U.S. DEPARTMENT OF STATE · DS-160 · USMCA PROFESSIONAL WORKER

TN (Mexico) Completed DS-160 Form

285 responses | 20 sections | ~55 min to fill | TN & USMCA work visas

These are completed examples — real questions with fictional answers, shown for reference. The applicant, the businesses and every detail are made up.

§1 13 responses

Personal Information - Part 1

Surnames

Enter all surnames as listed in your passport. If only one name is listed in your passport, enter that Surname.

Surname *

HERNANDEZ LOPEZ

Given Names

If your passport does not include a given name, please enter 'FNU' in Given Names.

Given Names *

DIEGO

Full Name in Native Alphabet

If your passport does not include a given name, please enter 'FNU' in Given Names.

Full Name in Native Alphabet *

DIEGO HERNÁNDEZ LÓPEZ

NA Does Not Apply/Technology Not Available

Other Names

Other names used include your maiden name, religious name, professional name, or any other names which you are known by or have been known by in the past.

Have you ever used other names (i.e., maiden, religious, professional, alias, etc.)? *

Yes

No

Provide the following information:

Other Surnames Used (maiden, religious, professional, aliases, etc.) *

HERNANDEZ

Other Given Names Used *

DIEGO ALEJANDRO

Telecode

Telecodes are 4 digit code numbers that represent characters in some non-Roman alphabet names.

Do you have a telecode that represents your name? *

- ( ) Yes
- (•) No

Sex

Please select MALE or FEMALE

Sex *

MALE

Marital Status *

MARRIED

Date of Birth

If day or month is unknown, enter as shown in passport.

Date of Birth *

14 MAR 1993

City of Birth *

MONTERREY

State/Province of Birth *

NUEVO LEON

NA Does Not Apply

Country/Region

Select the name that is currently in use for the place where you were born.

Country/Region of Birth *

MEXICO - NUEVO LEON

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7 responses

Personal Information - Part 2

Country/Region of Origin (Nationality) *

MEXICO

Do you hold or have you held any nationality other than the one indicated above on nationality? *

- ○ Yes
- ◉ No

Permanent Resident

Permanent resident means any individual who has been legally granted by a country/region permission to live and work without time limitation in that country/region.

Are you a permanent resident of a country/region other than your country/region of origin (nationality) indicated above? *

- (•) Yes
- ( ) No

Other Permanent Resident Country/Region

Country/Region of Permanent Residence *

SPAIN

Identification Numbers

Your National ID Number is a unique number that your government provides. The U.S. Government provides unique numbers to those who seek employment (Social Security Number) or pay taxes (Taxpayer ID).

National Identification Number *

HELD930314HNLRPG09

[ ] NA Does Not Apply

U.S. Social Security Number *

[x] NA Does Not Apply

U.S. Taxpayer ID Number *

- [x] NA Does Not Apply

§3

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Purpose of Visa

Purpose of Visit

Purpose of Trip to the U.S. *

NAFTA PROFESSIONAL (TD/TN)

Specify Visa *

NAFTA PROFESSIONAL (TN)

Have you made specific travel plans? *

- (●) Yes
- ( ) No

Provide a complete itinerary for your travel to the U.S.

Travel Plans

If you are unsure of your Date of Arrival in U.S. or Date of Departure from U.S., please provide an estimate.

Arrival Date *

03 NOV 2025

Arrival Flight (if known)

AM684

Arrival City in the USA *

SEATTLE

Departure Date *

31 OCT 2028

Departure Flight (if known)

AM685

Departure City from the USA *

SEATTLE

Locations you plan to visit in the USA:

Location *

SEATTLE

Location *

PORTLAND

Address where you will stay in the U.S.

