

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

Application or
Petition Form No. _____

File No. _____

**DATA COLLECTION FOR ALIEN DOCUMENTATION,
IDENTIFICATION & TELECOMMUNICATIONS SYSTEM (ADIT)**

Please print or type information requested below:

COMPLETE NAME _____

COMPLETE MAILING ADDRESS (Include Zip Code) _____

MOTHER'S FIRST NAME _____

FATHER'S FIRST NAME _____

CITY/TOWN/VILLAGE OF BIRTH _____

CITY OF RESIDENCE WHEN APPLYING
FOR A VISA OR IMMIGRANT STATUS _____

CITY OF DESTINATION AT
TIME OF ORIGINAL ADMISSION _____

LOCATION OF CONSULATE WHERE IMMIGRANT VISA
OBTAINED (OR IMMIGRATION OFFICE WHERE ADJUSTED) _____

DATE OF BIRTH _____

PORT OF ENTRY WHEN ADMITTED AS IMMIGRANT OR
OFFICE WHERE ADJUSTED TO LAWFUL PERMANENT RESIDENT _____

SYMBOL ADMITTED UNDER (CLASSIFICATION) _____

DATE ADMITTED OR ADJUSTED TO LAWFUL PERMANENT RESIDENT _____

COUNTRY OF BIRTH _____

CARD NUMBER _____

TRANSACTION NUMBER _____

This form may be overprinted or stamped to show instructions, items requested items received, or other pertinent data which may facilitate processing.

Keep this sheet on top of all material in file until initial decision in made.