8/17/23, 2:47 PM

Non-Immigrant Visa - Review Personal, Address, Phone, and Passport Information



प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

## 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. NEW DS

Photo Provided:



## DO NOT BRING THIS TO YOUR INTERVIEW

|  | Edit Personal Information         |
|--|-----------------------------------|
| Name Provided:   | KRISHMA, FNU                      |
| Full Name in Native Alphabet:  | DOES NOT APPLY                    |
| Other Names Used:  | NO                                |
| Telecode Name Used:  | NO                                |
| Sex:   | FEMALE                            |
| Marital Status:  | MARRIED                           |
| Date of Birth:   | 25 DECEMBER 1992                  |
| Country/Region of Birth:   | LUDHIANA, PUNJAB, 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:  | 872490874875                      |
| U.S. Social Security Number:   | DOES NOT APPLY                    |
| U.S. Taxpayer ID Number:   | DOES NOT APPLY                    |
| E  | dit Address and Phone Information |
| Home Address:  | H NO B 46 217 LAMINI              |
| City:  | PATHANKOT                         |
| State/Province:  | PUNJAB                            |
| Postal Zone/ZIP Code:  | 145001                            |
| Country/Region:  | INDIA                             |
| Same Mailing Address?  | YES                               |
| Primary Phone Number:  | 8264840416                        |
| DO NOT BRING THIS TO YOU   |                                   |

#### DO NOT BRING THIS TO T I

Non-Immigrant Visa - Review Personal, Address, Phone, and Passport Information

DOES NOT APPLY

DOES NOT APPLY

NO

# DO NOT BRING THIS TO YOUR INTERVIEW

Secondary Phone Number:

Work Phone Number:

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

Have you used additional email addresses in the last five years? Do you have a social media presence?

Social Media Provider/Platform (1):

Social Media Identifier:

NO INSTAGRAM

krishmak781@gmail.com

KARIS\_HMA7291

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

#### Edit Passport/Travel Document Information

NO

NO

Passport/Travel Document Type: Passport/Travel Document Number: Passport Book Number: Country/Authority that Issued Passport/Travel Document: City where issued: Country/Region where issued: Issuance Date: Expiration Date: Have you ever lost a passport or had one stolen? REGULAR R9210483 DOES NOT APPLY INDIA JALANDHAR INDIA 16 MAY 2018

Krishmo

# DO NOT BRING THIS TO YOUR INTERVIEW

8/21/23, 4:21 PM

Non-Immigrant Visa - Review Travel Information

**Edit Travel Information** 



प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

## Travel Information

# DO NOT BRING THIS TO YOUR INTERVIEW

The List of Purposes of Trip to the U.S. ACADEMIC OR LANGUAGE Purpose of Trip to the U.S. (1): STUDENT (F) STUDENT (F1) Specify: NO Have you made specific travel plans? 05 SEPTEMBER 2023 Intended Date of Arrival: 4 YEAR(S) Intended Length of Stay in U.S.: 84 WEST SOUTH STREET Address where you will stay in the U.S.: WILKES BARRE, PENNSYLVANIA 18766 OTHER PERSON Person/Entity Paying for Your Trip: SINGH, JATINDER Name of Person Paying for Your Trip: 7837551130 Telephone Number: DOES NOT APPLY Email Address: SPOUSE Relationship to You: Is the address of the party paying for your trip the same as your Home YES or Mailing Address? **Edit Travel Companions Information** NO Other Persons Traveling with You: **Edit Previous U.S. Travel Information** NO 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 YES 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?

MY F-1 VISA GOT REFUSED.

Krishma.

NO

## DO NOT BRING THIS TO YOUR INTERVIEW

8/17/23, 2:47 PM

Non-Immigrant Visa - Review Travel Information



प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

## **Travel Information**

## DO NOT BRING THIS TO YOUR INTERVIEW

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:

**Telephone Number:** 

Email Address:

Relationship to You:

Is the address of the party paying for your trip the same as your Home or Mailing Address?

