## **Update: Immigrant/DV Visa Application (Abu Dhabi) Urgent**

Abu Dhabi, IV < AbuDhabi IV @ state.gov>

Dear Visa Applicant,

In order to complete the processing for your U.S. visa, please complete the questionnaire below in a reply to this email. Your responses can be typed directly into the spaces on the form. Your application cannot be finalized until you have submitted this questionnaire. You may continue to check the status of your case online at: <a href="http://www.abudhabiniv.net">http://www.abudhabiniv.net</a>

عزيزي مقدم الطلب،

من أجل إستكمال مراحل تأشيرة الدخول لولايات المتحدة الأمريكية، يرجى ملء الإستبيان أدناه مع الرد على هذا البريد الإلكتروني. يمكنك كتابة الاجابات الخاصة بك مباشرة في المساحات المتاحة في النموذج المرفق. مع العلم أنه لا يمكن إكمال الإجراءات الخاصة بك إلى أن نحصل على هذا الإستبيان. يمكنك متابعة حالة طلبك من خلال موقعنا على شبكة الإنترنت:

http://www.abudhabiniv.net

متقاضى محترم ويزا،

به منظور تکمیل پروسه ویزای ایالات متحده آمریکا شما، لطفا پرسشنامه زیر را با پاسخ به این ایمیل تکمیل فرمایید. پاسخ های خود را می توان به طور مستقیم در فرم مورد نظر تایپ نمود. درخواست شما بدون این پرسش نامه تکمیل نخواهد یافت. شما میتوانید همچنان به بررسی وضعیت پرونده خود درا ین سایت انترنتی بپردازید:

http://www.abudhabiniv.net

U.S. Department of State



## SUPPLEMENTAL QUESTIONS FOR VISA APPLICANTS

Approved OMB 1405-0226 Expires 11/30/2017 Estimated Burden 60 Minutes

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General	Instructions

General Instructi	ons
• If you are unsure of the answer to a question, please provide a response to the best address, provide the city, state, and street name if you can recall them. U.S. Depart its entirety.	
• Failure to answer every question will not necessarily preclude visa issuance, as the	e application is considered in its entirety.
• If you believe a particular question does not apply to you or your circumstances, p	please write "not applicable" or "N/A."
• If you need more space to response to a question, please write the rest of your response to a question, please write the rest of your response to a question, please write the rest of your response to a question, please write the rest of your response to a question, please write the rest of your response to a question.	oonse on a separate sheet of paper or email.
Surname(s):	Given Name(s):
Date of Birth (mm-dd-yyy):	Visa Type/Classification:
Passport and Travel 1	History
Have you Travelled to any country (other than your country of residence) in the last If yes, provide details for each trip, including locations visited, date visited, source	of funds, and length of stay.
Have you ever held a passport other than the passport listed in your visa application If yes, provide the following information.	1?
Country of Issuance	Passport Number

	Re	latives	
Siblings (brothers and sisters) - Provide the full name(s	s) and date of birt	h of any sibling (full, hal	f, step, adopted), living or deceased.
Surname(s)		Given Name(s)	Date of Birth (mm-dd-yyy)
<b>Children</b> - Provide the full name (s) and date of birth of	any child (minor	and adult), living or dece	ased.
Surname(s)		Given Name(s)	Date of Birth (mm-dd-yyy)
<b>Spouse</b> - Provide the full name (s) of any current or prev	ious spouse or civ	vil/domestic partner, livir	g or deceased.
Surname(s)		Given Name(s)	Date of Birth (mm-dd-yyy)
	Address and Co	ontact Information	
Address - Provide all addresses where you have lived du	ring the last 15 y	ears, if not already provid	led in your application.
	Ad	dress 1	
Dates of Residence (mm-dd-yyyy):			
Street Address 1:			
Street Address 2:			
City:		State/Province:	
Postal Zone/Zip Code:		Country/Region:	
	Ad	dress 2	
Dates of Residence (mm-dd-yyyy):			
Street Address 1:			
Street Address 2:			

City: State/Provin		State/Province:	rovince:			
Postal Zone/Zip Code:		Country/Region:	Country/Region:			
Phone Number - Provide all phone numbers you have used in the last five years, including primary, secondary, work, home, and mobile numb						
Phone Number (1):	Phone Number (2):	Phone Number (3):	Phone Number (4):			
Phone Number (5):	Phone Number (6):	Phone Number (7):	Phone Number (8):			
E-mail - Provide all email addresses	s you have used in th elast five	vears, including primary, secon	ndary, work, personal, and educational addresses			
E-mail Address (1):		E-mail Address (2):				
E-mail Address (3):		E-mail Address (4):	E-mail Address (4):			
E-mail Address (5):		E-mail Address (6):	E-mail Address (6):			
		Social Media				
Please provide your unique user name for any websites or applications you have used to create or share content (photos, videos, status updates, etc.) as part of a public profile within the last five years.						
Social Media Platform		Soc	Social Media Identifier (Name/Handle)			
Employment History						
Provide the following information on all employers in the last fifteen years, if not already provided in your application.						
Employer 1 Name:						
Dates of Employment (mm-dd-yyyy):						
Street Address 1:						
Street Address 2:						

City:	State/Province:			
Postal Zone/Zip Code:	Country/Region:			
Telephone Number:				
Job Title:				
Job Description:				
Employer 2 Name				
Dates of Employment (mm-dd-yyyy):				
Street Address 1:				
Street Address 2:				
City:	State/Province:			
Postal Zone/Zip Code:	Country/Region:			
Telephone Number:				
Job Title:				
Job Description:				
The information provided in this application and other information submitted may be provided to other U.S. government agencies having statutory or				
other lawful authority to use such information, including for law enforcement and immigration law enforcement purposes. I understand that any				
willfully false or misleading statement or willful concealment of a material fact made by me herein may subject me to permanent exclusion from the				
United States and, if I am admitted to the United States, may subject me to criminal prosecution and/or removal.				
Applicant's Signature:		Date (mm-dd-yyyy):		
Danagevert Deduction Act Statement				

## Paperwork Reduction Act Statement

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: PRA BurdenComments@state.gov.

## **CONFIDENTIALITY STATEMENT**

AUTHORITIES: The information on this form is requested pursuant to Section 212(a) and 221 and as required by Section 222 of the Immigration and Nationality Act. Section 222(f) provides that the records of the Department of State and of the diplomatic and consular offices of the United States pertaining to the issuance and refusal of visas or permits to enter the United States shall be considered confidential and shall be used only for the formultaion, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States. Certified copies of such records may, in the discretion of the Secretary of State, be made available to a court provided the court certifies that the information contained in such records is needed in a case pending before the court.

PURPOSE: The U.S. Department of State uses the information provided on this form to determine an individual's eligibility for a U.S. visa. Individuals who fail to submit this form or who do not provide all the requested information may be denied a U.S. visa. Although furnishing this information is voluntary, failure to provide this information may delay or prevent the processing of an individual visa application.

**DS-5535**