

Website: Remote-Immigration-Attorney.com Email: Help@remote-immigration-attorney.com

Asylum Questionnaire

1. Full Name (as per passport):					
	First Name:	Middle Na	me: La	st Name:	
2. Otl	2. Other Names Used:				
	First Name:	Middle Na	me: La	st Name:	
3. Date of Birth:					
4. Ge	4. Gender:				
5. Co	5. Country of Birth:				
6. Co	untry of Citizenship	Nationality:			
7. Eth	nnicity:				
8. Ra	ce:				
9. Religion:					
10. Current Address:					
Street:					
	City:	State/Province:	Zip/Postal Code:	Country:	
11. Phone Number:					
12.Email Address:					
13. Social Security Number (if any):					
14. Alien Registration Number (if any):					

	Date of Entry:			
	Port of Entry:			
	Last Name:			
	Manner of Entry (e.g., vis type, without inspection):	a		
16. Cur	rent Immigration Status:			
	Status:		Expiration D	ate (if applicable):
Family Inf	ormation			
17.Mar	rital Status:			
[Single			
[Married			
[Divorced			
[Widowed			
18. Spc	ouse's Full Name:			
	First Name:	Middle Nam	e:	Last Name:
19. Spc	ouse's Date of Birth:			
20. Spc	ouse's Country of Birth:			
21. Spc	ouse's Country of Citizensh	nip/Nationality	/ :	

15. Date of Last Entry to the USA:

22. Children Information:

Child 1:

Full Name	
Date of Birth	
Country of Birth	
Current Address	
Immigration Status in the USA	

Child 2:

Full Name	
Date of Birth	
Country of Birth	
Current Address	
Immigration Status in the USA	

Child 3:

Full Name	
Date of Birth	
Country of Birth	
Current Address	
Immigration Status in the USA	

Child 4:

Full Name	
Date of Birth	
Country of Birth	
Current Address	
Immigration Status in the USA	

Persecution Information

23. Have you or your family members ever experienced harm or mistreatment in your home country or any other country?
Yes
☐ No
If yes, provide details (Who, When, Where, How):
24. What is the reason you fear persecution? (Check all that apply)
Race
Religion
Nationality
Membership in a particular social group
Political opinion
Other (please specify):
25. Describe in detail the reasons you fear persecution, including specific incidents and dates:
26. Have you ever been harmed or mistreated by government officials or people working for the government?
Yes
☐ No
If yes, provide details:

.Have you ever been harmed or mistreated by individuals or groups not connected with the government?	
Yes	
☐ No	
If yes, provide details:	
Travel Information	
28. Have you traveled to or lived in any other country besides your home country?	
Yes	
☐ No	
If yes, provide details (Country, Dates, Purpose):	
29. Have you applied for or received refugee status, asylum, or similar protection in any other country?	
Yes	
☐ No	
If yes, provide details:	
Legal Information	
30. Have you ever been involved in any legal proceedings, including criminal or immigration court cases?	
Yes	
☐ No	
If yes, provide details (Dates, Locations, Outcomes):	

31. Have you ever been detained or arrested in any country?
Yes
☐ No
If yes, provide details (Dates, Reasons, Locations):
Additional Information
32. Are you affiliated with any political, social, or religious organizations?
Yes
☐ No
If yes, provide details:
33. Do you have any additional information that you believe is relevant to your asylum claim?
Documents and Evidence
34. List all documents you have that support your asylum claim (e.g., police reports, medical records, affidavits):
32. Do you have any witnesses who can support your claim?
Yes
☐ No
If yes, provide details (Names, Contact Information, Relationship to you):