



CHILLICO
& Associates LLC

IMMIGRATION INTAKE QUESTIONNAIRE

Prior to your consultation, please provide our office with the following materials so that we are best equipped to assess your case: Copy of passport biographic page, green card, I-94 Arrival/Departure Card, any previous decisions by the Immigration Service, an Immigration Court, or any other immigration agency, as well as any criminal records, if applicable.

Please complete this questionnaire to the best of your abilities and provide as much detail as possible. Please return the requested documentation, along with the completed questionnaire, by fax, email or mail to (843) 203-5734, admin@chillico.law, or Chillico & Associates, LLC, 3850 Bessemer Road, Suite 120, Mount Pleasant, SC 29466.

Please briefly explain why you are seeking immigration advice:

PERSONAL/CONTACT INFORMATION

1. First Name: _____

Middle Name: _____

Family Name: _____

Other Names Used (including Maiden Name): _____

2. Home Address:
Number & Street

Apt No, City, State, Zip Code, _

Country: _____

3. Date of Birth (Mo/Day/Yr) _____

4. Country of Birth: _____

5. Social Security Number: _____

6. Telephone Numbers:

Home _____

Work _____

Cell _____

7. E-Mail _____

8. **[FOR U.S. CITIZENSHIP APPLICATION ONLY]**

Height _____ Weight _____ Eye color _____ Hair Color _____

IMMIGRATION STATUS/HISTORY (WRITE "N/A" IF NOT APPLICABLE)

9. Alien Registration Number A _____

10. List all your Passports (Countries)

Passport Number(s) _____

Date Issued _____

Expiration Date _____

11. Last Entry Into U.S.: When _____

Where _____

Visa Status _____ Until: _____

I-94 Number (If applicable) _____

Prior Entries? _____

12. Please list all U.S. Visas Previously Issued: (If Applicable)

Where _____

When _____

Valid Until _____

Category (B, F, G, H, L, J, L, O, S, T, U) _____

13. If you are a green card holder, how and when did you obtain your green card? (i.e., via employment, family member, etc.). Please be specific. _____

INFORMATION ON YOUR EMPLOYMENT (WRITE "N/A" IF NOT APPLICABLE)

14. Employer's Name _____
Employer's Address:
Number & Street _____ Suite No. _____
City, Province, Postal Code, Country _____
Name of Work Supervisor and/or Contact _____
Phone Number of Supervisor/Contact _____

INFORMATION ON YOUR MARITAL STATUS (WRITE "N/A" IF NOT APPLICABLE)

15. Marital Status: __ Single __ Married __ Separated __ Divorced __ Widowed
- A) Name of Spouse _____
B) Address of Spouse (if living apart): _____
C) Birth Date of Spouse _____
D) Social Security Number _____
E) Alien Registration Number: A _____
F) Date of Marriage _____
G) Place of Marriage _____
H) City, Province, and Country of Birth of Spouse _____
I) Spouse's Passport (Countries) _____
Passport Number _____
Date Issued _____
Expiration Date _____
J) If Most Recent Marriage was Terminated by Divorce or Death
Date _____ Where _____
K) Number of YOUR Prior Spouses _____
Name _____ Date of Divorce _____
L) Number of your SPOUSE's Prior Spouses _____
Name _____ Date of Divorce _____

FAMILY

16. **Children:** If applicable, please provide the following information for all children including step children and adopted children:

Child 1:

- A. Full Name _____
- B. Male ___ Female ___
- C. Marital Status _____
- D. Date of Birth _____
- E. Place of Birth _____
- F. Place of Residence _____
- G. Immigrant Status _____

Child 2:

- A. Full Name _____
- B. Male ___ Female ___
- C. Marital Status _____
- D. Date of Birth _____
- E. Place of Birth _____
- F. Place of Residence _____
- G. Immigrant Status _____

17. **Parents:** Please provide the following information for your parents: _

Mother:

- A. Full Name _____
- B. Date of Birth _____
- C. Place of Birth _____
- D. Place of Residence _____
- E. Immigrant status in U.S. _____
- F. Country of Citizenship _____
- G. Deceased? _____

Father:

- A. Full Name _____
- B. Date of Birth _____
- C. Place of Birth _____
- D. Place of Residence _____
- E. Immigrant status in U.S. _____
- F. Country of Citizenship _____
- G. Deceased? _____

18. Do You or Your Spouse Have Brothers or Sisters Who Are U.S. Citizens or Resident Aliens (have Green Cards)? Yes ___ No ___
If Yes, How Long Have They Been in that Status? _____

19. Do Either You or Your Spouse Have a Grandparent Who Was Born in the U.S. or Became a Naturalized Citizen? Yes ___ No ___

20. Has An Immigrant (Green Card) Petition Ever Been Filed for You, Your Spouse, or

Children?
Yes___No___

If Yes, Please State When, Where, What Type, and the Status of that Application.

