## **CHINESE CREW VISA SHIPPING CHECKLIST**

#### MAIL THE DOCUMENTS LISTED BELOW TO:

AMERICAN VISA SERVICE ATTN.: VALENTINA MEEHAN 44081 PIPELINE PLAZA, STE 210 ASHBURN VA 20147

\*Print everything single- sided

ORIGINAL PASSPORT (your passport must be valid for more than 1yr. Do <u>not</u> use 2nd passport)
ONE PHOTO (Provide a physical photo OR can be taken digitally with a cell phone. Make sure to stand against a light-colored smooth wall and your shoulders must be fully visible in the photo. No glasses, no smiling. Make sure hair is moved away from the face and <u>foreheard is clearly visible</u> . E-mail it to <u>INFO@AVSCHICAGO.COM</u> in " <u>actual size</u> " and we'll re-size, crop and print it out for you)
ONE VISA APPLICATION FORM (4 PAGES)- all fields must be filled out including, work history, education & family. You must include an accurate list of countries you have traveled to in the past 5 years. Look at the stamps in your passport and list those countries on page 4 in "TRAVEL HISTORY" section. Inaccurate list can result in request for additional documents from the consulate and longer processing times.
ONE WHERE YOU STAY FORM WITH APPLICANT'S ORIGINAL SIGNATURE
ONE AVS ORDER FORM- you must fill out shipping, contact & payment information sections
COPY OF CREW ID (FRONT & BACK) in black & white or color. Your crew number must be clearly visible in the back. If your number is smudged, request a re-printed ID from United prior to mailing your paperwork.
COPY OF DRIVER'S LICENSE (FRONT & BACK)- in black & white or color.
COPY OF MOST RECENT CHINA CREW VISA (IF PREVIOUS VISA IS IN THE OLD PASSPORT, INCLUDE A COPY OF THE OLD PASSPORT. IF PREVIOUS VISA IS STILL VALID, INCLUDE ORIGINAL PREVIOUS PASSPORT IN THE PACKAGE)
FORMER CITIZENS OF CHINA, TAIWAN & HONG KONG- if the country of birth on your US passpor reads as "China", "Taiwan" or "Hong Kong", please email the spelling of your Chinese name to info@avschicago.com. If this is your first time applying for a Chinese visa, you must include your original Chinese, Taiwanese or Hong Kong passport (it will be returned to you once your visa is issued).
NON-US CITIZENS- include a copy of your green card (front & back)
RESIDENTS OF STATES OF NORTHERN CA, OR, WA, NV, AK- include copy of most recent utility bill (gas, water or electric), cell phone bill or rental agreement.
RESIDENTS OF STATES OF SOUTHERN CA, AZ, HI, NM, PACIFIC ISLANDS- if your country of birth is other than USA, include a copy of your Naturalization Certificate OR a copy of your Certificate of Birth Abroad. Your name in native alphabet must be emailed to info@avschicago.com
<u>DUAL CITIZENS</u> - if you currently have two nationalities including USA, include copy of the passport of your 2nd nationality. For residents of Chicago consulate jurisdiction, copy of naturalization certificate AND original foreign passport will be required.

Please make sure to include <u>ALL</u> applicable documents listed above or processing of your application can be delayed. For general processing times, please refer to our website.

