

### Online Nonimmigrant Visa Application (DS-160)

Application - Sensitive But Unclassified(SBU)

We do not need a printed copy of your application at any point during your interview process. Only print this application if you want a copy for your own records. If you print your application, please keep it secure.

Photo Provided:

Photo will be taken at the ASC.

Confirmation Number:



# Your Personal Copy -- Do Not Bring to Interview

### Personal, Address, Phone, and Passport/Travel Document Information

Name Provided: MANPREET KAUR, FNU

Full Name in Native Language: DOES NOT APPLY

Other Names Used: NO

Telecode Name Used: NO

Sex: FEMALE

Marital Status: SINGLE

Date of Birth: 13 JUNE 1993

Place of Birth: JABBOWAL, PUNJAB, INDIA

Country/Region of Origin (Nationality): INDIA

Do you hold or have you held any nationality other than the one NO

indicated above on nationality?

Are you a permanent resident of a country/region other than your NO

country/region of origin (nationality) above?

National Identification Number: 297758316256

U.S. Social Security Number: DOES NOT APPLY

U.S. Taxpayer ID Number: DOES NOT APPLY

Home Address: VPO JABBOWAL

TEH BABA BAKALA

City: AMRITSAR

State/Province: PUNJAB
Postal Zone/ZIP Code: 143116

Country/Region: INDIA

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Same Mailing Address? YES

Primary Phone Number: 9877810309
Secondary Phone Number: 8195905933
Work Phone Number: DOFS NOT APPLY

Do you have any additional phone numbers?

Email Address: kaurmanpreetpunjab4@gmail.com

Do you have any additional email addresses?

Do you have a social media presence?

Social Media Platform: (1): NONE

Social Media Identifier:

Do you have any additional social media presence?

Passport/Travel Document Type: REGULAR
Passport/Travel Document Number: U9605541

Passport Book Number: DOES NOT APPLY

Country/Authority that Issued Passport/Travel Document: INDIA

City Where Issued: AMRITSAR

Country/Region Where Issued: INDIA

Issuance Date: 10 MAY 2021 Expiration Date: 09 MAY 2031

Have you ever lost a passport or had one stolen?

#### **Travel Information**

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

Purpose of Trip to the U.S. (1): ACADEMIC OR LANGUAGE STUDENT (F)

Specify: STUDENT (F1)

Have you made specific travel plans?

Intended Date of Arrival: 10 AUGUST 2023

Intended Length of Stay in U.S.: 4 YEAR(S)

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

Person/Entity Paying for Your Trip:

OTHER PERSON

Person Paying for Your Trip:

SINGH , SAHIB

Telephone Number:

9815223490

Email Address:

DOES NOT APPLY

Relationship to You: PARENT

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

or Mailing Address?

Are there other persons traveling with you?

Have you ever been in the U.S.?

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:

MY F1 VISA WAS REFUSED. REASON

UNKNOWN TO ME.

Has anyone ever filed an immigrant petition on your behalf with the

United States Citizenship and Immigration Services?

NO

#### **U.S. Contact Information**

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

Organization Name in the U.S.: LINCOLN UNIVERSITY

Relationship to You: SCHOOL OFFICIAL 401 15TH STREET U.S. Contact Address:

OAKLAND, CALIFORNIA 94612

Phone Number: 15106288010

Email Address: admissions@lincolnuca.edu

**Family Information** 

Father's Surnames: SINGH **SAHIB** Father's Given Names:

Father's Date of Birth: 15 AUGUST 1963

Is your father in the U.S.? NO Mother's Surnames: **KAUR** 

Mother's Given Names: **SUKHWINDER** Mother's Date of Birth: 15 APRIL 1959

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

### Work/Education/Training Information

Primary Occupation: NOT EMPLOYED

Explain: SINCE I COMPLETED MY GNM. I SE

RVED AN NGO AS VOLUNTEER. BUT TO GROW PROFESSIONALLY. I DECI DED TO PURSUE BACHELORS OF UNI TED STATES AND GOT ADMISSION I

N LINCOLN UNIVERSITY.

Were you previously employed? YES

Employer Name (1): THE CORPORATE HOSPITAL

Employer Address: **BATALA ROAD** 

City: **AMRITSAR** State/Province: **PUNJAB** Postal Zone/Zip Code: 143001 **INDIA** Country/Region:

