



U.S. Department of State
NONIMMIGRANT FIANCÉ(E) VISA APPLICATION
 USE WITH FORM DS-156

OMB APPROVAL NO.1405-0096
 EXPIRES: 07/31/2007
 ESTIMATED BURDEN: 1 HOUR*

The following questions must be answered by all applicants for visas to enter the United States as the fiancée or fiancé of a U.S. citizen in order that a determination may be made as to visa eligibility.

This form, together with Form DS-156, Nonimmigrant Visa Application, completed in duplicate, constitutes the complete application for a "K" Fiancé(e) Nonimmigrant Visa authorized under Section 222(c) of the Immigration and Nationality Act.

1. FAMILY NAME	FIRST NAME	MIDDLE NAME
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2. DATE OF BIRTH (mm-dd-yyyy)	3. PLACE OF BIRTH (City, Province, Country)
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4. MARITAL STATUS
 If you are now married or were previously married, answer the following:

a. Name of spouse: _____

b. Date (mm-dd-yyyy) and place of marriage: _____

c. How and when was marriage terminated: _____

d. If presently married, how will you marry your U.S. citizen fiancé(e)? Explain:*

* NOTE: If presently married to anyone, you are **not** eligible for a fiancé(e) visa.

5. LIST NAME, DATE AND PLACE OF BIRTH OF ALL UNMARRIED CHILDREN UNDER 21 YEARS OF AGE	NAME	BIRTH DATE (mm-dd-yyyy)	BIRTH PLACE	WILL ACCOMPANY		WILL FOLLOW	
				YOU		YOU	
				YES	NO	YES	NO
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THE FOLLOWING DOCUMENTS MUST BE ATTACHED IN ORDER TO APPLY FOR A FIANCE(E) NONIMMIGRANT VISA

- Your birth certificate
- Birth certificates of all children listed in No. 5
- Death certificate of spouse (if any)
- Marriage certificate (if any)
- Divorce decree (if any)
- Police certificates
- Evidence of engagement to your fiancé(e)
- Evidence of financial support

NOTE: All of the above documents will also be required by the U.S. Citizenship and Immigration Services (USCIS) when you apply for adjustment of status to lawful permanent resident. The USCIS will accept these documents for that purpose.

DO NOT WRITE BELOW THIS LINE
The consular officer will assist you in answering this part.

I understand that I am required to submit my visa to the United States Immigration Officer at the place where I apply to enter the United States, and that the possession of a visa does not entitle me to enter the United States if at that time I am found to be inadmissible under the immigration laws. I further understand that my adjustment of status to permanent resident alien is dependent upon marriage to a U.S. citizen and upon meeting all of the requirements of the U.S. Department of Homeland Security.

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 deportation.

I hereby certify that I am legally free to marry and intend to marry _____, a U.S. citizen, within 90 days of my admission into the United States.

I do solemnly swear or affirm that all statements which appear in this application have been made by me and are true and complete to the best of my knowledge and belief.

 Signature of Applicant

SUBSCRIBED AND SWORN TO before me this _____ day of _____, _____ at: _____

 United States Consular Officer

*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, D.C. 20520.