# CHINA VISA APPLICATION FORM FOR CREW MEMBERS

APPLICANT'S DETAILS									
	Middle Name:			Last N	ame:				
	Occupation (	job title	e):				Annual Inco	ome:	
Gender:	Male	Femal	e	Marita	al Status:	Sing	le Married	Divorced	Widowed
State of Birth	ղ։				Country	of Bir	rth:		
	Driver's License	e #:							
<i>י</i> :	Yes N	o l	If yes, lis	t additi	onal natio	nality	y:		
y in another co	ountry? Yes N	o I	If yes, lis	t count	ry:				
ionality:	Yes N	o I	If yes, lis	t count	ry:				
	Date of Issue:						Date of Exp	iration:	
	Issuing Country	<i>ı</i> :							
ement for a los	st or stolen passp	ort?	Yes	No	(check la	ıst paç	ge of your pas	sport)	
oassport below	v (if not available	, provi	de letter	of expl	anation v	vhy y	ou do not ha	ve details)	
	Issuing Authori	ty:					Issuing Cou	ntry:	
t:	How did you lo	se you	r passpo	rt:					
the lost pass	port? Yes	No							
ous visa (if no	t available, provi	de lett	er of exp	lanatio	n that you	u did	not keep a co	opy of the	visa)
	Date of Issue:					Place	of Issue:		
Α									
		Proce	essing sp	eed:	Regular		Rush		
		Desired Duration of Stay (in days):							
WORK EXPERIENCE									
Date Started (mm/dd/yyyy):  Company Name:				Company Address:					
	Your Job Title	e:					Your Job Du	uties:	
Supervisor's Name:				Supervisor's Phone Number:					
	State of Birth  y:  y in another or  ionality:  ement for a los  passport below  the lost pass  ous visa (if no	Gender: Male  State of Birth:  Triver's Licenser:  Yes N  y in another country? Yes N  ionality: Yes N  Date of Issue:  Issuing Country  ement for a lost or stolen passer  passport below (if not available)  Issuing Authori  How did you lo  the lost passport? Yes  ous visa (if not available, provi  Date of Issue:  A	Occupation (job titl  Gender: Male Femal  State of Birth:  Driver's License #:  Yes No  y in another country? Yes No  ionality: Yes No  Date of Issue:  Issuing Country:  ement for a lost or stolen passport?  passport below (if not available, provident lest passport?  How did you lose you not the lost passport? Yes No  ous visa (if not available, provide lett Date of Issue:  A  Proce	Occupation (job title):  Gender: Male Female  State of Birth:  Priver's License #:  Yes No If yes, lisionality: Ye	Occupation (job title):  Gender: Male Female Marita  State of Birth:  Priver's License #:  Yes No If yes, list additi y in another country? Yes No If yes, list count ionality: Yes No If yes, list count ionality: Yes No If yes, list count  Date of Issue:  Issuing Country:  Issuing Authority:  How did you lose your passport:  In the lost passport? Yes No  ous visa (if not available, provide letter of explanatio  Date of Issue:  A  Processing speed:  Desired Duration of S  Company Address:  Your Job Title:	Gender: Male Female Marital Status:  State of Birth: Country  Driver's License #:  Yes No If yes, list additional nation of the processing speed: Regular Desired Duration of Stay (in data)  Processing speed: Regular Desired Duration of Stay (in data)  Company Address:  Your Job Title:	Occupation (job title):  Gender: Male Female Marital Status: Sing State of Birth: Country of Bi Driver's License #:  'Yes No If yes, list additional nationality in another country? Yes No If yes, list country: ionality: Yes No If yes, list country:  Date of Issue: Issuing Country:  Issuing Country: Yes No (check last parameters of explanation why yes)  Issuing Authority: How did you lose your passport:  The lost passport? Yes No ous visa (if not available, provide letter of explanation that you did Date of Issue: Place  Processing speed: Regular  Desired Duration of Stay (in days):  Company Address:  Your Job Title:	Occupation (job title):  Gender: Male Female Marital Status: Single Married State of Birth:  Driver's License #:  Yes No If yes, list additional nationality: yin another country? Yes No If yes, list country: ionality: Yes No If yes, list country:  Date of Issue: Date of Exp  Issuing Country:  Issuing Country:  How did you lose your passport:  The lost passport? Yes No  Ous visa (if not available, provide letter of explanation why you did not keep a country is a country in the lost passport? Yes No  Date of Issue: Place of Issue:  Date of Issue: Place of Issue:  A  Processing speed: Regular Rush  Desired Duration of Stay (in days):  Company Address:  Your Job Title: Your Job Date	Occupation (job title):  Gender: Male Female Marital Status: Single Married Divorced State of Birth: Country of Birth:  Driver's License #:  'Yes No If yes, list additional nationality: yi nanother country? Yes No If yes, list country: ionality: Yes No If yes, list country:  Date of Issue: Date of Expiration: Issuing Country:  Issuing Country:  Issuing Authority: Issuing Authority: Issuing Country:  The lost passport? Yes No (check last page of your passport)  Date of Issue: Date of Expiration:  Issuing Authority: Issuing Country:  The lost passport? Yes No country:  The lost passport? Yes No ous visa (if not available, provide letter of explanation that you did not keep a copy of the Date of Issue: Place of Issue:  A  Processing speed: Regular Rush Desired Duration of Stay (in days):  Company Address: Your Job Title: Your Job Duties:

Previous Employer (include only if you have be	en with United	for les	ss than 10years):				
Date Started (mm/dd/yyyy):			Date Ended (mm/dd/yyyy):				
Company Name:			Company Address:				
Phone Number:	Your Job Title	:			Your Job Duties:		
Supervisor's Name:			Supervisor's Phone Nu	mber	:		
EDUCATIONAL HISTORY							
COLLEGE OR UNIVERSITY YOU GRADUATED FRO	ОМ						
Name of College/University:			Address:				
From (mm/dd/yyyy):			To (mm/dd/yyyy):				
Degree Received: Undergraduate Gradua	ate		Major:				
COLLEGE OR UNIVERSITY YOU GRADUATED FRO	ОМ						
Name of College/University:			Address:				
From (mm/dd/yyyy):			To (mm/dd/yyyy):				
Degree received: Undergraduate Gradua	te		Major:				
HIGH SCHOOL YOU GRADUATED FROM (yes, th	is is required)		I				
Name of High School:			Address:				
From (mm/dd/yyyy):			To (mm/dd/yyyy):				
What languages do you speak?							
CURRENT RESIDENCE							
Address (same as on your driver's license or util	ity bill):		<u>,                                      </u>				
Home Phone:	Cell Phone:			E-ma	il:		
FAMILY INFORMATION							
SPOUSE'S INFORMATION (ONLY IF CURRENTLY	MARRIED)						
First Name:	Last Name:			Date	of Birth:		
Current Nationality:	City of Birth:			Country of Birth:			
Occupation:	Current Address:						
FATHER'S INFORMATION (IF DECEASED, WRITE "N/A")							
First Name:	irst Name: Last Name: Date of Birth:			of Birth:			
Current Nationality: Occupation:							
Current Address:							

MOTHER'S INFORMATION (IF DECEASED, WRITE "N/A")							
First Name:		Last Name:	Date of Birth:				
Current Nationality:		Occupation:					
Current Address:							
CHILD 1 INFORMATION (IF NONE	, WRITE "N/A	")		1			
First name:		Last name: D			birth:		
Current Nationality:		Occupation:					
Current Address:							
CHILD 2 INFORMATION (IF NONE	, WRITE "N/A	")		1			
First name:		Last name:		Date of birth:			
Current Nationality:		Occupation:					
Current Address:							
CHILD 3 INFORMATION (IF NONE	, WRITE "N/A	")		1			
First name:		Last name:		Date of	Birth:		
Current Nationality:		Occupation:					
Current Address:							
CHILD 4 INFORMATION (IF NONE	, WRITE "N/A	")					
First Name:		Last Name:		Date of	Birth:		
Current Nationality:		Occupation:					
Current Address:							
Are any of your relatives in China	a? Yes	No					
If yes, list: Name:		Relation to you:					
Status in China: Citizen	Permane	nt Resident Re	esident Stay				
INFORMATION ABOUT YOUR TRIP							
Date of arrival (mm/dd/yyyy):		Date of Departure (mm/dd/yyyy):					
City of Arrival:		City of Departure:					
Address of stay:							
EMERGENCY CONTACT:							
First name:		Last name:		Relation to you:			
Phone Number:		E-mail:					
Country:	State:		City:		Zip code:		