9814018475 Telephone Number: Job Title: STAFF NURSE **MALHOTRA** Supervisor's Surname:

Supervisor's Given Name: **JATINDER** 

**18 NOVEMBER 2020 Employment Date From:** 

18 MAY 2021 **Employment Date To:** 

Briefly describe your duties: I USE TO MONITOR PATIENTS COND

ITION AND RECORD THE MEDICAL H

ISTORY IN THE SONOGRAPHY DEPAR TMENT AND MAINLY USE TO **CHECK** 

THE PATIENTS COMFORT

AND SAFET

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

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ROYAL INSTITUTE OF NURSING Name of Institution (1): Address of Institution: VPO DHARAR JANDIALA **AMRISTAR** City: State/Province: **PUNJAB** Postal Zone/ZIP Code: 143115 Country/Region: **INDIA** Course of Study: GENERAL NURSING AND MIDWIFERY Date of Attendance From: OCTOBER 2015 DECEMBER 2018 Date of Attendance To: Do you belong to a clan or tribe? NO Provide a List of Languages You Speak: **ENGLISH** Language Name (1): Language Name (2): **PUNJABI** Have you traveled to any countries/regions within the last five years? NO Have you belonged to, contributed to, or worked for any professional, YES social, or charitable organization? ANURADHA PROFESSIONAL EDUCATION SOCITEY Name of Organization (1): Do you have any specialized skills or training, such as firearms, NO explosives, nuclear, biological, or chemical experience? Have you ever served in the military? NO Have you ever served in, been a member of, or been involved with a NO paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? Security and Background Information Do you have a communicable disease of public health significance? (Communicable diseases of public significance NO include chancroid, gonorrhea, granuloma inguinale, infectious leprosy, lymphogranuloma venereum, infectious stage syphilis, active tuberculosis, and others diseases as determined by the Department of Health and Human Services.) Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of NO yourself or others? Are you or have you ever been a drug abuser or addict? NO Have you ever been arrested or convicted for any offense or crime, even though subject of a pardon, amnesty, or NO other similar action? Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances? NO Are you coming to the United States to engage in prostitution or unlawful commercialized vice or have you been NO engaged in prostitution or procuring prostitutes within the past 10 years? Have you ever been involved in, or do you seek to engage in, money laundering? NO Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the NO United States? Are you the spouse, son, or daughter of an individual who has committed or conspired to commit a human NO trafficking offense in the United States or outside the United States and have you within the last five years, knowingly benefited from the trafficking activities? Have you knowingly aided, abetted, assisted or colluded with an individual who has committed or conspired to NO

Have you knowingly aided, abetted, assisted or colluded with an individual who has committed or conspired to commit a severe human trafficking offense in the United States or outside the United States?

Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States?

Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities?

Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?

Are you a member or representative of a terrorist organization?

Are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing financial assistance or other support to terrorists or terrorist organizations, in the last five years?

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NO

NO

NO

NO

NO

Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide? NO Have you ever committed, ordered, incited, assisted, or otherwise participated in torture? NO Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, NO or other acts of violence? Have you ever engaged in the recruitment or the use of the child soldiers? NO Have you, while serving as a government official, been responsible for or directly carried out, at any time, NO particularly severe violations of religious freedom? Have you ever been directly involved in the establishment or enforcement of the population controls forcing a NO woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free will? Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue? NO Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any other United NO States immigration benefit by fraud or willful misrepresentation or other unlawful means? Have you ever been removed or deported from any country? NO Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legal NO custody by a U.S. court?

#### Student/Exchange Visa Information

Additional Point of Contact Information:

Name (1): KAUR, GURPREET

Have you ever renounced United States citizenship for the purpose of avoiding taxation?

Street Address: VILLAGE SUKHRAMPUR TAPPRIAN

City: RUPNAGAR
State/Province: PUNJAB
Postal Zone/ZIP Code: 140001
Country/Region: INDIA

Have you voted in the United States in violation of any law or regulation?

Telephone Number: 9780559790

Email Address: gurpreetkaur123456@gmail.com

Name (2): KAUR, KIRANPREET

Street Address: VILL DHIREKOT

City: AMRITSAR

State/Province:
PUNJAB
Postal Zone/ZIP Code:
143139
Country/Region:
INDIA
Telephone Number:
9872428702

Email Address: kaurkiranpreet648@gmail.com

SEVIS ID: N0032586829

Name of School: LINCOLN UNIVERSITY

Course of Study: BACHELORS IN HEALTH SERVICES ALLIED HEALTH

SCIENCES

Street Address: 401 15TH STREET

OAKLAND, CALIFORNIA 94612

### **Location Information**

Location where you will be submitting your application

Current Location: NEW DELHI, INDIA

### **Preparer of Application**

Did anyone assist you in filling out this application?

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NO

NO

You electronically signed your application on 06-Jul-2023 04:42:55 (GMT-05:00). You were required to electronically sign your application yourself, unless otherwise exempt by regulation, even if the application was prepared by someone other than yourself. Your electronic signature certifies that you have read and understood the questions in this application and that your answers are true and correct to the best of your knowledge and belief. The submission of an application containing any false or misleading statements may result in the permanent refusal of a visa or the denial of entry into the United States. All declarations made in this application are unsworn declarations made under penalty of perjury. (28 U.S.C. 1746).

You certified that you understand that you are required to submit your visa to the United States Immigration Officer at the port where you apply to enter the United States, and that possession of the visa does not entitle you to enter the United States if, upon your arrival, you are found to be inadmissible under U.S. immigration laws. You certified that you understand that any willfully false or misleading statement or willful concealment of a material fact made by you within the application may subject you to permanent exclusion from the United States and, if you are admitted to the United States, may subject you to criminal prosecution and/or deportation.

The information that you have provided in your application and other information submitted with your application may be accessible to other government agencies having statutory or other lawful authority to use such information, including for law enforcement and immigration law enforcement purposes. If fingerprints are collected as part of your application process, they may be used for the purpose of comparing them to other fingerprints in the FBI's Next Generation Identification (NGI) fingerprint system or its successor systems (including civil, criminal, and latent fingerprint repositories). The photograph that you provide with your application may be used for employment verification or other U.S. law purposes.