

The Travel Visa Company

Your Dedicated, Worldwide Travel Visa Agency



REFERRED BY

i.e. Travel Agent / Tour Operator / Cruise Line / Search Engine / Repeat Customer / Friend / Other

You **MUST** return this front page with your application.

RETURN ADDRESS

The Travel Visa Company Ltd.

Unit 2A, The Courtyard Regents Park, London Road Nantwich, Cheshire CW5 6LW



SUPPORT

If you have any queries or would like additional assistance when completing your application, please contact us and one of our team would be happy to assist.



Telephone: 01270 904 907



Email: applications@thetravelvisacompany.co.uk





USA Media Visa (I) Application Pack

Pre-Check & Application Registration

Thank you for requesting an application pack for a USA Media Visa (I).

Please complete the following three sections and then return the application pack and all supporting documents to The Travel Visa Company Ltd.

- 1. Checklist of the documents required
- 2. Service and delivery options
- 3. Address and payment details

1 PLEASE NOTE

This visa is for representatives of the media, including press, radio, film and print industries travelling to the USA temporarily to work in their profession.

This visa application requires all applicants to make a personal appearance at the US Embassy in London. As part of our service, we will arrange this interview for you.

It is advised that applicants should not make any final travel plans until the visa application has been processed and the visa has been issued.

What is included with our Pre-Check and Application Registration service?

- We quality check your application form and all supporting documents to ensure you have provided all the required information, reducing the risk of refusal at the embassy.
- We complete the official online US I Visa application forms on your behalf.
- We arrange your appointment at the US Embassy in London at a convenient date and time (dependant on opening hours and appointment availability).





1. Checklist of the documents required

√	Please tick to confirm you have provided the following:
	USA MEDIA VISA (I) APPLICATION FORM – Please find attached. It is important to carefully read through all the questions and fully complete all forms in BLOCK CAPITALS with a BLACK PEN . All application forms MUST be printed single-sided. Application forms printed double-sided WILL NOT be accepted.
	COPY OF PASSPORT – Please include a copy of the photograph page of your passport. Your passport must be valid for at least the entire duration of your proposed stay in the USA.
	PHOTOGRAPH x1 – The photograph must be 5×5 cm ($2'' \times 2''$) size, taken within the last 6 months, against a light background, printed on photographic paper, be full face and nonsmiling [without sunglasses, a hat/cap or other head covering, unless the applicant wears such items because of their religious belief or ethnic background].
	INVITATION LETTER – Letter of invitation from a US company detailing your purpose of travel and proposed travel dates. If the nature of the reporting/filming is time sensitive, it is recommended that this is explained in the invitation letter.
	UK COMPANY LETTER – Please provide a letter from your UK employer containing your names, place and date of birth, passport number, length of stay and purpose of travel.
	ACRO POLICE CERTIFICATE – IF you are applying for this visa because you have been arrested, convicted, or cautioned you must provide a copy of a ACRO Police Certificate dated within the last 6 months.
	 DON'T HAVE AN ACRO? – If you do not already have this document, The Travel Visa Company offer a service to obtain this on your behalf for an additional fee. Please visit www.thetravelvisacompany.co.uk/services/acro

Failure to provide us with these documents will result in delays with your application.



2. Service and delivery options

✓ Please tick to confirm which service and delivery type you are requesting:

Service Type	Processing Time	Embassy Fee	Service Fee	VAT	Total
Standard	15 days*	£175.00 [†]	£112.46	£22.49	£309.95
Priority	5 days*	£175.00 [†]	£154.13	£30.82	£359.95

*Working days excluding postal days.

MPORTANT

Please be aware that during peak times Embassy appointments can be fully booked for up to several months at a time. The above processing times are The Travel Visa Company's and do not include the Embassy's interview wait time or processing time.

• If selecting our priority service, please address to "The Travel Visa Company – Priority".

Continued overleaf...



[†] Includes visa fee and courier fees.



