

B1/B2 after a refusal (Philippines) Completed DS-160 Form

159 responses

18 sections

~30 min to fill

B1/B2 after a 214(b) refusal



These are completed examples — real questions with fictional answers, shown for reference.
The applicant, the businesses and every detail are made up.

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11 responses

Personal Information - Part 1

Surnames

Enter all surnames as listed in your passport. If only one name is listed in your passport, enter that Surname.

Surname *

DELA CRUZ

Given Names

If your passport does not include a given name, please enter 'FNU' in Given Names.

Given Names *

MARIA ANGELICA

Full Name in Native Alphabet

If your passport does not include a given name, please enter 'FNU' in Given Names.

Full Name in Native Alphabet *

☒ NA Does Not Apply/Technology Not Available

Other Names

Other names used include your maiden name, religious name, professional name, or any other names which you are known by or have been known by in the past.

Have you ever used other names (i.e., maiden, religious, professional, alias, etc.)? *

☐ Yes

☒ No

Telecode

Telecodes are 4 digit code numbers that represent characters in some non-Roman alphabet names.

Do you have a telecode that represents your name? *

☐ Yes

☒ No

Sex

Please select MALE or FEMALE

Sex *

FEMALE



Marital Status *

SINGLE



Date of Birth

If day or month is unknown, enter as shown in passport.

Date of Birth *

03 MAY 1997



City of Birth *

CEBU CITY

State/Province of Birth *

CEBU

☐ NA Does Not Apply

Country/Region

Select the name that is currently in use for the place where you were born.

Country/Region of Birth *

PHILIPPINES



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Personal Information - Part 2

Country/Region of Origin (Nationality) *

PHILIPPINES



Do you hold or have you held any nationality other than the one indicated above on nationality? *

☐ Yes

☒ No

Permanent Resident

Permanent resident means any individual who has been legally granted by a country/region permission to live and work without time limitation in that country/region.

Are you a permanent resident of a country/region other than your country/region of origin (nationality) indicated above? *

☐ Yes

☒ No

Identification Numbers

Your National ID Number is a unique number that your government provides. The U.S. Government provides unique numbers to those who seek employment (Social Security Number) or pay taxes (Taxpayer ID).

National Identification Number *

5821430976140382

☐ NA Does Not Apply

U.S. Social Security Number *

☒ NA Does Not Apply

U.S. Taxpayer ID Number *

☒ NA Does Not Apply

Purpose of Visa

Purpose of Visit

Purpose of Trip to the U.S. *

TEMP. BUSINESS OR PLEASURE VISITOR (B)



Specify Visa *

TEMP. VISITOR FOR BUSINESS/PLEASURE (B1/B2)



Have you made specific travel plans? *



Yes



No

Provide a complete itinerary for your travel to the U.S.

Travel Plans

If you are unsure of your Date of Arrival in U.S. or Date of Departure from U.S., please provide an estimate.

Arrival Date *

18 JUN 2027



Arrival Flight (if known)

Arrival City in the USA *

Departure Date *



Departure Flight (if known)

Departure City from the USA *

Locations you plan to visit in the USA:

Location *

SAN DIEGO

Location *

LOS ANGELES

Address where you will stay in the U.S.

Address Line 1 *

4215 GENESEE AVE

Address Line 2

APT 7

City *

SAN DIEGO

State *

CALIFORNIA



Zip Code

92117

Person/Entity Paying for Your Trip *

Self



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Travel Companions

Traveling with Others

You should answer Yes to this question if you are traveling with family, as part of an organized tour, or as part of a performing group or athletic team. You do not need to list individuals who are traveling with you for the purposes of employment with the same employer.

Are there other persons traveling with you? *

☐ Yes

☒ No

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Previous U.S. Travel History

Have you ever been in the U.S.? *

☐ Yes

☒ No

Have you ever been issued a U.S. Visa? *

☐ Yes

☒ No

Have you ever been refused a U.S. Visa, or been refused admission to the United States, or withdrawn your application for admission at the port of entry? *

☒ Yes

☐ No

Explain why you were refused a visa or admission to the United States, or why you withdrew your application for admission at the port of entry *

REFUSED A B1-B2 VISITOR VISA UNDER SECTION 214(B) AT

Have you ever been denied travel authorization by the Department of Homeland Security through the Electronic System for Travel Authorization (ESTA)? *

☐ Yes

☒ No

Has anyone ever filed an immigrant petition on your behalf with the United States Citizenship and Immigration Services? *

☐ Yes

☒ No

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Address and Phone Details

Home Address

Street Address (Line 1) *

UNIT 1204, THE BEAUFORT, 5TH AVENUE

Street Address (Line 2)

BONIFACIO GLOBAL CITY

City *

TAGUIG

State/Province *

METRO MANILA

☐

NA Does not apply

Postal Zone/ZIP Code *

1634

☐

NA Does not apply

Country/Region *

PHILIPPINES



Mailing Address

If your mailing address is different from your home address, please provide your mailing address.

