



K-1 Fiancé Visa Questionnaire

Information About the Petitioner (U.S. Citizen)

1. Full Name (as it appears on your birth certificate, passport, or other legal documents)

First Name:	Middle Name:	Last Name:

2. Any Other Names Used (including maiden name)

First Name:	Middle Name:	Last Name:

3. Date of Birth (MM/DD/YYYY):

4. Place of Birth:

City:	State:	Country:

5. Country of Citizenship:

6. Social Security Number:

7. U.S. Mailing Address:

Street Address:			
Apartment Number:	City:	State:	ZIP Code:

8. Physical Address (if different from mailing address):

Street Address:			
Apartment Number:	City:	State:	ZIP Code:

9. **Daytime Telephone Number:**

10. **Email Address:**

11. **Marital Status:**

- Single
 Married
 Divorced
 Widowed
 Annulled

12. **Previous Marriages (if any):**

Full Name of Former Spouse:	
Date of Marriage (MM/DD/YYYY):	
Date Marriage Ended (MM/DD/YYYY):	
Place of Marriage:	
Place Marriage Ended	

Information About the Beneficiary (Foreign Fiancé(e))

13. **Full Name:**

First Name:	Middle Name:	Last Name:

14. **Any Other Names Used (including maiden name):**

First Name:	Middle Name:	Last Name:

15. **Date of Birth (MM/DD/YYYY):**

16. **Place of Birth:**

City:	State/Province:	Country:

17. **Country of Citizenship:**

18. **Country of Residence:**

19. **Alien Registration Number (if any):**

20. **Social Security Number (if any):**

21. **Current Address:**

Street Address:	<input type="text"/>
Apartment Number:	<input type="text"/>
City:	<input type="text"/>
State/Province:	<input type="text"/>
Country	<input type="text"/>
Postal Code	<input type="text"/>

22. **Daytime Telephone Number:**

23. **Email Address:**

24. **Marital Status:**

- Single
- Married
- Divorced
- Widowed
- Annulled

25. **Previous Marriages (if any):**

Full Name of Former Spouse:	<input type="text"/>
Date of Marriage (MM/DD/YYYY):	<input type="text"/>
Date Marriage Ended (MM/DD/YYYY):	<input type="text"/>
Place of Marriage:	<input type="text"/>
Place Marriage Ended	<input type="text"/>

Information About the Relationship

26. Date of Engagement (MM/DD/YYYY):

27. Date You Met in Person (MM/DD/YYYY):

28. Place You Met in Person:

City:	State/Province:	Country:
<input type="text"/>	<input type="text"/>	<input type="text"/>

29. How Did You Meet? (Provide a brief description):

30. Have you and your fiancé(e) met in person within the last two years?

Yes

No

31. If no, please provide an explanation:

32. Do you have any evidence of your relationship (photos, letters, emails, chat logs, etc.)?

Yes

No

33. If yes, list the types of evidence you have:

Information About the Petitioner's Family

34. Names of Petitioner's Parents:

Parent 1:

Full Name:	<input type="text"/>
Date of Birth (MM/DD/YYYY):	<input type="text"/>
Place of Birth:	<input type="text"/>

Parent 2:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

35. Names of Petitioner's Children (if any):

Child 1:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Child 2:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Child 3:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Child 4:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Information About the Beneficiary's Family

36. Names of Beneficiary's Parents:

Parent 1:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Parent 2:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

37. Names of Beneficiary's Children (if any):

Child 1:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Child 2:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Child 3:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Child 4:

Full Name:	
Date of Birth (MM/DD/YYYY):	
Place of Birth:	

Employment Information

38. Petitioner's Employment:

Current Employer:	
Employer Address:	
Job Title:	
Start Date (MM/DD/YYYY):	

39. Beneficiary's Employment:

Current Employer:	
Employer Address:	
Job Title:	
Start Date (MM/DD/YYYY):	

Additional Information

40. Have you ever filed a petition for this or any other alien fiancé(e) or spouse before?

Yes

No

41. If yes, provide details:

Name of Beneficiary:	
Date Filed (MM/DD/YYYY):	
Outcome:	

42. Has the beneficiary ever been to the United States?

Yes

No

43. If yes, provide details:

Date of Entry (MM/DD/YYYY):	
Place of Entry:	
Visa Type:	
Duration of Stay:	

44. Is there any additional information you believe is relevant to your case?

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