	Delivery Type	Price		DATE OF TRAVEL
	Email Confirmation	-		DD MM YYYY
	Provide Pre-Paid Envelope*	-		וואואו וואואו וואואו אוואו אוואו אוואו וואואו וואואו וואואו וואואו וואואו וואואו
	Posted Confirmation	£5.00		LENGTH OF STAY
	Collect from TVC Office	-		Days
3.	*If you provide a pre-paid envelope Address and paymer		it has your re	eturn address and the correct postage amount.
Name	:			Credit/Debit Card
Addre	SS:			Name on card:
				Card Number:
Postco	ode:			F : D : CVC
Telepl	none:			Expiry Date: CVC:
Email:				Paypal paypal@thetravelvisacompany.co.uk
			Ш	Cheque
	EMAIL MARKETING (not red			BACS Reference:
	I would like to sign up to the TVC We do not share your data with a parties. To view our privacy policy	ny third		Cheque/BACS payments are to be made payable to "The Travel Visa Company Ltd."
	www.thetravelvisacompany.co.ul			Bank Details: 68032405 / 08-92-50
	TERMS & CONDITIONS (re			
	I have read, fully understood and www.thetravelvisacompany.co.			ditions and Client Declaration. etravelvisacompany.co.uk/declaration
	Signed:			Date:



Please contact us if you would like to receive a printed copy of these documents.

Application Form

Tel: +44 (0) 1270 904 907 applications@thetravelvisacompany.co.uk www.thetravelvisacompany.co.uk

Personal Information

Surname: As shown in passport
Given name(s):
As shown in passport
Other / former name(s): If applicable
Gender: Male Female
Marital status: ☐ Married ☐ Divorced ☐ Single ☐ Widowed
Other
Date of birth: DD/MM/YYYY
Place of birth:
Town/City:
State/Province: Country:
Nationality:
Do you have or have you ever held any other nationalities? Yes No Other nationality:
National ID number:
If applicable
Passport number:
If applicable
Are you a permanent resident of a country other than your country of nationality? Yes No If yes Country:
National Identification Number: Does not apply to me
US Social Security Number: Does not apply to me
US Taxpayer ID Number: Does not apply to me

Passport Details

Passport	type: Regular Official C	Diplomatic
Passport	number:	
Issuing c	ountry:	
Issuing a	uthority:	
Issue dat	re:	DD/MM/YYYY
Expiry da	ate:	DD/MM/YYYY
Have yo	ou ever lost your passport or had or	ne stolen?
If yes	Passport number:	☐ Not known
If yes	Passport number: Country:	☐ Not known ☐ Not known
If yes		
If yes	Country:	
If yes	Country:	

Travel Details

Haverb	ctans		
Purpose	e of travel to the U	S:	
Lleve		Sa tuas sal mlama?	
	ou made any specif	ic travel plans?	
Yes	☐ No		
If yes	Arrival date:		
	Arrival flight:		
	Arrival city:		
	Departure date:		
	Departure flight:		
	Departure city:		
	Location:		
If no	Intended date of trav	rel:	DD/MM/YYYY
	Intended length of sta	ay: [



Application Form

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Travel Details

Provide a rough idea of where you will be staying in the US: Town/City: State/Province: Postcode: Country: Who is paying for this trip? Self Other person Other company If other Name: Relationship to you: Telephone: Email: Address: Postcode: Are there other persons travelling with you? Yes ☐ No If yes Are you travelling as part of a group or organisation? Yes No If yes Group name: Travel companion details If no Surname: Given names: Relationship: Have you ever been to the USA? Yes ☐ No If yes Date of arrival: Length of stay: Date of arrival: Length of stay: Date of arrival: Length of stay:

Travel Details

Do you	or have you ever held a US driving license?
Yes	□ No
If yes	License No.: State of license:
Have yo	ou ever been issued a US visa? (ESTA not included)
If yes	Date of issue:
	Date of expiry:
	Visa number: (If known)
	Are you applying for the same visa type? Yes No
	Are you applying in the same country or location where the visa above was issued, and is this country your place of principal residence? Yes No
	Have you ever had your biometric information (fingerprints) collected by the US Embassy? Yes No
	Have you ever had a US visa stolen or lost?
	Year it was stolen: Explain:
	Have you ever had a US visa cancelled or revoked? Yes No
	If yes Explain:





Application Form

Applicant Contact Details

Tel: +44 (0) 1270 904 907 applications@thetravelvisacompany.co.uk www.thetravelvisacompany.co.uk