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:

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

# **DO NOT BRING THIS TO YOUR INTERVIEW**

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https://ceac.state.gov/GenNIV/General/review/review\_reviewtravel.aspx?node=ReviewTravel



**Edit Travel Information** 

ACADEMIC OR LANGUAGE STUDENT (F) STUDENT (F1)

#### NO

11 JANUARY 2024 4 YEAR(S) 84 WEST SOUTH STREET WILKES BARRE, PENNSYLVANIA 18766 OTHER PERSON SINGH, JATINDER 7837551130 DOES NOT APPLY SPOUSE YES

#### **Edit Travel Companions Information**

NO

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

NO NO

YES

MY F-1 VISA GOT REFUSED,

Nonimmigrant Visa - Review US Contact Information

U.S. DEPARTMENT OF STATE CONSULAR ELECTRONIC APPLICATION CENTER

प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

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.: Organization Name in the U.S.: Relationship to You: U.S. Contact Address: LOVE, ABBY WILKES UNIVERSITY SCHOOL OFFICIAL 84 WEST SOUTH STREET WILKES BARRE, PENNSYLVANIA 18766 15704085000 international.admissions@wilkes.edu

Phone Number: Email Address:

# DO NOT BRING THIS TO YOUR INTERVIEW

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#### 8/21/23, 4:27 PM

Nonimmigrant Visa - Review Work / Education Information

EPARTMENT of STATE ELECTRONIC APPLICATION CENTER

प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

# Work / Education / Training Information

# DO NOT BRING THIS TO YOUR INTERVIEW

Edit Present Work Information

#### NOT EMPLOYED

I HAVE COMPLETED MY GNM AND ST ARTED WORKING IN A PRIVATE HO SPITAL AS A STAFF NURSE. AFTER THAT I TOOK A DECISION TO PRO CEED FURTHER FOR BACHELORS IN REGISTERED NURSING TO EARN A S PECIALISED DEGREE FROM ABROAD. SO I APPLIED IN CSU BAKERSFIE LD UNFORTUNATELY MY VISA GOT R EFUSED. NOW, I HAVE APPLIED IN WILKES UNIVERSITY AND GOT MY I-20.

#### Edit Previous Work Information

Were you previously employed?

Employer Name (1): Employer Address:

Primary Occupation:

Explain:

City:

State/Province: Postal Zone/Zip Code:

Country/Region: Telephone Number:

Job Title:

Supervisor's Surname: Supervisor's Given Name: Employment Date From: Employment Date To: Briefly describe your duties:

Employer Name (2):

Employer Address:

#### City:

State/Province: Postal Zone/Zip Code:

Country/Region:

Telephone Number:

YES

LIFELINE HOSPITAL

STREET NUMBER 12 1 2 GILL ROAD

OPPOSITE MOBILE TOWER DASMESH NAGAR

LUDHIANA

PUNJAB

141003

INDIA 9988639620

STAFF NURSE

MAHESHVARI

VAIBHAV

21 SEPTEMBER 2021

30 APRIL 2022

MY JOB ROLE WAS TO GIVE MEDICA TION TO THE PATIENTS ACCORDING LY AND GIVE THEM CARE, PHYSICA L AND MENTAL SUPPORT

DUA MEDICAL CENTER

125 MALWA SCHOOL RD NEAR MIDDHA

CHOWK JAWAHARNAGAR CAMP

LUDHIANA

PUNJAB

141002

INDIA

8566855805

# Arishary IF DO NOT BRING THIS TO YOUR IN

https://ceac.state.gov/GenNIV/General/review/review\_reviewWorkEducation.aspx?node=ReviewWorkEducation

#### 8/21/23, 4:27 PM

Nonimmigrant Visa - Review Work / Education Information

# DO NOT BRING THIS TO YOUR INTERVIEW

Job Title:

Supervisor's Surname:

Supervisor's Given Name:

Employment Date From:

Employment Date To:

Briefly describe your duties:

STAFF NURSE

DUA

RAMANPREET SINGH

JANUARY 2020 JULY 2021

SCIENCES RAIKOT

LUDHIANA

PUNJAB

141109

INDIA

MIDWIFERY SEPTEMBER 2013

JULY 2017

NO

I WORKED AS A STAFF NURSE AND USED TO CHECK VITAL SIGNS AND ALSO USED TO ACCESS THE NEEDS OF PATIENTS IN THE WARDS.

