

# Immigration Background Check Preparation Template

## Personal Information

1. **Full Legal Name:**
2. **Date of Birth:**
3. **Place of Birth:**
4. **Passport Number:**
5. **Visa Application Number:**

## Travel History

1. **List of Countries Visited in the Past 10 Years:**
  - Country: [Country Name]
  - Dates of Visit: [From Date] - [To Date]
  - Purpose of Visit: [Purpose]
2. **Previous Visa Applications:**
  - Country: [Country Name]
  - Visa Type: [Type]
  - Approval/Denial Date: [Date]

## Employment History

1. **Current Employer:**
  - Company Name: [Name]
  - Position: [Position]
  - Start Date: [Date]
  - Address: [Address]
  - Contact Information: [Phone Number/Email]
2. **Previous Employers (Last 10 Years):**
  - Company Name: [Name]
  - Position: [Position]
  - Employment Period: [From Date] - [To Date]
  - Address: [Address]
  - Contact Information: [Phone Number/Email]

## Education Background

1. **Highest Degree Obtained:**
  - Institution Name: [Name]
  - Degree: [Degree]

- Graduation Date: [Date]
- Address: [Address]
- 2. **Other Degrees or Certifications:**
  - Institution Name: [Name]
  - Degree/Certification: [Degree/Certification]
  - Graduation Date: [Date]
  - Address: [Address]

### **Criminal History**

1. **Disclosure of Criminal Records:**
  - Have you ever been arrested, charged, or convicted of a crime? (Yes/No)
  - If yes, provide details:
    - Offense: [Offense]
    - Date: [Date]
    - Location: [Location]
    - Outcome: [Outcome]
2. **Expunged Records:**
  - List any expunged records:
    - Offense: [Offense]
    - Date of Expungement: [Date]
    - Jurisdiction: [Jurisdiction]

### **Health Records**

1. **Vaccination Records:**
  - List of required vaccinations for the country of destination:
    - Vaccine: [Vaccine]
    - Date Administered: [Date]
2. **Medical Examinations:**
  - Date of Last Medical Exam: [Date]
  - Medical Examiner: [Name]
  - Results: [Results]

### **Financial Information**

1. **Proof of Funds:**
  - Bank Statements (Last 6 Months): [Attach Documents]
  - Affidavit of Support (If Applicable): [Attach Documents]
2. **Current Financial Status:**
  - Bank Name: [Bank]
  - Account Number: [Number]
  - Balance: [Balance]

### **Legal Assistance**

1. **Lawyer/Legal Representative:**

- Name: [Name]
- Contact Information: [Phone Number/Email]
- Address: [Address]

**Additional Documents**

1. **Birth Certificate:**

- Issuing Authority: [Authority]
- Date of Issue: [Date]
- Place of Issue: [Place]

2. **Marriage Certificate (If Applicable):**

- Issuing Authority: [Authority]
- Date of Issue: [Date]
- Place of Issue: [Place]

3. **Children's Birth Certificates (If Applicable):**

- Issuing Authority: [Authority]
- Date of Issue: [Date]
- Place of Issue: [Place]

**Contact Information for Emergencies**

1. **Emergency Contact:**

- Name: [Name]
- Relationship: [Relationship]
- Phone Number: [Phone Number]
- Email: [Email]
- Address: [Address]

**Instructions for Use**

1. **Complete All Sections:** Ensure every section is filled out accurately and completely.
2. **Attach Supporting Documents:** Gather and attach all necessary documents as indicated.
3. **Review and Verify:** Double-check all information for accuracy and completeness.
4. **Consult Legal Counsel:** If you have any questions or concerns, consult with a legal professional.