Address Line 1 *

1200 WESTLAKE AVE N

Address Line 2

APT 804

City *

SEATTLE

State *

WASHINGTON

Zip Code

98109

Person/Entity Paying for Your Trip *

Other Person

Provide the following information:

Surnames of Person Paying for Trip *

HERNANDEZ

Given Names of Person Paying for Trip *

RICARDO

Telephone Number *

528183550101

Email Address *

RICARDO.HERNANDEZ@EXAMPLE.COM

NA Does Not Apply

Payer relationship to You *

Parent

Is the address of the party paying for your trip the same as your Home or Mailing Address? *

Yes

No

Address of Person Paying

Street Address (Line 1) *

CALLE HIDALGO 315

Street Address (Line 2) *Optional

COL CENTRO

City *

MONTERREY

State/Province *

NUEVO LEON

NA Does Not Apply

Postal Zone/ZIP Code *

64000

NA Does Not Apply

Country/Region *

MEXICO

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5 responses

Travel Companions

Traveling with Others

You should answer Yes to this question if you are traveling with family, as part of an organized tour, or as part of a performing group or athletic team. You do not need to list individuals who are traveling with you for the purposes of employment with the same employer.

Are there other persons traveling with you? *

- (●) Yes
- ( ) No

Are you traveling as part of a group or organization? *

- ( ) Yes
- (●) No

Provide the following information for each person traveling with you:

Surnames of the person traveling with you *

GARZA TREVINO

Given names of the person traveling with you *

VALERIA

Relationship to you *

Spouse

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21 responses

Previous U.S. Travel History

Have you ever been in the U.S.? *

- (●) Yes
- ( ) No

Previous U.S. Visits

If you are unsure about when you visited the U.S., please provide a best estimate.

Details on your visit

Provide information on your last U.S. visit:

Date Arrived *

20 MAR 2024

Length of stay in the U.S. *

1

Time period *

Week(s)

Date Arrived *

08 DEC 2022

Length of stay in the U.S. *

10

Time period *

Day(s)

Do you or did you ever hold a U.S. Driver's License? *

- ( ) Yes
- (•) No

Have you ever been issued a U.S. Visa? *

- (•) Yes
- ( ) No

Previous U.S. Visa

Date Last Visa Was Issued *

11 SEP 2019

Visa Number

Enter the 8-digit number that is displayed in red on the lower right hand side of your visa. If your previous visa was a Border Crossing Card enter the last 12-digit number of the first line of the machine readable zone.

Visa Number *

48213967

- [ ] NA Do not know

Are you applying for the same type of visa? *

- ( ) Yes
- (•) No

Are you applying in the same country or location where the visa above was issued, and is this country or location your place of principal of residence? *

- (•) Yes
- ( ) No

Ten-printed

Ten-printed means that you have provided fingerprints for all your fingers, as opposed to having provided only two fingerprints.

Have you been ten-printed? *

- (•) Yes
- ( ) No

Has your U.S. Visa ever been lost or stolen? *

- (•) Yes
- ( ) No

Enter year visa was lost or stolen: *

2023

Explain *

MY PASSPORT CONTAINING THE VISA WAS LOST DURING A

Has your U.S. Visa ever been cancelled or revoked? *

- ○ Yes
- ◉ No

Have you ever been refused a U.S. Visa, or been refused admission to the United States, or withdrawn your application for admission at the port of entry? *

- ○ Yes
- ◉ No

Have you ever been denied travel authorization by the Department of Homeland Security through the Electronic System for Travel Authorization (ESTA)? *

- ( ) Yes
- (•) No

Has anyone ever filed an immigrant petition on your behalf with the United States Citizenship and Immigration Services? *

- ( ) Yes
- (•) No

§6

28 responses

Address and Phone Details

Home Address

Street Address (Line 1) *

AV LAZARO CARDENAS 2400

Street Address (Line 2)

TORRE B DEPTO 1204

City *

SAN PEDRO GARZA GARCIA

State/Province *

NUEVO LEON

NA Does not apply

Postal Zone/ZIP Code *

66260

NA Does not apply

Country/Region *

MEXICO

Mailing Address

If your mailing address is different from your home address, please provide your mailing address.

Is your Mailing Address the same as your Home Address? *

- ( ) Yes
- (•) No

Mailing Address

Street Address (Line 1) *

CALLE HIDALGO 315

Street Address (Line 2)

COL CENTRO

City *

MONTERREY

State/Province *

NUEVO LEON

- [ ] NA Does not apply

Postal Zone/ZIP Code *

64000

NA Does not apply

Country/Region *

MEXICO

Phone

You must provide a primary phone number. The primary phone number should be the phone number at which you are most likely to be reached; this could be a land line or a cellular/mobile number. If you have an additional land line or a cellular/mobile number please list that as your secondary phone number.

