Also please give him/her/them a chest X-Ray and furnish him/her/them with a copy of the X-Ray film. It is understood by the applicant(s) that he/she/they is/are responsible for any examination costs which might be charged by the hospital.

IMPORTANT NOTE: Please attach a photograph of the applicant to the upper left-hand corner of the medical form and place the examining physician's name stamp partly across the lower portion of the photo and partly on the medical form.

Thank you for your assistance.

Sincerely,

Vice Consul of the
United States of America

DIVERSITY VISA APPLICATIONS

PLEASE BRING ALL DOCUMENTS ON YOUR INTERVIEW DATE. PREPARE **ONE SEPARATE FILE** FOR EACH APPLICANT. YOU MUST KEEP THE DOCUMENTS IN THE FOLLOWING ORDER:

1. ORIGINAL BIRTH CERTIFICATE, AN ORIGINAL ENGLISH TRANSLATION AND COPIES OF EACH.
2. ORIGINAL MARRIAGE CERTIFICATE, AN ORIGINAL ENGLISH TRANSLATION AND COPIES OF EACH. IF YOUR SPOUSE IS ALSO AN APPLICANT, YOU MUST PROVIDE A COPY OF THE MARRIAGE CERTIFICATE FOR YOUR SPOUSE'S FILE AS WELL.
3. ORIGINAL DIVORCE/DEATH CERTIFICATE OF ALL PREVIOUS SPOUSES (IF APPLICABLE), ORIGINAL ENGLISH TRANSLATIONS AND COPIES OF EACH.
4. YOUR ORIGINAL PASSPORT AND A COPY OF THE PASSPORT SHOWING YOUR NAME AND THE ISSUE & EXPIRY DATES
5. ORIGINAL POLICE/MILITARY RECORDS (IF APPLICABLE) WITH AN ORIGINAL ENGLISH TRANSLATION AND COPIES OF EACH. PLEASE NOTE THAT POLICE CERTIFICATES FROM THE UAE AND IRAN ARE NOT REQUIRED.
6. TWO COLOR PHOTOGRAPHS:
 - 50 MM BY 50 MM COLOR FULL FACE PHOTOGRAPHS, WHERE THE APPLICANT IS DIRECTLY FACING THE CAMERA.
 - ALL PHOTOGRAPHS MUST HAVE A WHITE OR OFF-WHITE BACKGROUND.
7. A MEDICAL EXAMINATION
8. AN ORIGINAL HIGH SCHOOL CERTIFICATE OR UNIVERSITY DEGREE, WITH AN ORIGINAL ENGLISH TRANSLATION AND COPIES OF EACH.
9. AN ORIGINAL, CURRENT JOB LETTER, WITH AN ORIGINAL ENGLISH TRANSLATION AND COPIES OF EACH.
10. AN ORIGINAL, NOTARIZED FORM I-134 AFFIDAVIT OF SUPPORT, COMPLETED CAREFULLY WITH ALL SUPPORTING DOCUMENTS. PLEASE READ THE INSTRUCTIONS VERY CAREFULLY FOR FORM I-134. PERSONAL FUNDS IN THE FORMS OF BANK STATEMENTS IN U.S. DOLLARS OR U.A.E. DIRHAMS MAY ALSO BE USED.
11. **FEES: DH. 2,795.00 per person. FEES MUST BE PAID IN U.A.E. DIRHAMS.**