Is your Mailing Address the same as your Home Address? *

☒ Yes

☐ No

Phone

You must provide a primary phone number. The primary phone number should be the phone number at which you are most likely to be reached; this could be a land line or a cellular/mobile number. If you have an additional land line or a cellular/mobile number please list that as your secondary phone number.

Phone

Primary Phone Number *

639175550142

Secondary Phone Number *

☒ NA Does not apply

Work Phone Number *

63285550177

☐ NA Does not apply

Have you used any other phone numbers in the last five years? *

☐ Yes

☒ No

Email Address

You must provide an email address. The email address you provide will be used for correspondence purposes. Provide an email address that is secure and to which you have reasonable access.

Email Address *

ANGELICA.DELACRUZ@EXAMPLE.COM

Have you used any other email addresses in the last five years? *

☐ Yes

☒ No

Social Media

Social Media Provider/Platform *

FACEBOOK



Link to Social Media Profile *

HTTPS://WWW.FACEBOOK.COM/ANGELICA.DELACRUZ.97

Social Media Provider/Platform *

INSTAGRAM

Link to Social Media Profile *

HTTPS://WWW.INSTAGRAM.COM/GELA.DELACRUZ/

Do you wish to provide information about your presence on any other websites or applications you have used within the last five years to create or share content (photos, videos, status updates, etc.)? *

☐ Yes

☒ No

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Passport Information

Passport/Travel Document Type *

Regular



Passport/Travel Document Number

Enter the information on the travel document you will be using when traveling to the U.S. Your travel document should be a valid, unexpired passport or other valid, unexpired documentation that is sufficient to establish your identity and nationality.

Passport/Travel Document Number *

P8842157B

Passport Book Number

The Passport Book Number is commonly called the inventory control number. You may or may not have a Passport Book Number on your passport. The location of the Passport Book Number on your passport may vary depending on the country that issued your passport. Please contact your passport issuing authority if you are unable to determine whether or not your passport contains a Passport Book Number.

Passport Book Number *



NA Does not apply

Country/Authority that Issued Passport/Travel Document *

PHILIPPINES



Where was the Passport/Travel Document Issued?

City *

MANILA

State/Province *If shown on passport

METRO MANILA

Country/Region *

PHILIPPINES



Issuance Date *

11 SEP 2023



Expiration Date

In most cases your passport/Travel Document must have at least six months of validity beyond the date of your visa application and/or your arrival in the United States.

Expiration Date *

10 SEP 2033



☐ NA No expiration

Have you ever lost a passport or had one stolen? *

☐ Yes

☒ No

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US Contact Information

Contact Person or Organization in the United States

Your U.S. Point of Contact can be any individual in the U.S. who knows you and can verify, if necessary, your identity. If you do not personally know anyone in the U.S., you may enter the name of the store, company, or organization you plan to visit during your trip.

Contact Person or Organization in the United States

Contact Person

Surnames *

REYES

Given Names *

ISABEL

☐ Do Not Know

Organization Name

Organization Name *

☒ Do Not Know

Relationship To You *

RELATIVE



Address and Phone Number of Point of Contact

U.S. Street Address (Line 1) *

4215 GENESEE AVE

U.S. Street Address (Line 2)

APT 7

City *

SAN DIEGO

State *

CALIFORNIA



ZIP Code (if known)

92117

Phone Number *

6195550163

Email Address *

ISABEL.REYES@EXAMPLE.COM

☐

NA Does not apply

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Family Information

Father's Full Name and Date of Birth

Surnames *

DELA CRUZ

☐ NA Do not know

Given Names *

ROBERTO

☐ NA Do not know

Date of Birth *

16 FEB 1966



☐ NA Do not know

Is your father in the U.S.? *

☐ Yes

☒ No

Mother's Full Name and Date of Birth

Surnames *

DELA CRUZ

☐ NA Do not know

Given Names *

ELENA

☐ NA Do not know

Date of Birth *

29 AUG 1969



☐ NA Do not know

Is your mother in the U.S.? *

☐ Yes

☒ No

Immediate Relatives

Means fiancé/fiancée, spouse (husband/wife), child (son/daughter), or sibling (brother/sister).