BENGAL INSTITUTE OF HEALTH

DIPLOMA IN GENERAL NURSING AND

**Edit Additional Information** 

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

Name of Institution (1):

Address of Institution:

City:

State/Province:

Postal Zone/ZIP Code:

Country/Region:

Course of Study:

Date of Attendance From:

Date of Attendance To:

Do you belong to a clan or tribe?

Provide a List of Languages You Speak:

| Language Name (1):   | ENGLISH |
|--|---------|
|  | HINDI   |
| Language Name (2):   | PUNJABI |
| Language Name (3):   | NO      |
| 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 NO paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization?

# DO NOT BRING THIS TO YOUR INTERVIEW

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Nonimmigrant Visa - Review Work / Education Information

U.S. DEPARTMENT of STATE CONSULAR ELECTRONIC APPLICATION CENTER

प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

on abroad

Work / Education / Training Information

# DO NOT BRING THIS TO YOUR INTERVIEW

Primary Occupation:

Were you previously employed?

Employer Name (1):

Employer Address:

State/Province:

Country/Region:

Telephone Number:

Supervisor's Surname:

Supervisor's Given Name:

Employment Date From:

Briefly describe your duties:

Employment Date To:

Employer Name (2):

Employer Address:

State/Province:

Country/Region:

**Telephone Number:** 

Postal Zone/Zip Code:

City:

Postal Zone/Zip Code:

City:

Job Title:

Explain:

#### **Edit Present Work Information**

NOT EMPLOYED

I HAVE COMPLETED MY GNM AND ST ARTED WORKING IN A PRIVATE HO SPITAL AS A STAFF NURSE. AFTER THAT I TOOK A DECISION TO PRO CEED FURTHER FOR BACHELORS IN BIOLOGY TO EARN A SPECIALISED DEGREE. SO I APPLIED IN CSU BA KERSFIELD UNFORTUNATELY MY VIS A GOT REFUSED. NOW, I HAVE APP LIED FOR THE SAME AND GOT MY I -20.

#### **Edit Previous Work Information**

YES

LIFELINE HOSPITAL

STREET NUMBER 12 1 2 GILL ROAD

OPPOSITE MOBILE TOWER DASMESH

NAGAR LUDHIANA

PUNJAB

141003

INDIA

9988639620

STAFF NURSE

MAHESHVARI

VAIBHAV

21 SEPTEMBER 2021

30 APRIL 2022

MY JOB ROLE WAS TO GIVE MEDICA TION TO THE PATIENTS ACCORDING LY AND GIVE THEM CARE, PHYSICA L AND MENTAL SUPPORT

DUA MEDICAL CENTER

125 MALWA SCHOOL RD NEAR MIDDHA

CHOWK JAWAHARNAGAR CAMP

LUDHIANA

PUNJAB 141002

INDIA

8566855805

# DO NOT BRING THIS TO YOUR INTERVIEW Krishard

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Nonimmigrant Visa - Review Work / Education Information

# DO NOT BRING THIS TO YOUR INTERVIEW

#### Job Title:

Supervisor's Surname:

Supervisor's Given Name:

Employment Date From:

Employment Date To:

Briefly describe your duties:

STAFF NURSE

DUA

RAMANPREET SINGH

JANUARY 2020

JULY 2021

SCIENCES RAIKOT

LUDHIANA

PUNJAB

141109

INDIA

MIDWIFERY / SEPTEMBER 2013

JULY 2017

ENGLISH

PUNJABI

HINDI

NO

NO

NO

NO

NO

NO

I WORKED AS A STAFF NURSE AND USED TO CHECK VITAL SIGNS AND ALSO USED TO ACCESS THE NEEDS OF PATIENTS IN THE WARDS.

BENGAL INSTITUTE OF HEALTH

DIPLOMA IN GENERAL NURSING AND

**Edit Additional Information** 

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

Name of Institution (1):

Address of Institution:

City:

State/Province:

Postal Zone/ZIP Code:

Country/Region:

Course of Study:

Date of Attendance From:

Date of Attendance To:

Do you belong to a clan or tribe?

Provide a List of Languages You Speak:

Language Name (1):

- Language Name (2):
- Language Name (3):

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?

Have you ever served in, been a member of, or been involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization?

