

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:



Confirmation Number:



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

Name Provided:	AJAY, FNU
Full Name in Native Language:	DOES NOT APPLY
Other Names Used:	NO
Telecode Name Used:	NO
Sex:	MALE
Marital Status:	MARRIED
Date of Birth:	17 SEPTEMBER 1999
Place of Birth:	AMBALA, HARYANA, INDIA
Country/Region of Origin (Nationality):	INDIA
Do you hold or have you held any nationality other than the one indicated above on nationality?	NO
Are you a permanent resident of a country/region other than your country/region of origin (nationality) above?	NO
National Identification Number:	591686156006
U.S. Social Security Number:	DOES NOT APPLY
U.S. Taxpayer ID Number:	DOES NOT APPLY
Home Address:	OPP MAHILA MANDAL VPO KAUL
	DISTT KAITHAL
City:	KAITHAL
State/Province:	HARYANA
Postal Zone/ZIP Code:	136021
Country/Region:	INDIA

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Same Mailing Address?	NO
Mailing Address:	HOUSE NO 1 MAIN MARKET
	KAUL
City:	KAITHAL
State/Province:	HARYANA
Postal Zone/ZIP Code:	136021
Country/Region:	INDIA
Primary Phone Number:	7988314041
Secondary Phone Number:	DOES NOT APPLY
Work Phone Number:	DOES NOT APPLY
Do you have any additional phone numbers?	NO
Email Address:	mamta19981k@gmail.com
Do you have any additional email addresses?	NO
Do you have a social media presence?	
Social Media Platform: (1):	NONE
Social Media Identifier:	
Do you have any additional social media presence?	NO
Passport/Travel Document Type:	REGULAR
Passport/Travel Document Number:	V5548142
Passport Book Number:	DOES NOT APPLY
Country/Authority that Issued Passport/Travel Document:	INDIA
City Where Issued:	AMBALA
Country/Region Where Issued:	INDIA
Issuance Date:	31 DECEMBER 2021
Expiration Date:	30 DECEMBER 2031
Have you ever lost a passport or had one stolen?	NO

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:	SPOUSE OF AN F1 (F2)
Principal Applicant Name:	FNU, MAMTA
Have you made specific travel plans?	NO
Intended Date of Arrival:	10 AUGUST 2023
Intended Length of Stay in U.S.:	4 WEEK(S)
Address where you will stay in the U.S.:	401 COLLEGE AVE
City, State, Postal/Zip Code:	ASHLAND, OHIO 44805
Person/Entity Paying for Your Trip:	SELF
Are there other persons traveling with you?	YES
Are you traveling as part of a group or organization?	NO
Persons Traveling with You:	
Name (1):	FNU, MAMTA
Relationship to You:	SPOUSE
Name (2):	FNU, ANSH KUMAR
Relationship to You:	CHILD