Phone

Primary Phone Number *

528183550142

Secondary Phone Number *

528112550166

NA Does not apply

Work Phone Number *

528183550190

NA Does not apply

Have you used any other phone numbers in the last five years? *

- (•) Yes
- ( ) No

Provide the following information for each phone number:

Additional Phone Number *

2065550143

Email Address

You must provide an email address. The email address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you have reasonable access.

Email Address *

DIEGO.HERNANDEZ@EXAMPLE.COM

Have you used any other email addresses in the last five years? *

- (•) Yes

No

Additional Email Address *

DHERNANDEZ@SIERRAMADRE.EXAMPLE.COM

Social Media

Social Media Provider/Platform *

LINKEDIN

Link to Social Media Profile *

HTTPS://WWW.LINKEDIN.COM/IN/DIEGO-HERNANDEZ-DEV

Social Media Provider/Platform *

INSTAGRAM

Link to Social Media Profile *

HTTPS://WWW.INSTAGRAM.COM/DIEGO.HDZ.LPZ/

Do you wish to provide information about your presence on any other websites or applications you have used within the last five years to create or share content (photos, videos, status updates, etc.)? *

- (●) Yes
- ( ) No

Provide the following information for each website or application:

Additional Social Media Platform *

GITHUB

Additional Social Media Handle *

HTTPS://GITHUB.COM/DHERNANDEZ-LPZ

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13 responses

Passport Information

Passport/Travel Document Type *

Regular

Passport/Travel Document Number

Enter the information on the travel document you will be using when traveling to the U.S. Your travel document should be a valid, unexpired passport or other valid, unexpired documentation that is sufficient to establish your identity and nationality.

Passport/Travel Document Number *

G28471935

Passport Book Number

The Passport Book Number is commonly called the inventory control number. You may or may not have a Passport Book Number on your passport. The location of the Passport Book Number on your passport may vary depending on the country that issued your passport. Please contact your passport issuing authority if you are unable to determine whether or not your passport contains a Passport Book Number.

Passport Book Number *

- [x] NA Does not apply

Country/Authority that Issued Passport/Travel Document *

MEXICO

Where was the Passport/Travel Document Issued?

City *

MONTERREY

State/Province *If shown on passport

NUEVO LEON

Country/Region *

MEXICO

Issuance Date *

04 JUN 2023

Expiration Date

In most cases your passport/Travel Document must have at least six months of validity beyond the date of your visa application and/or your arrival in the United States.

Expiration Date *

04 JUN 2033

NA No expiration

Have you ever lost a passport or had one stolen? *

- (•) Yes
- ( ) No

Provide the following information for each lost or stolen passport:

Passport/Travel Document Number *

G11208734

☐ NA Do not know

Country/Authority that Issued Passport/Travel Document *

MEXICO

Explain the Circumstances *

LOST DURING A MOVE BETWEEN APARTMENTS IN JUNE 20:

§8

11 responses

US Contact Information

Contact Person or Organization in the United States

Your U.S. Point of Contact can be any individual in the U.S. who knows you and can verify, if necessary, your identity. If you do not personally know anyone in the U.S., you may enter the name of the store, company, or organization you plan to visit during your trip.

Contact Person or Organization in the United States

Contact Person

Surnames *

Given Names *

☑ Do Not Know

Organization Name

Organization Name *

CASCADE DATA LABS INC

☐ Do Not Know

Relationship To You *

EMPLOYER

Address and Phone Number of Point of Contact

U.S. Street Address (Line 1) *

401 TERRY AVE N

U.S. Street Address (Line 2)

FLOOR 6

City *

SEATTLE

State *

WASHINGTON

ZIP Code (if known)

98109

Phone Number *

2065550142

Email Address *

HR@CASCADEDATALABS.EXAMPLE.COM

NA Does not apply

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13 responses

Family Information

Father's Full Name and Date of Birth

Surnames *

HERNANDEZ

NA Do not know

Given Names *

RICARDO

NA Do not know

Date of Birth *

30 NOV 1962

NA Do not know

Is your father in the U.S.? *

- ( ) Yes
- (•) No

Mother's Full Name and Date of Birth

Surnames *

LOPEZ

- [ ] NA Do not know

Given Names *

MARIA FERNANDA

- [ ] NA Do not know

Date of Birth *

16 MAY 1965

- [ ] NA Do not know

Is your mother in the U.S.? *

- ( ) Yes

- [x] No

Immediate Relatives

Means fiancé/fiancée, spouse (husband/wife), child (son/daughter), or sibling (brother/sister).