# DO NOT BRING THIS TO YOUR INTERVIEW

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Nonimmigrant Visa - Review Security Information



## U.S. DEPARTMENT OF STATE CONSULAR ELECTRONIC APPLICATION CENTER

प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

Security and Background Information

# DO NOT BRING THIS TO YOUR INTERVIEW

|  |         | <u>Edit Par</u> | <u>t 1</u> |
|--|---------|-----------------|------------|
| Do you have a communicable disease of public health significance? (Communicable diseases of public significance include chancroid, gonorrhea, granuloma inguinale, infectious leprosy, lymphogranuloma by the  |         |                 | NO         |
| significance include chancrold, gonormea, granulonia inguinally indexes as determined by the venereum, infectious stage syphilis, active tuberculosis, and other 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?   |         |                 |            |
| Are you or have you ever been a drug abuser or addict?   |         | Edit Par        | NO         |
|  |         | <u>Euit Pai</u> | 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?  |         |                 |            |
| 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         |
|  |         | <u>Edit Pa</u>  |            |
| 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         |
| 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?   |         |                 | 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?   |         | <b>A</b> .      | NO         |
| Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence?  |         |                 | NO         |
| Have you ever engaged in the recruitment or the use of the child soldiers?   |         | •               | NO         |
| Have you ever engaged in the reasonment 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 of the population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free will?                              |         |                 | NO         |
| Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue?   | ta<br>N |                 | NO         |

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Nonimmigrant Visa - Review Security Information

Its Dank A

# DO NOT BRING THIS TO YOUR INTERVIEW

|   | Edit Part 4   |  |
|---|---|--|
| entry into the United States, or any other  | NO  |  |
| Have you ever sought to obtain or assist others to obtain a visa, entry into the onlede states, and the obtain a visa, entry into the onlede states, and the obtain a visa, entry into the onlede states, and the obtain a visa of the obtain a | NO  |  |
| Have you ever been removed or deported from any country?  | Edit Part 5   |  |
| 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?  | 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 taxable   |   |  |
|   | Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court?<br>Have you voted in the United States in violation of any law or regulation? | Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any other<br>United States immigration benefit by fraud or willful misrepresentation or other unlawful means?NOHave you ever been removed or deported from any country?Edit Part 5Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legalNOHave you voted in the United States in violation of any law or regulation?NOHave you ever renounced United States citizenship for the purpose of avoiding taxation?NO |

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https://ceac.state.gov/GenNIV/General/review/review\_reviewsecurity.aspx?node=ReviewSecurity

Nonimmigrant Visa - Review Student/Exchange Visa Information

## DEPARTMENT of STATE CONSULAR ELECTRONIC APPLICATION CENTER

प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

Student/Exchange Visa Information

## DO NOT BRING THIS TO YOUR INTERVIEW

#### **Edit Additional Point of Contact Information**

Additional Point of Contact Information:

Name(1): Street Address: City: State/Province: Postal Zone/ZIP Code: Country/Region: **Telephone Number:** Email Address: Name(2): Street Address:

City:

State/Province: Postal Zone/ZIP Code: Country/Region: **Telephone Number:** Email Address:

SEVIS ID: Name of School: Course of Study:

Street Address:

FNU, AMAN # 162, LAMINI CHOWK PATHANKOT PUNJAB 145001 INDIA 9646565938 amandhiman1551@gmail.com FNU, REKHA # 6021 SECOND FLOOR AMAN HOMES SECTOR 123 MOHALI PUNJAB 140301 INDIA 9417800863 addirakha@gmail.com

**Edit SEVIS Information** N0034224316

WILKES UNIVERSITY

BACHELORS IN REGISTERED NURSING

84 WEST SOUTH STREET

WILKES BARRE, PENNSYLVANIA 18766

Series ID reads to be cheeked with Jan INO. BRING **DO NOT BRING THIS O YOUR INTERVIEW** 

Krishne

Non-Immigrant Visa - Review Location

U.S. DEPARTMENT OF STATE CONSULAR ELECTRONIC APPLICATION CENTER

प्रिंट (छापें)

Online Nonimmigrant Visa Application (DS-160)

Application ID AA00C9YS6Z

Location Information

# DO NOT BRING THIS TO YOUR INTERVIEW

**Edit Location Information** 

Location where you will be submitting your application

Current Location:

NEW DELHI, INDIA

# DO NOT BRING THIS TO YOUR INTERVIEW

Defer 200 not attached to file

108/2023