Travel Details

Have you ever been refused a US visa or been refused admission to the US?	Phone number:	
☐ Yes ☐ No	Email address:	
Fundaire		
If yes Explain:	Current address:	
	Street:	
	Town/City:	
	State/Province:	
Here we will be to be to be about the design of the design	Postcode:	
Have you ever been denied travel authorisation by the Department of Homeland Security through the Electronic System of Travel Authorisation?	Country:	
Yes No	Social Media Details	
If yes Explain:	Do you have any social media accounts? ☐ Yes ☐ No	
	If yes Social Media: e.g	g. Facebook
	Username:	
	Social Media: e.g	g. Facebook
Has anyone ever filed an immigrant petition on your behalf	Username:	
with the United States Citizenship and Immigration Services?		
Yes No	Spouse Details If your spouse is deceased, please details below, excluding address	
		, priorie aria errian
US Point of Contact	Surname:	, priorie una emain
US Point of Contact Organisation name:		, , , , , , , , , , , , , , , , , , , ,
	Surname:	
Organisation name:	Surname: Given name(s):	
Organisation name: (If applicable)	Surname: Given name(s):	DD/MM/YYYY
Organisation name: (If applicable)	Surname: Given name(s):	
Organisation name: (If applicable) Surname:	Surname: Given name(s): Date of birth:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY	Surname: Given name(s): Date of birth: Nationality:	
Organisation name: (If applicable) Surname: Given names:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY Relationship to you:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province:	
Organisation name: (If applicable) Surname: Given names: Date of birth: Relationship to you: Address:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province: Postcode:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY Relationship to you: Address: Street: Town/City: State/Province:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY Relationship to you: Address: Street: Town/City:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province: Postcode:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY Relationship to you: Address: Street: Town/City: State/Province:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province: Postcode:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY Relationship to you: Address: Street: Town/City: State/Province: Postcode:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province: Postcode: Phone number:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY Relationship to you: Address: Street: Town/City: State/Province: Postcode:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province: Postcode: Phone number:	
Organisation name: (If applicable) Surname: Given names: Date of birth: DD/MM/YYYY Relationship to you: Address: Street: Town/City: State/Province: Postcode: Phone number:	Surname: Given name(s): Date of birth: Nationality: Place of birth: Address: Street: Town/City: State/Province: Postcode: Phone number:	





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Previous Spouse Details	Does not apply to me	Other Family Information
Surname:		Do you have any immediate relatives, not including parent
		in the US?
Given name(s):		Yes No
		If yes Surname:
Date of birth:	DD/MM/YYYY	Given name(s):
Nationality:		Relationship to you:
		Relatives status:
Place of birth:		
Date of marriage:	DD/MM/YYYY	If no Do you have any other relatives in the US?
Date marriage ended:	DD/MM/YYYY	Yes No
C		If yes Surname:
Country marriage ended:		Given name(s):
How the marriage ended:		Date of birth: DD/MM/YYY
		Country of origin:
Parent Information		Place of Birth:
If deceased, you <u>must</u> still provide nan	ne, nationality and DOB.	Address:
Father's surname:		Street:
		Town/City:
Father's given name(s):		State/Province: Postcode:
		Country:
Father's date of birth:	DD/MM/YYYY	
Is your father in the US?		
Yes No		Moult/Education/Tuning
If yes Status in the US:		Work/Education/Training
☐ Nonimmigrant ☐ US C	itizen US Legal	Occupation:
Resident Othe	er Do not know	Employer name:
		Employer Address: Street:
Mother's surname:		Town/City:
		State/Province:
Mother's given name(s):		Postcode:
	22 (44440004)	Employment start date: DD/MM/YYYY
Mother's date of birth:	DD/MM/YYYY	Employer phone number:
Is your mother in the US?		
Yes No		Monthly income: £
If yes Status in the US:		Brief description of duties:
☐ Nonimmigrant ☐ US C		
Resident Othe	er Do not know	

