U.S. DEPARTMENT OF STATE U.S. EMBASSY SEOUL, CONSULAR SECTION, IMMIGRANT VISAS

32 Sejong-ro, Jongro-ku, SEOUL 110-710 KOREA <u>or</u> Unit 15550, APO AP 96205-5550 USA

INTL FAX 822-397-4501, DOMESTIC FAX 02-397-4501, DSN FAX 721-4501

After you have complied in full with the instructions on the attached SEO 3.5, please request an immigrant visa appointment by completing and returning this OF-169, together with a photocopy of the passport identity page of the passport for each applicant, <u>by fax or mail to Immigrant Visas (IV) at one of the above addresses</u>.

IMMIGRANT, FIANCE, LIFE ACT VISA APPOINTMENT REQUEST (OF169)

FROM THE APPLICANT TO IV: I have gathered all necessary documents described herein, which are relevant to my case, and will bring them for my appointment at IV. Enclosed are photocopies of the identity pages of the passports for myself and all family members who will apply for visas. As an applicant for a preference IV (F or E), I understand that IV will notify me of my appointment only after IV receives a visa number from the Department of State for my use. I recognize that qualifying for a visa is my responsibility alone; no prior assurance can be made about visa issuance. I understand that I should not give up my job, education or business, not dispose of property and not make any final travel plans until a visa is actually issued to me. I understand that it is solely my responsibility to qualify for a visa in time to suit my plans.

The following family members, who are not U.S. citizens or legal permanent residents, will apply:

Myself only

Myself together with my spouse (print full name):

Myself together with my spouse and the following minor children (print full names of each):

(print full name and case number of principal applicant)

(print your full mail address and zip code, phone and fax numbers, email address)

(preferred week of your appointment)

(signature of principal applicant and today's date)

s/cons/iv/seofm/OF-169, Aug2004