Do you have any immediate relatives, not including parents, in the United States? *

- [x] Yes
- [ ] No

Provide the following information:

Surnames *

HERNANDEZ LOPEZ

Given Names *

ANDREA

Relationship To You *

SIBLING

Relative status *

U.S. Citizen

§10

7 responses

Spouse Information

Spouse's Surname (Including Maiden Name) *

GARZA TREVINO

Spouse's Given Name *

VALERIA

Spouse's Date of Birth *

02 AUG 1994

Spouse's Country/Region of Origin *

MEXICO

Spouse's Place of Birth

City *

SALTILLO

NA Do not know

Country *

MEXICO - COAHUILA

Type of Address Where Spouse Lives *

Same as Home Address

§11

14 responses

Current Occupation

Present Work/Education/Training Information

Primary Occupation *

COMPUTER SCIENCE

Present Employer or School Information

Present Employer or School Name *

SIERRA MADRE SOFTWARE SA DE CV

Present Employer or School Address

Street Address (Line 1) *

AV RICARDO MARGAIN 444

Street Address (Line 2)

PISO 9

City *

SAN PEDRO GARZA GARCIA

State/Province *

NUEVO LEON

☐ NA Does not apply

Postal Zone / ZIP Code *

66265

NA Does not apply

Country / Region *

MEXICO

Phone Number *

528183550190

Start Date *

01 OCT 2019

Monthly Income in Local Currency (if employed) *

3400

NA Does not apply

Briefly describe your duties *

DESIGN AND DEVELOP BACKEND SERVICES AND APIS FOR /

NAFTA / USMCA Professional (TN) Details

Which profession to enter

The profession you will practise in the U.S., as it appears on the USMCA professions list, in 20 characters or fewer (e.g. ENGINEER). CEAC asks this instead of a primary occupation for TN applicants.

Profession *

SYSTEMS ANALYST

Which credentials to enter

The qualifications that make you eligible for the profession, in 50 characters or fewer (e.g. BACHELOR OF ENGINEERING; P.ENG LICENSE).

Education Degrees, Licenses, or Alternative Credentials for your Profession *

BSC COMPUTER SCIENCE - TEC DE MONTERREY

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50 responses

Previous Occupation

Were you previously employed? *

- (●) Yes
- ( ) No

Employer/Employment Information:

Employer Name *

SOFTTEK

Employer Address

Employer Street Address (Line 1) *

BLVD CONSTITUCION 3098

Employer Street Address (Line 2)

City/Town *

MONTERREY

State/Province *

NUEVO LEON

NA Does not apply

Postal Zone/ZIP Code *

64650

NA Does not apply

Country *

MEXICO

Employer Telephone Number *

528181580000

Job Title *

JUNIOR SOFTWARE DEVELOPER

Supervisor's Surname *

GARZA

NA Do not know

Supervisor's Given Names *

ALEJANDRO

NA Do not know

Employment Date From *

15 JUL 2016

Employment Date To *

27 SEP 2019

Briefly describe your duties *

BUILT INTERNAL REPORTING TOOLS IN PYTHON AND SQL;

Employer Name *

IBERIA DIGITAL SL

Employer Address

Employer Street Address (Line 1) *

CALLE DE ALCALA 45

Employer Street Address (Line 2)

PLANTA 3

City/Town *

MADRID

State/Province *

MADRID

NA Does not apply

Postal Zone/ZIP Code *

28014

NA Does not apply

Country *

SPAIN

Employer Telephone Number *

34915550172

Job Title *

SOFTWARE DEVELOPER

Supervisor's Surname *

MORENO

NA Do not know

Supervisor's Given Names *

LUCIA

NA Do not know

Employment Date From *

02 SEP 2013

Employment Date To *

30 JUN 2016

Briefly describe your duties *

DEVELOPED WEB APPLICATIONS IN JAVA FOR A RETAIL CLIE

Level of Education

You must answer Yes to this question if you have ever attended, for any length of time, a high school/secondary school (or its equivalent in your country) or college, university, graduate school, a doctoral program, or a vocational program.