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Work/Education/Training

Were yo	ou previously employ	
If yes	Employer name:	
	Address:	Charach
	/tadiess.	Street: Town/City:
		State/Province:
		Postcode:
		Country:
	Phone number:	
	Job title:	
	Supervisor surname:	
	Supervisor given name:	
	Employment start date:	DD/MM/YYYY
	Employment end date:	DD/MM/YYYY
	Brief description of dutie	es:
Have yo	ou attended any educ	rational institutes at a secondary
level or	above?	ational institutes at a secondary
level or	above? No Name of institute:	
level or	above?	Street:
level or	above? No Name of institute:	Street: Town/City:
level or	above? No Name of institute:	Street: Town/City: State/Province:
level or	above? No Name of institute:	Street: Town/City: State/Province: Postcode:
level or	above? No Name of institute: Institute address:	Street: Town/City: State/Province:
level or	above? No Name of institute:	Street: Town/City: State/Province: Postcode: Country:
level or	above? No Name of institute: Institute address: Course of study:	Street: Town/City: State/Province: Postcode:
level or	above? No Name of institute: Institute address: Course of study: Course start date: Course end date:	Street: Town/City: State/Province: Postcode: Country:
level or ☐ Yes If yes Other I	above? No Name of institute: Institute address: Course of study: Course start date: Course end date:	Street: Town/City: State/Province: Postcode: Country: DD/MM/YYYY DD/MM/YYYY
Other I	above? No Name of institute: Institute address: Course of study: Course start date: Course end date: Details belong to a clan or a topic start or a top	Street: Town/City: State/Province: Postcode: Country: DD/MM/YYYY DD/MM/YYYY
Other I Do you Yes If yes	above? No Name of institute: Institute address: Course of study: Course start date: Course end date: Details belong to a clan or a total	Street: Town/City: State/Province: Postcode: Country: DD/MM/YYYY DD/MM/YYYY

Other Details

Have you travelled to any countries within the last five years?
Yes No
List all countries:
Have you belonged to, contributed to, or worked for any professional, social or charitable organisations?
Yes No
Names of organisations:
Do you have any specialised skills in firearms or explosives, or nuclear, biological or chemical experience?
Yes No
If yes Explain:
Have you ever served in the military? ☐ Yes ☐ No
If yes Country:
Branch:
Rank/Position:
Speciality:
Date from: DD/MM/YYYY
Date to: DD/MM/YYYY
Have you ever served in, been a member of, or been involved with a parliamentary unit, vigilante unit, rebel group, guerilla or insurgent organisation? Yes No Explain:





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Security and Background Questions

Do you have a communicable disease of public health significance? Yes No
Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of yourself or others? Yes No
Are you or have you ever been a drug abuser or addict? Yes No
Have you ever been arrested or convicted for any offense or crime, even if subject of a pardon, amnesty, or other similar action? Yes No
Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances? Yes No
Are you coming to the United States to engage in prostitution or unlawful commercialized vice or have you been engaged in prostitution or procuring prostitutes within the past 10 years? Yes No
Have you ever been involved in, or do you seek to engage in, money laundering? Yes No
Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the United States? Yes No
Are you the spouse, son, or daughter of an individual who has committed a human trafficking offense and have you within the last five years, knowingly benefited from the trafficking activities? Yes No
Have you knowingly aided, abetted, assisted or colluded with an individual who has committed or conspired to commit a severe human trafficking offense in the United States or outside the United States?
Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States? Yes No
Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities? Yes No
Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations? Yes No
Are you a member or representative of a terrorist organization? Yes No

Security and Background Questions

Are you the spouse, son, or daughter of an individual who has engaged in terrorist activity, including providing financial assistance or other support to terrorists or terrorist organizations, in the last five years? Yes No
Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide? Yes No
Have you ever committed, ordered, incited, assisted, or otherwise participated in torture? Yes No
Have you committed, ordered, incited, assisted, or otherwise participated in extra judicial killings, political killings, or other acts of violence? Yes No
Have you ever engaged in the recruitment or the use of the child soldiers? Yes No
Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? Yes No
Have you ever been directly involved in the establishment or enforcement of the population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free will? Yes No
Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue? Yes No
Have you ever been the subject of a removal or deportation hearing? Yes No
Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any other United States immigration benefit by fraud or wilful misrepresentation or other unlawful means? Yes No
Have you failed to attend a hearing on removability or inadmissibility within the last five years? Yes No
Have you ever been unlawfully present, overstayed the amount of time granted by an immigration official or otherwise violated the terms of a U.S. visa? Yes No





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Security and Background Questions
Have you ever been removed or deported from any country? Yes No
Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court? Yes No
Have you voted in the United States in violation of any law or regulation? Yes No
Have you ever renounced United States citizenship for the purpose of avoiding taxation? Yes No
Have you attended a public elementary school on student (F) status or a public secondary school after November 30, 1996 without reimbursing the school? Yes No
Security and Background Questions
If you have answered yes to any of the Security and Background Questions, please explain (you must provide as much detail as possible):

