

U.S. Department of State

OMB APPROVAL NO. 1405-0144 EXPIRES: 01/31/03 ESTIMATED BURDEN: 1 Hour

O.O. Dopartmont of Otato					
CONTACT INFORMATION AND WORK HISTORY					
FOR NONIMMIGRANT VISA APPLICANT					

PLEASE ATTACH AN ADDITIONAL SHEET IF YOU NEED MORE SPACE TO CONTINUE YOUR ANSWERS					
Last Nan	ne <i>(s)</i>		First Name/s/	Middle Name	
Date of I	Birth <i>(mm-dd-yyyy)</i>	3. Place of Birth Country	City/Town	State	/Province
Permane	ent Home Address and To	elephone Number <i>(include ap</i>	partment number, street, city, state o	r province, postal zone, and o	country)
	ne and Address of Spous Last, First, Middle)	se <i>(if applicable) (postal box</i> Add	number unacceptable) dress		Telephone Numbe
	nes and Addresses of Ch Last, First, Middle)		(postal box number unacceptable) dress	Relationship	Telephone Numbe
			·		
	east Two Contacts in April relatives		nce Who Can Verify Information Abou	ut Applicant (do not list imme	diate family member
Name (Last, First, Middle)	Ad	<u>Idress</u>		Telephone Numb
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^{*}Public reporting burden for this collection of information is estimated to average 1 hour per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. In accordance with 5 CFR 1320 5(b), persons are not required to respond to the collection of this information unless this form displays a currently valid OMB control number. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: U.S. Department of State (A/RPS/DIR) Washington, DC 20520.

WORK EXPERIENCE - PRESENT			
Job Title:	Date (mm-dd-yyyy) From	Date (mm-dd-yyyy) To	
Employer's Name and Address:		Address March	
	Telephone Number	ş)	
Describe Veus Duties	r elephone Number		
Describe Your Duties:			
WORK EXPERIENCE - PREVIOUS			
Job Title:	Date (mm-dd-yyyy) From	Date (mm-dd-yyyy) To	
Caralanas's Name and Address			
Employer's Name and Address:			
	Talanhana Numbar	•	
Describe Your Duties:	Telephone Number		
5000100 7041 541.00.			
WORK EXPERIENCE - PREVIOUS			
Job Title:	Date (mm-dd-yyyy) From	Date (mm-dd-yyyy) To	
Employer's Name and Address:			
	Telephone Number		
Describe Your Duties:			
WORK EXPERIENCE - PREVIOUS			
Job Title:	Date (mm-dd-yyyy) From	Date (mm-dd-yyyy) To	
Employer's Name and Address:			
Down't Was Davis	Telephone Number		
Describe Your Duties:			
-			
I certify that I have read and understood all the questions set forth in this form and the an	swers I have furnished on this f	form are true and correct to	
the best of my knowledge and belief. I understand that any false or misleading statement entry into the United States.			
	D. 7.		
APPLICANT'S SIGNATURE	DATE (mm-dd-yyyy)		