



INITIAL QUESTIONNAIRE
REQUEST TO BE CONTACTED BY INTERNATIONAL LAW GROUP, LLP

DATE: _____

YOUR INFORMATION:

Form with fields for: LAST NAME, FIRST NAME, MIDDLE NAME, STREET ADDRESS, CITY, STATE, ZIP CODE, HOME TELEPHONE #, OTHER TELEPHONE #, EMAIL ADDRESS, BEST TIME TO CONTACT, NATIONALITY, DATE OF LAST ENTRY TO THE U.S., TYPE OF LAST ENTRY INTO U.S./TYPE OF VISA, DATE STATUS EXPIRES, MARITAL STATUS, SPOUSE'S STATUS IN THE U.S., TOTAL NUMBER OF CHILDREN, BORN IN U.S.? AGES?

CURRENT EMPLOYER/PROSPECTIVE SPONSOR INFORMATION:

Form with fields for: NAME, ADDRESS, TELEPHONE NUMBER, EMAIL ADDRESS, OCCUPATIONAL TITLE, YEARS OF EXPERIENCE (current and previous employer), EDUCATIONAL BACKGROUND, SPECIAL SKILLS

PLEASE DESCRIBE YOUR IMMIGRATION GOALS (PERMANENT RESIDENCY, TEMPORARY WORK VISA, ETC.):

WHAT ARE YOUR QUESTIONS?: