Immigration Corp
Client Profile Worksheet

Personal Data

First Name	Middle Name	Last Name
Present Address in the U.S.		
Phone Number	Email Address	Social Security Number
Place of Birth (City/Country)	Date of Birth (Month/Date/Year)	Country of Citizenship
Current Non Immigrant Status Type of Visa	Expiration Date	Arrival Date
I – 94 Number and/or Alien Registration Number	Date authorized stay will expire	Gender: Male Female Marital Status: Married Single Widowed Divorced
Permanent Address outside of the U.S.		

Dates and prior Periods of Stay in the U.S. for the past 5 Years

Arrival Date / Port of Entry (etc. SFO, JFK)	Departure Date	Type of Visa

Signature	Date

Notes:

Complete and send this worksheet to:

Immigration Corp.
703 Market Street Suites #508 - 510
San Francisco, CA 94103
Fax Number: 415.777.2933

For more information please contact us at 415.777.2930