Has The Person Filing This Immigrant Petition For You Ever Filed An Immigrant Petition For Someone Else? Yes___No___

21. Has a Labor Certification Ever Been Filed You, Your Spouse, or Children? Yes___No___
If Yes, Please State When, Where, What Type, And the Status of that Application.

22. Have You or Your Spouse Ever Worked for the United States Government, Including the Military? Yes___No___

EDUCATION, EXPERIENCE, AND MEMBERSHIP

NOTE: In lieu of completing this section, you may provide us with an updated resume/*curriculum vitae*.

Names of Schools,	Field Of Study	Degrees or Certificates	Dates of Program
-------------------	----------------	-------------------------	------------------

1. EXPERIENCE

Employer /Location	Position	Dates of Employment
--------------------	----------	---------------------

2. **MEMBERSHIP.** Please list any groups or organizations to which you have ever belonged in the U.S. or abroad.

TRAVEL [ONLY FOR GREEN CARD HOLDERS]

3. List below all the trips you have taken outside of the United States since becoming a lawful permanent resident (i.e., green card holder). Provide separate page if additional space is needed.

Date you left the U.S. (mm/dd/yr)	Date you returned to U.S. (mm/dd/yr)	Country visited

PERSONAL BACKGROUND (PLEASE ANSWER ALL QUESTIONS)

1. Have You **Ever**:

- A) Served in a foreign military? Yes___No___. If so, please note rank, location, and approximate dates_____
- B) Made an Incorrect or Fraudulent Statement or Misrepresented a Fact to Obtain or Try to Obtain Any Visa or Immigration Benefit from the U.S., Including Entry Into the U.S.? Yes_ No___
- C) Been Treated for A Mental Disorder, Mental Retardation, Drug Addiction, or Alcoholism? Yes___No___
- D) Been Given a Citation or Probation, Been Convicted or Confined In a Jail or Prison for Any Reason Including Political Reasons? Yes___No___
- E) Worked Without Authorization? Yes___No___
- F) Overstayed Any U.S. Visa, or Otherwise Violated Your Visa Status? Yes___No___
- G) Been Convicted of Any Crime Either in the U.S. or Anywhere in the World? (Excluding *Minor* Traffic Offenses) Yes___No___

Please note previous convictions and include date and place of final dispositions if available_____

- H) Been Involved with Drugs or Narcotics Anywhere in the World? Yes___No___
- I) Been a Victim of Domestic Violence? Yes___No___

J) Been the Victim of a Crime in the U.S. or Assisted in the Investigation or Prosecution of a Crime against you or Another Person? Yes ___ No ___

2. Have You **Ever** Been Required to Appear in U.S. Immigration Court or Been the Subject of U.S. Removal, Deportation or Exclusion Proceedings? Yes ___ No ___
If Yes, When, Where, and What Was the Final Result?

3. Have You, Your Spouse, or Children Been Questioned or Arrested by the Immigration Service? Yes ___ No ___

If Yes, When, Where, and What Was the Final Disposition?

(Please provide copies of all documents regarding all prior contact with the Immigration Service.)

4. Do You or Your Spouse Fear Harm in Your Home Country or are You Afraid That Certain Groups or Persons in Your Home Country Might Try to Hurt You? Yes ___ No ___
If Yes, Please Explain:

5. Have You or Your Spouse ever been in the US on a J-1 Visa? Yes ___ No ___
If Yes, Then on Which Program, and were either of you Subject to the Requirement That You Return to Your Home Country for Two Years?

6. Have you and your Family Filed all Your U.S. Income Taxes? Yes ___ No ___

Please sign and date this Questionnaire to confirm that the contents are true and correct to the best of your knowledge and belief.

[SIGNATURE PAGE TO FOLLOW]

Signature

Date

How did you hear of Chillico & Associates, LLC?
