

Application or  
Petition Form No. \_\_\_\_\_

File No. \_\_\_\_\_

**DATA COLLECTION FOR ALIEN DOCUMENTATION,  
IDENTIFICATION & TELECOMMUNICATION SYSTEM (ADIT)**

Please print or type information requested below:

COMPLETE NAME \_\_\_\_\_

COMPLETE MAILING ADDRESS (Include zip code) \_\_\_\_\_

MOTHER'S FIRST NAME \_\_\_\_\_

FATHER'S FIRST NAME \_\_\_\_\_

CITY/TOWN/VILLAGE OF BIRTH \_\_\_\_\_

CITY OF RESIDENCE WHEN APPLYING  
FOR A VISA OR IMMIGRANT STATUS \_\_\_\_\_

CITY OF DESTINATION AT  
TIME OF ORIGINAL ADMISSION \_\_\_\_\_

LOCATION OF CONSULATE WHERE IMMIGRANT VISA  
OBTAINED (OR IMMIGRATION OFFICE WHERE ADJUSTED) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

PORT OF ENTRY WHEN ADMITTED AS IMMIGRANT OR  
OFFICE WHERE ADJUSTED TO LAWFUL PERMANENT RESIDENT \_\_\_\_\_

SYMBOL ADMITTED UNDER (CLASSIFICATION) \_\_\_\_\_

DATE ADMITTED OR ADJUSTED TO LAWFUL PERMANENT RESIDENT \_\_\_\_\_

COUNTRY OF BIRTH \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

TRANSACTION NUMBER \_\_\_\_\_