Have you attended any educational institutions at a secondary level or above? *

- (•) Yes
- ( ) No

Provide the following information on the educational institution(s) you have attended.

Name of Institution *

INSTITUTO TECNOLOGICO Y DE ESTUDIOS SUPERIORES DE

Address

Street Address (Line 1) *

AV EUGENIO GARZA SADA 2501 SUR

Street Address (Line 2)

City *

MONTERREY

State/Province *

NUEVO LEON

NA Does not apply

Postal Zone/ZIP Code *

64849

NA Does not apply

Country *

MEXICO

Course of Study *

COMPUTER SCIENCE

Date of Attendance From *

08 AUG 2008

Date of Attendance To *

24 MAY 2013

Name of Institution *

UNIVERSIDAD POLITECNICA DE MADRID

Address

Street Address (Line 1) *

CALLE RAMIRO DE MAEZTU 7

Street Address (Line 2)

City *

MADRID

State/Province *

MADRID

NA Does not apply

Postal Zone/ZIP Code *

28040

NA Does not apply

Country *

SPAIN

Course of Study *

MASTER IN SOFTWARE ENGINEERING

Date of Attendance From *

15 SEP 2014

Date of Attendance To *

20 JUN 2016

§13

21 responses

Additional Occupation Details

Do you belong to a clan or tribe? *

- ( ) Yes
- (•) No

Provide a List of Languages You Speak

Enter only one language per field. To add more languages, use the Add Another button below — do not list several languages in the same field.

Language Name *

SPANISH

Language Name *

ENGLISH

Language Name *

PORTUGUESE

Have you traveled to any countries/regions within the last five years? *

- (•) Yes
- ( ) No

Provide a List of Countries/Regions Visited

Country/Region *

UNITED STATES OF AMERICA

Country/Region *

SPAIN

Country/Region *

COLOMBIA

Country/Region *

BRAZIL

Have you belonged to, contributed to, or worked for any professional, social, or charitable organization? *

- (●) Yes
- ( ) No

Provide a List of Organizations

Organization Name *

CRUZ ROJA MEXICANA

Organization Name *

TECHO MEXICO

Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience? *

- ( ) Yes
- (●) No

Have you ever served in the military? *

- (●) Yes
- ( ) No

Provide the following information:

Name of Country/Region

Please select the current name of the country/region where you performed military service.

Name of Country/Region *

MEXICO

Branch of Service *

ARMY

Rank/Position *

PRIVATE

Military Specialty *

NATIONAL MILITARY SERVICE CONSCRIPT

Date of Service From *

05 FEB 2011

Date of Service To *

10 DEC 2011

Have you ever served in, been a member of, or been involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? *

- ( ) Yes
- (•) No

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3 responses

Security Background - Part 1

Do you have a communicable disease of public health significance? (Communicable diseases of public significance include chancroid, gonorrhea, granuloma inguinale, infectious leprosy, lymphogranuloma venereum, infectious stage syphilis, active tuberculosis, and other diseases as determined by the Department of Health and Human Services.) *

- ( ) Yes
- (•) No

Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of yourself or others? *

- ○ Yes
- ◉ No

Are you or have you ever been a drug abuser or addict? *

- ○ Yes
- ◉ No

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7 responses

Security Background - Part 2

Have you ever been arrested or convicted for any offense or crime, even though subject of a pardon, amnesty, or other similar action? *

- ○ Yes
- ◉ No

Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances? *

- ○ Yes

- [x] No

Are you coming to the United States to engage in prostitution or unlawful commercialized vice or have you been engaged in prostitution or procuring prostitutes within the past 10 years? *

