





**CLASS A NONIMMIGRANT VISA REFERRAL**

<b>TO: Chief of Consular Section</b>		Date <i>(mm-dd-yyyy)</i>
<b>SUBJECT: Visa Referral</b>		
Name of Applicant <i>(Last, First, MI)</i>		Date <i>(mm-dd-yyyy)</i> and Place of Birth
ACCOMPANYING RELATIVE(s) - Additional relatives should be listed on back of form		
Full Name	Relationship	Date <i>(mm-dd-yyyy)</i> and Place of Birth
<b>I recommend visa issuance for the visa applicant named above who is well and favorably known to me. The following documents are attached:</b> <input type="checkbox"/> Passport <input type="checkbox"/> Completed Form DS-156 <input type="checkbox"/> Completed Form DS-157 and/or DS-158 <i>(If applicable)</i> <input type="checkbox"/> Photo <input type="checkbox"/> Supporting Documents <input type="checkbox"/> MRV Fee Receipt		
Position of applicant/Nature of contact:		
Purpose of applicant's travel:		
Destination of applicant's travel:		Date of travel <i>(mm-dd-yyyy)</i> :
Issuing a visa to the applicant is in the U.S. national interest because: (continue on back if necessary)		
<b>I certify that the referred applicant is personally known to me and, to the best of my knowledge, meets all criteria for A referral status and presents no threat to the national security or safety of the United States.</b>  Name of Referring Officer _____ Title _____  Signature _____ Date <i>(mm-dd-yyyy)</i> _____		
<b>I certify that to the best of my knowledge, the referred applicant meets all criteria for A referral status and presents no threat to the national security or safety of the United States.</b>  Name of Approving Officer _____ Title _____  Signature _____ Date <i>(mm-dd-yyyy)</i> _____		
<b>(Optional/as applicable) I certify that a CLASS Check and security review of the referred applicant have been done, and I recommend that the applicant be exempt from the following:</b>  <input type="checkbox"/> NSEERS requirements <input type="checkbox"/> Visas condor requirements <input type="checkbox"/> US-VISIT requirements		
Name of Chief of Mission, Deputy Chief of Mission, or Principal Officer		Title
Signature _____		Date <i>(mm-dd-yyyy)</i> _____