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Interview

7/1/23, 1:28 PM	Consular Ele	ctronic	Applicatio	n Center - Prir	nt Applie	cation
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Have you ever been in the U.S.?			NO			
Have you ever been issued a U.S. visa?			NO			
Have you ever been refused a U.S. Visa, or the United States, or withdrawn your applicates port of entry?			D NO			
Has anyone ever filed an immigrant petition United States Citizenship and Immigration S		n the	NO			
U.S. Contact Information						
Contact Person Name in the U.S.:			GILBI	ERT, ALLISON	I PATR	ICE
Organization Name in the U.S.:			ASHL	AND UNIVER	SITY	
Relationship to You:			SCHC	OL OFFICIAI	-	
U.S. Contact Address:			401 C	COLLEGE AVE		
			ASHL	AND , OHIO	44805	
Phone Number:			+141	92894142		
Email Address:			admis	ssion@ashlar	nd.edu	
Family Information						
Father's Surnames:			KUMA	AR		
Father's Given Names:			RAME	SH		
Father's Date of Birth:			02 JA	NUARY 1966		
Is your father in the U.S.?			NO			
Mother's Surnames:			KAUR	ł		
Mother's Given Names:			SAWA	ARN		
Mother's Date of Birth:			09 M	ARCH 1965		
Is your mother in the U.S.?			NO			
Do you have any immediate relatives, not in	cluding parents in t	the U.S	5.? NO			
Do you have any other relatives in the Unite	d States?		NO			
Spouse's Full Name:			FNU,	MAMTA		
Spouse's Date of Birth:			27 00	CTOBER 1998	3	
Spouse's Country/Region of Origin (National	ity):		INDI	4		
Spouse's City of Birth:			KAITI	HAL		
Spouse's Country/Region of Birth:			INDIA	4		
Spouse's Address:			SAME	AS MAILING	G ADDF	RESS
Work/Education/Training Inform	nation					
Primary Occupation:			BUSI	NESS		
Present Employer or School Name:			GYM			
Address:			NEAR	AGRICULTU	RE UN	IVERSITY
			KARN	IAL ROAD KA	UL	
City:			KAITI	HAL		
State/Province:			HARY	ANA		
Postal Zone/Zip Code:			1360	21		
Country/Region:			INDIA	4		
Work Phone Number:			7988	314041		
Monthly Salary in Local Currency (if employe	ed):		1250	00		
Briefly Describe your Duties:			I AM S.	THE OWNER	OF TH	IS BUSINES
Were you previously employed?			NO			

Were you previously employed?

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NO

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

Name of Institution (1):	MAHARISHI BHRAMANAND SENIOR SECONDARY SCHOOL
Address of Institution:	KAUL
City:	KAITHAL
State/Province:	HARYANA
Postal Zone/ZIP Code:	136021
Country/Region:	INDIA
Course of Study:	SENIOR SECONDAERY
Date of Attendance From:	APRIL 2014
Date of Attendance To:	MARCH 2015
Do you belong to a clan or tribe?	NO
Provide a List of Languages You Speak:	
Language Name (1):	HINDI
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, social, or charitable organization?	NO
Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience?	NO
Have you ever served in the military?	NO
Have you ever served in, been a member of, or been involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or	NO

insurgent organization?

Security and Background Information

Do you have a communicable disease of public health significance? (Communicable diseases of public significance 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.)	NO
Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of yourself or others?	NO
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 other similar action?	NO
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 engaged in prostitution or procuring prostitutes within the past 10 years?	NO
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 United States?	NO
Are you the spouse, son, or daughter of an individual who has committed or conspired to commit a human 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?	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?	NO
Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States?	NO
Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities?	NO
Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations?	NO
Are you a member or representative of a terrorist organization?	NO

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are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing inancial assistance or other support to terrorists or terrorist organizations, in the last five years?		NO
Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide?		NO
Have you ever committed, ordered, incited, assisted, or otherwise partic	ipated in torture?	NO
Have you committed, ordered, incited, assisted, or otherwise participate or other acts of violence?	d in extrajudicial killings, political killings,	NO
Have you ever engaged in the recruitment or the use of the child soldier	s?	NO
Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom?		NO
Have you ever been directly involved in the establishment or enforcement woman to undergo an abortion against her free choice or a man or a work her free will?		NO
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 States immigration benefit by fraud or willful misrepresentation or other unlawful means?		NO
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 custody by a U.S. court?	l States from a person granted legal	NO
Have you voted in the United States in violation of any law or regulation?		NO
Have you ever renounced United States citizenship for the purpose of avoiding taxation?		NO
Student/Exchange Visa Information		
SEVIS ID:	N0034558740	
Principal Applicant SEVIS ID:	N0034558729	
Location Information		
Location where you will be submitting your application		
Current Location:	MUMBAI, INDIA	

Preparer of Application

Did anyone assist you in filling out this application?

NO

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You electronically signed your application on 01-Jul-2023 01:58:37 (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.