

Application or
Petition Form No. _____

File No. _____

Data Collection for Alien Documentation,
Identification & Telecommunications System (ADIT) and I-181

Please print or type information requested below:

NAME: _____

STREET ADDRESS: _____

CITY: _____

STATE/ZIP CODE: _____

SEX
____ Male
____ Female
Date of Birth:

CITY/TOWN/VILLAGE
OF BIRTH:

COUNTRY OF
BIRTH:

COUNTRY OF
NATIONALITY:

COUNTRY OF LAST
RESIDENCE:

MARITAL STATUS: ___Single ___Married ___Widowed ___Divorced ___Separated

OCCUPATION:

MOTHER'S FIRST NAME:

FATHER'S FIRST NAME:

DO NOT WRITE BELOW THIS LINE

N.I. class at time of adjustment	Year adm. to U.S. or year cng. to present NI class
Place last NIV issued (U.S. Consular Post)	Date of issuance of last NIV
NUMBER OF LAST NIV	CLASSIFICATION OF LAST NIV