Harleen



Online Nonimmigrant Visa Application (DS-160)

# Personal, Address, Phone, and Passport Information

Note: You have completed data entry for your NIV application. Before submitting the application, please review your entries below. To navigate to the next section to be reviewed, click the 'Next' button on the bottom of the page. If an entry is incorrect, click on the links on the right side of the page, which will direct you to the page where you entered the data. Once you have reviewed all sections, you will be directed to the Sign and Submit page to complete the application process.

Photo Provided:

Photo will be taken at the ASC.

# DO NOT BRING THIS TO YOUR INTERVIEW

**Edit Personal Information** 

Maraus

Name Provided:

SOURAY MUKHIJA

Full Name in Native Alphabet:

Other Names Used:

Telecode Name Used:

Sex:

MALE

Marital Status:

UNMARRIED

Date of Birth:

09-05-1999

Country/Region of Birth:

INDTA

Country/Region of Origin (Nationality): 1 N D I A N

Do you hold or have you held any nationality other than the one

indicated above on nationality?

Are you a permanent resident of a country/region other than your country/region of origin (nationality) above? <

National Identification Number: \_ Aadhar card 449626678258

U.S. Social Security Number:

U.S. Taxpayer ID Number:

**Edit Address and Phone Information** 

Home Address:

PLOT NO-3 SIDHU ENCLAVE, SANT HAZARA

SINGH NAGAR PATIALA PUNJAB

City:

State/Province:

Postal Zone/ZIP Code:

147103

Country/Region:

INDIA

Same Mailing Address?

Primary Phone Number:

- 95018-49396

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Secondary Phone Number:

6284768107

Work Phone Number:

Have you used additional phone numbers in the last five years?

Email Address:

Do you have a social media presence?

Social Media Provider/Platform (1): TNSTAGRAM

Social Media Identifier:

SOURAV\_MUFHIJA96

Have you used additional social media platforms in the last five years?

**Edit Passport/Travel Document Information** 

Passport/Travel Document Type:

Passport/Travel Document Number: W9502997

Passport Book Number:

Country/Authority that Issued Passport/Travel Document: INDIA

City where issued:

CHANDIGAAH

Country/Region where issued: INDIA

Issuance Date:

13-01-2023

Expiration Date:

12-01-2033

Have you ever lost a passport or had one stolen?

### Travel Information

#### DO NOT BRING THIS TO YOUR INTERVIEW

**Edit Travel Information** 

The List of Purposes of Trip to the U.S.

Purpose of Trip to the U.S. (1):

Specify:

Have you made specific travel plans?

Intended Date of Arrival:

Intended Length of Stay in U.S.:

Address where you will stay in the U.S.:

Person/Entity Paying for Your Trip:

Name of Person Paying for Your Trip: ASHOK MUKHIJA

Telephone Number: 7527937867

Email Address:

Relationship to You: FATHER

Is the address of the party paying for your trip the same as your Home

or Mailing Address?

Payer's Address:

PLOT NO-3 SIDHU ENCLAVE SANT HAZARA SINGH

NAGAR

City:

State/Province:

Postal Zone/ZIP Code:

147103

Country/Region:

AICHI

Other Persons Traveling with You:

**Edit Travel Companions Information** 

**Edit Previous U.S. Travel Information** 

Have you ever been in the U.S.?

NO

Have you ever been issued a U.S. visa?

Have you ever been refused a U.S. Visa, or been refused admission to the United States, or withdrawn your application for admission at the port of entry?

Explain:

Has anyone ever filed an immigrant petition on your behalf with the United States Citizenship and Immigration Services? NO



### U.S. Contact Information

## DO NOT BRING THIS TO YOUR INTERVIEW

**Edit U.S. Point of Contact Information** 

Contact Person Name in the U.S.: KALING AU

Organization Name in the U.S.: — LINCOLN UNIVERSITY

Relationship to You: 5CHOOL OFFICIAL

U.S. Contact Address: 401 15th STREET, OAKLAND, CA 94612

Phone Number:

Email Address:



### **Family Information**

## DO NOT BRING THIS TO YOUR INTERVIEW

**Edit Family Information: Relatives** 

Father's Surnames:

AC IH YUM

Father's Given Names:

ASHOK

Father's Date of Birth:

01-01-1973

Is your father in the U.S.?

NO

Mother's Surnames:

MUKHIJA

Mother's Given Names:

SUNITA

Mother's Date of Birth:

28-09-1973

Is your mother in the U.S.? NO Do you have any immediate relatives, not including parents in the U.S.?  $\,\,$   $\,$   $\,$   $\,$   $\,$   $\,$ 

Do you have any other relatives in the United States?

# Work / Education / Training Information

## DO NOT BRING THIS TO YOUR INTERVIEW

**Edit Present Work Information** 

Primary Occupation:

Explain:

**Edit Previous Work Information** 

Were you previously employed?

Have you attended any educational institutions at a secondary level or above?

Name of Institution (1): S.R ARYA SENIOR SECONDARY SCHOOL

Address of Institution: BOOKS MARKET PATIALA

City: PATIALA

State/Province: PUNJAB
Postal Zone/ZIP Code: NJ 7 001

Country/Region: INDIA

Course of Study: SENTOR SECONDARY

Date of Attendance From: 2017

Date of Attendance To: 2018

**Edit Additional Information** 

Do you belong to a clan or tribe?

Provide a List of Languages You Speak:

Language Name (1): [NGLISH

Language Name (2): HINDI

Language Name (3): PUNJABI

Have you traveled to any countries/regions within the last five years?

Have you belonged to, contributed to, or worked for any professional, social, or charitable organization?

Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience?

Have you ever served in the military?

### Student/Exchange Visa Information

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**Edit Additional Point of Contact Information** 

Additional Point of Contact Information:

Name(1): CHAMAT KUMAR
Street Address: WARD NUMBER 9 KHAMANON

KHAMANON City:

PUN JAB State/Province: Postal Zone/ZIP Code: \4\801

Country/Region: AICHI

92179 00044 Telephone Number:

Email Address:

SURINDERPAL SINGH Name(2):

# 194 /WARD NO3, NEAR OLD PRIMARY SCHOOL

SAMBALA City:

State/Province: PUNDAB

Postal Zone/ZIP Code: | U 1 | | U

Country/Region: INDIA

Telephone Number: 99147 66 756

Email Address: ADVOCATE SURINDER ARORA @GMAIL.COM

**Edit SEVIS Information** 

N0034748233 SEVIS ID:

Name of School: LINCOLN UNIVERSITY

BBA Course of Study:

Street Address: 401, 15th STREET, OAKLAND CA, 94612