

**QUESTIONNAIRE FOR I-485, APPLICATION FOR EMPLOYMENT-  
BASED  
(I-140) PERMANENT RESIDENCE STATUS (Green Card)**

The following questionnaire and accompanying list of documents contains information we need from you in order to complete the final phase of your permanent resident application. Every employment-based applicant for permanent residence must complete this information. Please **complete all information** as fully as possible, putting N/A or “**none**” where appropriate.

***Part I***                      ***Information about you:***

Your full name (including middle and maiden name, if applicable)

\_\_\_\_\_

(last name)

(first name)

(middle and or maiden name)

Other names you have used (including name by any previous marriage)

\_\_\_\_\_

Your Current U.S. Address (street address, city, state & zip)

\_\_\_\_\_

Telephone number(s) \_\_\_\_\_ E-mail address \_\_\_\_\_

Date of birth \_\_\_\_\_ City & Country of birth \_\_\_\_\_

Nationality \_\_\_\_\_ A# \_\_\_\_\_

Social Security # \_\_\_\_\_ I-94# \_\_\_\_\_

Date you last arrived in U.S. (see I-94 card) \_\_\_\_\_

City and State of last arrival \_\_\_\_\_

Current INS status \_\_\_\_\_ Expiration date \_\_\_\_\_

In what status did you last enter the U.S.? \_\_\_\_\_

Your name exactly as it appears on your Arrival/Departure Record (I-94)  
\_\_\_\_\_

Were you inspected by a U.S. Immigration Officer? Yes \_\_\_\_\_ No \_\_\_\_\_

Nonimmigrant visa number \_\_\_\_\_ Most recent date issued \_\_\_\_\_

Consulate where visa was issued \_\_\_\_\_

Have you ever before applied for permanent resident status in the US? \_\_\_\_\_

If yes, give date and place of filing and final disposition: \_\_\_\_\_  
\_\_\_\_\_

Your residences for the **last five years**. Give present (current) address first:

| Number & Street | City  | Province/State | Country | From<br>(mo/year) | To<br>(mo/year) |
|-----------------|-------|----------------|---------|-------------------|-----------------|
| _____           | _____ | _____          | _____   | _____             | _____           |
| _____           | _____ | _____          | _____   | _____             | _____           |
| _____           | _____ | _____          | _____   | _____             | _____           |
| _____           | _____ | _____          | _____   | _____             | _____           |

List your **most recent** address outside of the U.S. **if not** mentioned above:

| Number & Street | City  | Province/State | Country | From<br>(mo/year) | To<br>(mo/year) |
|-----------------|-------|----------------|---------|-------------------|-----------------|
| _____           | _____ | _____          | _____   | _____             | _____           |

Your employment for the **last five years**. **List present employment first:**

| Full name and address of employer | Occupation | From<br>(mo/year) | To<br>(mo/year) |
|-----------------------------------|------------|-------------------|-----------------|
| _____                             | _____      | _____             | _____           |
| _____                             | _____      | _____             | _____           |
| _____                             | _____      | _____             | _____           |
| _____                             | _____      | _____             | _____           |

**Last occupation abroad**, if not listed above.

| Full name and address of employer | Occupation | From<br>(mo/year) | To<br>(mo/year) |
|-----------------------------------|------------|-------------------|-----------------|
|-----------------------------------|------------|-------------------|-----------------|

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Have you ever applied for an employment authorization document (an EAD card) from INS? \_\_\_\_\_. If so, please provide a copy of the EAD.

List your present and past membership in or affiliation with every political organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other place since your 16<sup>th</sup> birthday. Include any foreign military service in this part. If none, write “**none**”. Include the name(s) of the organization(s), location(s), dates of membership from and to, and the nature of the organization(s). If additional space is needed, use a separate piece of paper.

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***Part II                      Biographical Information***

**a.** Your Mother’s Full Name (include maiden name)

\_\_\_\_\_

Mother’s Date of birth \_\_\_\_\_ City and country of Birth \_\_\_\_\_

Mother’s current residence/City and Country \_\_\_\_\_

**b.** Your Father’s Full Name

\_\_\_\_\_

Father’s Date of Birth \_\_\_\_\_ City and Country of birth \_\_\_\_\_

Father’s Current residence/City and Country \_\_\_\_\_

**c.** Name of current Husband/Wife (include maiden name of wife)

\_\_\_\_\_

Date of Birth \_\_\_\_\_ City and Country of birth \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

**d.** Name of former husband(s) or wife(s) (include maiden name of wife)

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Date of former husband/wife birth \_\_\_\_\_

Date and place of previous marriage \_\_\_\_\_

Date and place of termination of marriage \_\_\_\_\_

**\*\*\* If more than one prior marriage, please list same details on reverse side of this questionnaire.**

**e.** List all of your children:

| Last name | First name | Middle name | Son or Daughter |
|-----------|------------|-------------|-----------------|
|-----------|------------|-------------|-----------------|