- [ ] Yes
- [x] No

Have you ever been involved in, or do you seek to engage in, money laundering? *

- [ ] Yes
- [x] No

Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the United States? *

- [ ] Yes
- [x] No

Have you ever knowingly aided, abetted, assisted or colluded with an individual who has committed, or conspired to commit a severe human trafficking offense in the United States or outside the United States?*

- ○ Yes
- ◉ No

Are you the spouse, son, or daughter of an individual who has committed or conspired to commit a human trafficking offense in the United States or outside the United States and have you within the last five years, knowingly benefited from the trafficking activities?*

- ○ Yes
- ◉ No

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12 responses

Security Background - Part 3

Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States?*

- ○ Yes
- ◉ No

Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities?*

- ○ Yes
- ◉ No

Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?*

- ○ Yes
- ◉ No

Are you a member or representative of a terrorist organization?*

- ○ Yes
- ◉ No

Are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing financial assistance or other support to terrorists or terrorist organizations, in the last five years?*

- ○ Yes
- ◉ No

Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide? *

- ( ) Yes
- (•) No

Have you ever committed, ordered, incited, assisted, or otherwise participated in torture? *

- ( ) Yes
- (•) No

Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence? *

- ( ) Yes
- (•) No

Have you ever engaged in the recruitment or the use of child soldiers? *

- ( ) Yes
- (•) No

Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? *

- ○ Yes
- ◉ No

Have you ever been directly involved in the establishment or enforcement of population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free will? *

- ○ Yes
- ◉ No

Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue? *

- ○ Yes
- ◉ No

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5 responses

Security Background - Part 4

Have you ever been the subject of a removal or deportation hearing?*

- [ ] Yes
- [x] No

Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any other United States immigration benefit by fraud or willful misrepresentation or other unlawful means?*

- [ ] Yes
- [x] No

Have you failed to attend a hearing on removability or inadmissibility within the last five years?*

- [ ] Yes
- [x] No

Have you ever been unlawfully present, overstayed the amount of time granted by an immigration official or otherwise violated the terms of a U.S. visa?*

- [ ] Yes
- [x] No

Have you ever been removed or deported from any country? *

- ( ) Yes
- (•) No

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5 responses

Security Background - Part 5

Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court? *

- ( ) Yes
- (•) No

Have you voted in the United States in violation of any law or regulation? *

- ( ) Yes
- (•) No

Have you ever renounced United States citizenship for the purposes of avoiding taxation? *

- ○ Yes
- ◉ No

Are you a former exchange visitor (J) who has not yet fulfilled the two-year foreign residence requirement? *

- ○ Yes
- ◉ No

Have you attended a public elementary school on student (F) status or a public secondary school after November 30, 1996 without reimbursing the school? *

- ○ Yes
- ◉ No

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10 responses

Temporary Visa Information

Application Receipt/Petition Number *

WAC2590214467

Name of Person/Company who Filed Petition *

CASCADE DATA LABS INC

Where Do You Intend to Work?

Name of Employer *

CASCADE DATA LABS INC

U.S. Street Address (Line 1) *

401 TERRY AVE N

U.S. Street Address (Line 2)

FLOOR 6

City *

SEATTLE

State *

WASHINGTON

ZIP Code (if known)

98109

Phone Number *

2065550142

Enter monthly income (in USD) *

11250

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11 responses

Preparer of Application

Preparer of Application

If someone other than you completed this application, provide their details here. You must still electronically sign the application yourself.

Did anyone assist you in filling out this application?

- (●) Yes
- ( ) No

Preparer Details

Preparer's Surnames

SALINAS

- [ ] NA Does Not Apply

Preparer's Given Names

MARIANA

- [ ] NA Does Not Apply

Organization Name

FRONTERA NORTE MIGRATION ADVISORS

- [ ] NA Does Not Apply

Street Address (Line 1)

AV VASCONCELOS 150

Street Address (Line 2)

PISO 4

City

SAN PEDRO GARZA GARCIA

State/Province

NUEVO LEON

NA Does Not Apply

Postal Zone/ZIP Code

66220

NA Does Not Apply

Country/Region

MEXICO

Relationship To You

IMMIGRATION CONSULTANT