

**MODEL FORM**

**NON-U.S. CITIZEN SUPPLEMENTAL APPLICATION**

Every person over the age of 18 who will reside in the unit is to complete this form.

1. APPLICANT'S NAME *(include all alternative spellings)*: \_\_\_\_\_  
\_\_\_\_\_
  2. BIRTHPLACE *(specify city, state, region or province, and country)*: \_\_\_\_\_  
\_\_\_\_\_
  3. COUNTRIES OF CITIZENSHIP: \_\_\_\_\_
  4. PASSPORT # & ISSUING COUNTRY: \_\_\_\_\_
  5. NAMES, ADDRESSES & TEL. #S OF TWO CONTACTS IN HOME COUNTRY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  6. ALIEN REGISTRATION #: \_\_\_\_\_
  7. VISA TYPE & EXPIRATION: \_\_\_\_\_
  8. HIGH SCHOOLS OR COLLEGES ATTENDED *(give name & city)*: \_\_\_\_\_  
\_\_\_\_\_
  9. LENGTH OF TIME SPENT IN U.S.: \_\_\_\_\_
  10. STATES WHERE YOU HAVE LIVED: \_\_\_\_\_
  11. DRIVER'S LICENSE # & ISSUING STATE OR COUNTRY: \_\_\_\_\_
  12. IMMIGRATION STATUS: \_\_\_\_\_
- APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_