- |    |       |       |       |
|----|-------|-------|-------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ |
| 6. | _____ | _____ | _____ |

Birth City & Country of each child listed above

- |    |       |
|----|-------|
| 1. | _____ |
| 2. | _____ |
| 3. | _____ |
| 4. | _____ |
| 5. | _____ |
| 6. | _____ |

Date of birth of each child (month/day/year) listed above

- |    |       |
|----|-------|
| 1. | _____ |
| 2. | _____ |
| 3. | _____ |
| 4. | _____ |
| 5. | _____ |
| 6. | _____ |

Will they be applying with you? \_\_\_\_\_ If so, from here or abroad? \_\_\_\_\_

[Children under the age of 21 are eligible to apply for permanent resident status as dependents of the principal applicant.]

### ***Part III Additional Information***

At a later date you will need to sign that you understand and agree to the following: Selective Service Registration. The following applies if you are a man at least 18 years old, but not yet 26 years old, who is required to register with the Selective Service System:

“I understand that my filing this adjustment of status application with the Bureau of Citizenship and Immigration Services (BCIS) authorizes the BCIS to provide certain

registration information to the Selective Service System in accordance with the Military Selective Service Act”.

“Upon BCIS acceptance of my application, I authorize BCIS to transmit to the Selective Service System my name, current address, Social Security number, date of birth and the day I filed the application for the purpose of recording my Selective Service Registration as of the filing date. If, however, the BCIS does not accept my application, I further understand that, if so required, I am responsible for registering with the Selective Service by other means, provided I have not yet reached the age of 26.”

Please answer **“Yes or No”** to the following questions. **(If your answer is “Yes” to any one of these questions, explain on a separate piece of paper.**

Answering “yes” does not necessarily mean that you are not entitled to adjust your status or register for permanent residence.)

1. Have you ever, in or outside of the U.S.:
  - a. Knowingly committed any crime of moral turpitude or a drug-related offense for which you have not been arrested? \_\_\_\_\_
  - b. Been arrested, cited, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations? \_\_\_\_\_
  - c. Been the beneficiary of a pardon, amnesty, rehabilitation decree, or other act of clemency or similar action? \_\_\_\_\_
  - d. Exercised diplomatic immunity to avoid prosecution for a criminal offense in the U.S.? \_\_\_\_\_
2. Have you received public assistance in the U.S. from any source, including the U.S. government or any state, county, city or municipality (other than emergency medical treatment), or are you likely to receive public assistance in the future? \_\_\_\_\_
3. Have you ever:
  - a. Within the past ten years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future? \_\_\_\_\_
  - b. Engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling? \_\_\_\_\_
  - c. Knowingly encouraged, induced, assisted, abetted or aided any alien to enter the U.S. illegally? \_\_\_\_\_
  - d. Illicitly trafficked in any controlled substance, or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance? \_\_\_\_\_

4. Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to, any person or organization that has ever engaged or conspired to engage, in sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity? \_\_\_\_
5. Do you intend to engage in the U.S. in:
  - a. Espionage? \_\_\_\_
  - b. Any activity a purpose of which is opposition to, or the control, or overthrow of, the government of the United State, by force, violence or other unlawful means? \_\_\_\_
  - c. Any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information? \_\_\_\_
6. Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party? \_\_\_\_
7. Did you, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion? \_\_\_\_
8. Have you ever engaged in genocide, or other wise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin or political opinion? \_\_\_\_
9. Have you ever been deported from the U.S., or removed from the U.S. at government expense, excluded in the past year, or are now in exclusion or deportation proceedings? \_\_\_\_
10. Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the U.S. or any immigration benefit? \_\_\_\_
11. Have you ever left the U.S. to avoid being drafted into the U.S. Armed Forces?  
\_\_\_\_

12. Have you ever been a J nonimmigrant Exchange Visitor who was subject to the two-year foreign residence requirement and not yet complied with the requirement or obtained a waiver? \_\_\_\_
13. Are you now withholding custody of a U.S. citizen child outside the U.S. from a person granted custody of the child? \_\_\_\_
14. Do you plan to practice polygamy in the U.S.? \_\_\_\_

THE FOLLOWING ITEMS MUST ALSO BE RETURNED TO OUR OFFICE. IF ANY OF THESE DOCUMENTS ARE NOT IMMEDIATELY AVAILABLE, SEND WHAT YOU HAVE AND TRY TO OBTAIN THE ADDITIONAL DOCUMENTS AS SOON AS POSSIBLE.

