DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

7335 23

Admission Number

Arrival Record

OMB No. 1651-0111

Welcome to the United States

I-94W Nonimmigrant Visa Waiver Arrival/Departure Record 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 15) and the Departure Record (Items 18 through 21). 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 or guardian.

Item 9 - 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.

5 U.S.C. § 552a(e)(3) Privacy Act Notice: Information collected on this form is required by Title 8 of the U.S. Code, including the INA (8 U.S.C. 1103, 1187), and 8 CFR 235.1, 264, and 1235.1. The purposes for this collection are to give the terms of admission and document the arrival and departure of nonimmigrant aliens to the U.S. The information solicited on this form may be made available to other government agencies for law enforcement purposes or to assist DHS in determining your admissibility. All nonimmigrant aliens seeking admission to the U.S., unless otherwise exempted, must provide this information. Failure to provide this information may deny you entry to the United States and result in your removal.

VISA WAIVER		
1. Family Name		
2. First (Given) Name	3. Birth Date (DD/MM/YY)	
4. Country of Citizenship	5. Sex (Male or Female)	
6. Passport Issue Date (DD/MM/YY)	7. Passport Expiration Date (DD/MM/YY)	
8. Passport Number	9. Airline and Flight Number	
10. Country Where You Live	11. City Where You Boarded	
12. Address While in the United States (Number and St	reet)	
	و کا ساک اطالات به اندازی به	
13. City and State		
14. Telephone Number in the U.S. Where You Can be R		
14. Telephone Number in the U.S. where You Can be R	eacned	
15. Email Address		
15. Zanan Adaress		
16. 17. Government Use Only		
10. 17.		
I TELLIFICATION		
	CBP Form I-94W (05/08)	
	OMB No. 1651-0111	
Admission Number		
192517335 23		
Departure Record		
VISA WAIVER		
18. Family Name		
19. First (Given) Name	20. Birth Date (DD/MM/YY)	
21. Country of Citizenship		
	CBP Form I-94W (05/08)	
See Other Side	STAPLE HERE	

A.		
	Do you have a communicable disease; physical or mental disorder, or are you a drug abuser or addict?	Yes No
В.	Have you ever been arrested or convicted for an offense or crime involving moral turpitude or a violation related to a controlled substance; or been arrested or convicted for two or more offenses for which the aggregate sentence to confinement was five years or more; or been a controlled substance trafficker, or are you seeking entry to engage in criminal or immoral activities?	Yes No
C.	Have you ever been or are you now involved in espionage or sabotage; or in terrorist activities; or genocide; or between 1933 and 1945 were involved, in any way, in persecutions associated with Nazi Germany or its allies?	Yes No
D.	Are you seeking to work in the U.S.; or have ever been excluded and deported; or been previously removed from the United States; or procured or attempted to procure a visa or entry into the U.S. by fraud or misrepresentation?	Yes No
E.	Have you ever detained, retained or withheld custody of a child from a U.S. citizen granted custody of the child?	Yes No
F.	Have you ever been denied a U.S. visa or entry into the U.S. or had a U.S. visa cancelled? If yes, when? where?	Yes No
G.	Have you ever asserted immunity from prosecution?	Yes No
	Family Name (Please print) First Na	ma
-	Country of Citizenship Date of E	
Pro app	Country of Citizenship Date of E AIVER OF RIGHTS: I hereby waive any rights to review or appeal of a U.S stection officer's determination as to my admissibility, or to contest, other the plication for asylum, any action in deportation. ERTIFICATION: I certify that I have read and understand all the questions a m. The answers I have furnished are true and correct to the best of my knowle	Sirth Customs and Border an on the basis of an and statements on this
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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.

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: 1) 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. Any previous violation of this program, including having previously overstayed on this program without a proper DHS authorization, will result in a finding of inadmissibility as outlined in Section 217 of the Immigration and Nationality Act. Port:

Date:

Carrier:

Flight No./Ship Name: