**Admission Number** 

mmigration and Naturalization Service

OMB No. 1115-0148

## Welcome to the United States

## I-94W Nonimmigrant Visa Waiver Arrival/ Departure Form Instructions

This form must be completed by every nonimmigrant visitor not in possession of a visitor's visa, who is a national of one of the countries enumerated in 8 CFR 217. The airline can provide you with the current list of eligible countries.

Type or print legibly with pen in ALL CAPITAL LETTERS. USE ENGLISH

This form is in two parts. Please complete both the Arrival Record, items 1 through 11 and the Departure Record, items 14 through 17. The reverse side of this form must be signed and dated. Children under the age of fourteen must have their form signed by a parent/guardian.

tem 7 - If you are entering the United States by land, enter LAND in this space. If you are entering the United States by ship, enter SEA in this space.

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mmigration and Naturalization Service Form I-94W (05-29-91) - Arrival Record VISA WAIVER			
. Family Name			
2. First (Given) Name 3. Birth Date (day/molyr)			
. Country of Citizenship 5. Sex (male or female)			
i. Passport Number 7. Airline and Flight Number			
. Country where you live 9. City Where you boarded			
0. Address While in the United States (Number and Street)			
1. City and State			
Community of the Only			
Government Use Only			
12.   13.			
Departure Number			
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Departure Number  803639064 11  mmigration and Naturalization Service form I-94W (05-29-91) - Departure Record			
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Departure Number  803639064 11  mmigration and Naturalization Service form I-94W (05-29-91) - Departure Record //ISA WAIVER  4. Family Name  16. Birth Date (day/molyr)			
Departure Number  803639064 11  mmigration and Naturalization Service orm I-94W (05-29-91) - Departure Record //ISA WAIVER  4. Family Name  16. Birth Date (day/molyr)			
Departure Number  803639064 11  mmigration and Naturalization Service form I-94W (05-29-91) - Departure Record /ISA WAIVER  4. Family Name  16. Birth Date (day/molyr)  7. Country of Citizenship			

Do	any of the following apply to you: (Answer Yes	or No)	
A.	Do you have a communicable disease; physical or me disorder; or are you a drug abuser or addict?	ental Yes No	
В.	Have you ever been arrested or convicted for an offense or cinvolving moral turpitude or a violation related to a contraubstance; or been arrested or convicted for two or more offer which the aggregate sentence to confinement was five yor more; or been a controlled substance trafficker; or are seeking entry to engage in criminal or immoral activities?	olled enses vears	
C.	Have you ever been or are you now involved in espionary sabotage; or in terrorist activities; or genocide; or between and 1945 were you involved, in any way, in persecut associated with Nazi Germany or its allies?	1933	
D.	Are you seeking to work in the U.S.; or have you ever excluded and deported; or been previously removed from United States; or procured or attempted to procure a visentry into the U.S. by fraud or misrepresentation?	the	
E.	Have you ever detained, retained or withheld custody of a from a U.S. citizen granted custody of the child?	child Yes No	
F.	Have you ever been denied a U.S. visa or entry into the U.S. had a U.S. visa canceled? If yes, when?where?	or Yes No	
G.	Have you ever asserted immunity from prosecution?	Yes No	
con	PORTANT: If you answered "Yes" to any of the above, p tact the American Embassy BEFORE you travel to the U.S. may be refused admission into the United States.	lease since	
	Family Name (Please Print) First	Name	
	Country of Citizenship Date of I	Date of Birth	
imn	IVER OF RIGHTS: I hereby waive any rights to review on nigration officer's determination as to my admissibility, or to non the basis of an application for asylum, any action in depo	contest, other	
and	RTIFICATION: I certify that I have read and understand al statements on this form. The answers I have furnished are to be best of my knowledge and belief.	l the questions rue and correct	
	Signature Date		

Public Reporting Burden - The burden for this collection is computed as follows: (1) Learning about the form 2 minutes; (2) completing the form 4 minutes for an estimated average of 6 minutes per response. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to INS, 425 I Street, N.W., Rm. 5304, Washington, D.C. 20536; and the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0148, Washington, D.C. 20503.

## **Departure Record**

Important - Retain this permit in your possession; you must surrender it when you leave the U.S. Fallure to do so may delay your entry into the U.S. in the future.

You are authorized to stay in the U.S. only until the date written on this form. To remain past

this date, without permission from Immigra tion authorities, is a violation of the law.

- Surrender this permit when you leave the U.S.:
   By sea or air, to the transportation line;
   Across the Canadian border, to a Canadian Official;
  - Across the Mexican border, to a U.S. Official.

Across the Mexican border, to a U.S. Official.

WARNING: You may not accept unauthorized employment; or attend school; or represent the foreign information media during your visit under this program. You are authorized to stay in the U.S. for 90 days or less. You may not apply for: 11 a change of nonimmigrant status; 2) adjustment of status to temporary or permanent resident, unless eligible under section 201(b) of the INA; or 3) an extension of stay. Violation of these terms will subject you to deportation.

Port: Date: Carrier:

Flight #/Ship Name:

UCS-4592