Instructions: (1) download and save to your computer; (2) open with Adobe or your pdf reader; (3) fill out and save in your computer; (4) return by email to s.hill@hillandpiibe.com

Note: You cannot save your responses if you fill this out in a browser online

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## **EQUESTRIAN IMMIGRATION SCREENING QUESTIONNAIRE**

First Name		La	st Nam	e					
Email address									
Country(ies) of citizensh	ip								
Are you interested in	temporary w	ork visa	gree	n card p	ermanent	residen	cy b	oth	
Are you already here in	the U.S.?	Yes	No	If you a	e already	here, wh	nat visa sta	atus?	
When does your	I-94 expire (o	r see stamp	o in you	r passpo	rt re how	long you	can stay)		
If you are already here, are here on ESTA or hav	•	•	and ch	_	your new No	status? (	You canno	ot do this	s if you
In what country outside	the U.S. do yo	ou permane	ently re	side?				_	
Check here if you	ır spouse wan	ts a visa/gr	een car	d with y	ou. First	name			
Check here if you first names and birthdat		child(ren) u	nder th	e age of	21 want a	a visa/gre	een card w	rith you.	Indicate
Have you or your family denied entry, refused a explain with dates:	•		ouble w	ith U.S. i	mmigrati	on?	Yes	No	airport, If yes,
Have you or your family erased and do not coun	•	ove ever be No	en arre	sted or o	convicted with dat	for crime		—— told the	y were
Please list any degrees o	or certificates y	you obtaine	ed, rela	ted to yo	our horse	occupatio	on:		
Indicate the equestrian	discipline or b	reed you w	ant to v	work in (	dressage,	reining,	H/J, Arabi	ans, etc.	)

applicable_								
our U.S. od			Their stable's name, if U.S. state where they are located					
	Your U.S. occupation (select all that apply)		Competition rider	Assistant tr	Assistant trainer/rider			
Head trainer Groom/handler		Groom/handler	Breeding consultant/sp	pecialist	Other (explain):			
Employmer	nt history-	—we will google these em	nployers, please provid	e sufficient info	ermation			
Started E		mployer Name (Include table name if applicable)	Riders and/or Trainers' Names (if applicable)	Total monthly with benefits (indicate US\$ foreign currer	or			
Please fill o	out all that	: apply:						
	-	s/riders have won awards governing body(ies), i.e., F	• • • •	•	/internationally			

	l, or my horses/riders have been featured or discussed in major national or international trade tions/newspapers/media. List names of publications and years:
	I, or my horses/riders have qualified for national teams/offices or championship finals (examples: c squad, NAJYRC, Developing Riders Tour, Chef d'Equipe, Technical Delegate, etc.). List years and types:
	I have been asked to judge or critique others in my field (examples: selection committee, clinician, g inspection, competition judge). List events with years:
-	I gave advice in how-to articles/videos. List years and sources:
	I engage in horse breeding (including handling stallions/mares/foals) at a high level that is recognized lly/internationally. Explain:
	I engage in horse sales at a high level that is recognized nationally/internationally. List notable clients horses, and their countries:
<u>-</u>	

ve other eviden	ce to establish t	hat I am in th	ne top 20% or h	igher in my field.	Please explain:
	ve other eviden	ve other evidence to establish t	ve other evidence to establish that I am in th	ve other evidence to establish that I am in the top 20% or h	ve other evidence to establish that I am in the top 20% or higher in my field.

By checking this box, you affirm that the above information is accurate to the best of your knowledge and belief.

By checking this box, you understand this questionnaire is for free screening purposes only, to see if we can take your case. If your eligibility is not clear from this screening, then your case may require paid consultation and further discussion to develop eligibility. You will be informed and given the option if you need a consultation.

Please email this questionnaire to Partner Susan E. Hill at <u>s.hill@hillandpiibe.com</u>. She will review and respond to you by the next business day.