1. INS Photo Sheet: A Photographic Specification Sheet is attached. You will need six (6) color immigration-style photographs. Please have the photo studio follow the instructions on the attached photo specification sheet **exactly**.
2. Form I-693, Medical Examination and Supplemental Form to I-693, Documentation of Vaccination: Each person applying for permanent residence must obtain a medical examination from one of the doctors indicated on the enclosed list. *The INS-approved Physician must also complete a supplemental Vaccination Report.* Thus, bring with you to your Medical Examination your immunization records for the physician's review. Medical exam results may take two weeks to be issued, so make your appointment accordingly. When you obtain the results, they will be given to you in a sealed envelope. **DO NOT OPEN THE ENVELOPE**. Send the sealed envelope directly to us and we will file it with the rest of your application. We must have the medical exam results to file your application.
3. Fingerprints: Required of each person age fourteen (14) and older. **Fingerprints are not submitted with your initial I-485 application filing.** *Rather the BCIS will send our office a notice with instructions on when and where to have your FBI Clearance Fingerprints taken, usually about 2-6 months after the I-485 application is filed.*
4. Form I-134, Affidavit of Support: This form must be completed for each member of your family. (If you are the principal applicant and have no dependent family members, you do not need to complete this form.) *Once we have returned the typed finalized form to you, you must sign this form before a NOTARY PUBLIC. We can notarize this in our office if you would prefer.*

**ADDITIONAL DOCUMENTS REQUIRED:**

Please check the boxes to signify that you have included the required documentation.

ALL DOCUMENTS NOT IN ENGLISH MUST BE TRANSLATED INTO ENGLISH. We can provide you with names of translators, if needed. Otherwise, you may have a friend or colleague translate the document. **You may NOT translate your own documents.** Each translation should be typed and contain the following attestation:

“I, (name of translator), hereby certify that I am fluent in English and (other language) and that this is a true and accurate translation.”

Signed: Translator

Date: month/day/year

Birth Certificates: Each person and member of the family must submit a copy of their birth certificate **with** original English translation, if applicable. **Please insure that your name, date, and place of birth, and parents’ names are on the document.** *So-called “SHORT FORM” birth certificates are not acceptable.* If you do not have a “birth certificate,” please call our office.

Marriage Certificate: A copy of your marriage certificate, with translation (if applicable).

Divorce Certificate (decree): A copy of your divorce certificate(s), with translation (if applicable).

Adoption Certificate: A copy of your adoption certificate, with translation (if applicable).

Arrest Records: Certified copies of arrest records (if applicable). Please call our office **immediately** if you have ever been arrested **anywhere** in the world.

Copies of Passports: Copies of all valid and expired passports for you and each family member who will be applying with you (**do not copy blank pages**).

\_\_\_ I-94 Cards: A clear copy of your I-94 Arrival/Departure record and one for each member of the family. Be sure the copy shows the stamp in the upper right with dates and place of entry.

\_\_\_ BCIS or INS Approval Notices:

If you (or any family member) have previously changed your nonimmigrant status **or** extended your stay, please forward copies of:

\_\_\_ Form I-797, Notices of Approval

\_\_\_ Form I-171C, Notices of Approval

If you have been in F-1 status, please send copies of:

\_\_\_ I-20 forms still in your possession;

\_\_\_ EAD if applicable.

If you have been in J-1 status, please send copies of:

\_\_\_ all DS-2019 or IAP-66 forms.

If you are subject to § 212(e), please provide a copy of the waiver, or contact our office.

\_\_\_ Job Confirmation Letter (sample enclosed\*): Please ask your employer to retype this onto company letterhead and sign where appropriate. In some cases, we will provide this directly to the employer. **You should obtain this just prior to our filing of the I-485.**

\_\_\_ Copy of Bank Letter/Current Bank Statement and/or Investment Statements: that provides you your current account balance(s).

**PLEASE NOTE: All original documents must be available upon request of the government. We can provide a certified copy of your original documents, if necessary.**

***SAMPLE EMPLOYMENT CONFIRMATION LETTER***

**[TO BE COMPLETED AND PRINTED ON COMPANY LETTERHEAD]**

[DATE]

Paul E. Novak, Jr. Center Director  
Bureau of Citizenship and Immigration Services  
Vermont Service Center  
75 Lower Welden Street  
St. Albans, Vermont, 05479-0001

**RE: Name of Applicant**

Dear Mr. Novak:

I am writing to confirm [insert name of company]'s offer of employment to [name of foreign national] in the permanent position of [insert title] at [company name]. Ms./Mr [insert surname] has been employed by [company name] in valid [insert nonimmigrant classification] nonimmigrant status since [insert Month/Year]. [S/He] is remunerated at an annualized rate of [insert salary] consistent with the terms and conditions of the BCIS-approved employment-based immigrant visa petition enclosed or secured on [his/her] behalf.

Please do not hesitate to contact me through our U.S. Immigration Counsel, Sherryl S. Pond, at 401-849-0111, if you have any questions.

Very Truly Yours,

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[Name]  
[Title]