WHO WILL PAY FOR THIS TE	RIP?						
Self		Organization		Oth	er		
Name:			Relation to You:				
Phone Number:			E-mail:				
Address:			l				
naaress.							
TYPE OF SPONSOR:							
INDIVIDUAL			ORGANIZATION				
Name of individual or organizatio	n:		Relationship to the a	applicant:			
Phone number:	···		City, State & Zip cod				
Thore number.			City, State & Zip coa	c or sportsor	•		
TRAVEL HISTORY:							
Have you been to China in the las	t 3 vears?	No Yes (If ye	s, please list your last 3 t	trips below to	mainland China, <b>not</b> HK or Taiwan)		
City:	<b>,</b>	Date of Arrival:		Date of	Departure:		
City:		Date of Arrival:		Date of	Date of Departure:		
City:		Date of Arrival:		Date of Departure:			
Have you been issued a Chinese v	isa?	1	s, please include detai	•	Departure.		
Type of Visa:	Visa Numbei		Date of Issue:	13 5010447	Place of Issue:		
					Flace of issue.		
				.6			
Have you ever been issued a Chin			Yes No		ermit number:		
Do you currently hold any valid vi	sas issued by	other countries?	Yes No	if yes, list c	ountries:		
List countries you have traveled	to in the past	12 months:					
OTHER INFORMATION (if you	u answer "yes	s" to any of the quest	tions, please provide	explanation (	on separate sheet of paper)		
Have you ever been refused a visa	for China, or	been refused entry in	nto China?	Yes	No		
Has your Chinese visa ever been o	ancelled?			Yes	No		
Have you ever entered China illegally, overstayed, or worked illegally?					No		
Do you have any criminal record in China or any other country?					No		
Do you have any serious mental disorder or infectious disease?					No		
Have you ever visited countries or territories where there is an epidemic in the last 30 days?					No		
Have you ever been trained or do you have any special skills in the field of firearms,							
explosives, nuclear devices, biological or chemical products?  Are you serving or have you ever served in the military?					No No		
	Yes	NO					
Have you served or participated in any paramilitary organization, civil armed units, guerrilla forces or armed organizations, or been its member?					No		
forces or armed organizations, or been its member?  Have you belonged to, contributed to, or worked for any professional, social, or charitable							
organizations?					No		
Is there anything else you want to	Yes	No					

# Where You Stay Form

Dear vis	sa applican	t,	
If you n	eed to app	ly for a Chine	ese visa in our Embassy, you MUST be
the US	now. If cu	rrently you a	re NOT IN the US, your visa application
will not	be process	sed.	
Please t	ick and fill	in the place y	you are currently in.
	_	m currently in	the US.
	_ No, I an	n currently no	ot in the US.
I am in			(name of the Country/Region).
Please s	sign your na	ame,	
Date,	мм	DD	YYYY

### **AMERICAN VISA SERVICE**

## 44081 Pipeline Plaza, Suite 210 Ashburn VA 20147



Tel: 312-922-8860 E-mail: info@avschicago.com

### **AVS Order Form**

Ter. 312-722-0000 E-man. Im									
Applicant Information									
Traveler One (1):		1							
First Name:		Last Name:		DOB:					
Traveler Two (2):									
First Name:		Last Name:		DOB:					
Traveler Three (3):									
First Name:		Last Name:		DOB:					
The Name.		Last Harrie.		505.					
	Services R	equested (chec	k all that apply)						
US Passport Services:	New Renew	ıal 2 <sup>nd</sup> Passı	oort Name Chan	ge Lost Passport Card					
Visa Services:	Tourist	Business	Employment	Residence Family	y Visit				
Type of Visa (entries):	Single	Double	Multiple	☐ Not Sure					
Country/Countries:			Processing Speed	Requested:					
Date of Departure from USA:			Date Needed in Y	our Hands:					
			•	·					
	Shipping Information	on (where to sh	ip your passport bac	k)					
Shipping Method:	FedEx Overnight	FedEx 2	Day Use My Labe	/FedEx Account #:					
	Company:		Name:						
Shipping Address:	Street Address:								
(no PO BOX)	City: State: Zip Code:								
	E-mail:	er:							
Contact Information (for	questions, status upd	lates, additiona	I requests, etc)- this	is NOT your emergency cont	act				
Name:		Relationsh	ip to Applicant:						
Phone #:		E-mail:							
		Payment Inforn	nation						
				O					
Form of Payment	Check (company)	U Visa	MasterCard	EX Discover Paid on we CVV Code:	bsite				
Credit Card Info:	Card Number:		Exp. Date:	CVV Code.					
Credit Card IIIIO.	Cardholder's Name:								
Authorization to Chargo	Billing Zip Code:								
Authorization to Charge:	Signature:		Date:	Amount: \$					
AVS is not responsible for any policy char	nges at the Passport Agency or a	ny of the Embassies a	s well as delays, damages or	fundable and are subject to change withou loss of documents resulting from the actional e-mails from AVS with important upd	ons of the				