Do you have any immediate relatives, not including
parents, in the United States? *

☒ Yes

☐ No

Provide the following information:

Surnames *

REYES

Given Names *

ISABEL

Relationship To You *

SIBLING

Relative status *

U.S. Legal Permanent Resident (LPR)

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Current Occupation

Present Work/Education/Training Information

Primary Occupation *

BUSINESS



Present Employer or School Information

Present Employer or School Name *

MERIDIAN ASSURANCE AND ADVISORY CO

Present Employer or School Address

Street Address (Line 1) *

18TH FLOOR, 6750 AYALA AVENUE

Street Address (Line 2)

City *

MAKATI

State/Province *

METRO MANILA

☐ NA Does not apply

Postal Zone / ZIP Code *

1226

☐ NA Does not apply

Country / Region *

PHILIPPINES



Phone Number *

63285550177

Start Date *

03 JUN 2019



Monthly Income in Local Currency (if employed) *

68000

☐ NA Does not apply

Briefly describe your duties *

SENIOR ACCOUNTANT; PREPARE MONTHLY AND YEAR-END

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Previous Occupation

Were you previously employed? *

☐ Yes

☒ No

Level of Education

You must answer Yes to this question if you have ever attended, for any length of time, a high school/secondary school (or its equivalent in your country) or college, university, graduate school, a doctoral program, or a vocational program.

Have you attended any educational institutions at a secondary level or above? *

☒ Yes

☐ No

Provide the following information on the educational institution(s) you have attended.

Name of Institution *

UNIVERSITY OF SAN CARLOS

Address

Street Address (Line 1) *

P DEL ROSARIO STREET

Street Address (Line 2)

City *

CEBU CITY

State/Province *

CEBU

☐ NA Does not apply

Postal Zone/ZIP Code *

6000

☐ NA Does not apply

Country *

PHILIPPINES



Course of Study *

BACHELOR OF SCIENCE IN ACCOUNTANCY

Date of Attendance From *

11 JUN 2014



Date of Attendance To *

31 MAY 2018



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Additional Occupation Details

Do you belong to a clan or tribe? *

☐ Yes

☒ No

Provide a List of Languages You Speak

Enter only one language per field. To add more languages, use the Add Another button below — do not list several languages in the same field.

Language Name *

ENGLISH

Language Name *

FILIPINO

Language Name *

CEBUANO

Have you traveled to any countries/regions within the last five years? *

☒ Yes

☐ No

Provide a List of Countries/Regions Visited

Country/Region *

SINGAPORE



Country/Region *

JAPAN



Have you belonged to, contributed to, or worked for any professional, social, or charitable organization? *

☐ Yes

☒ No

Do you have any specialized skills or training, such as firearms, explosives, nuclear, biological, or chemical experience? *

☐ Yes

☒ No

Have you ever served in the military? *

☐ Yes

☒ No

Have you ever served in, been a member of, or been involved with a paramilitary unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? *

☐ Yes

☒ No

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Security Background - Part 1

Do you have a communicable disease of public health significance? (Communicable diseases of public significance include chancroid, gonorrhea, granuloma inguinale, infectious leprosy, lymphogranuloma venereum, infectious stage syphilis, active tuberculosis, and other diseases as determined by the Department of Health and Human Services.) *

☐ 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

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Security Background - Part 2

Have you ever been arrested or convicted for any offense or crime, even though 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

Have you ever 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? *

☐ Yes

☒ No

Are you the spouse, son, or daughter of an individual who has committed or conspired to commit a human trafficking offense in the United States or outside the United States and have you within the last five years, knowingly benefited from the trafficking activities? *

☐ Yes

☒ No

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

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 extrajudicial killings, political killings, or other acts of violence? *

☐ Yes

☒ No

Have you ever engaged in the recruitment or the use of 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 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

Security Background - Part 4

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 willful 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

Have you ever been removed or deported from any country? *

☐ Yes

☒ No

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Security Background - Part 5

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 purposes of avoiding taxation? *

☐ Yes

☒ No

Are you a former exchange visitor (J) who has not yet fulfilled the two-year foreign residence requirement? *

☐ 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

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Preparer of Application

Preparer of Application

If someone other than you completed this application, provide their details here. You must still electronically sign the application yourself.

Did anyone assist you in filling out this application?

☐ Yes

☐ No



Rather not fill it in by hand?

You've seen how long a DS-160 is. Answer the questions once, in plain language, and we file it on the official site for you, with no timeouts and no lost progress. Filing is free.

[Start your DS-160 for free →](#)

Already submitted your DS-160?

Found a mistake, or did something change? Check whether you need a new one. It takes about a minute and it's free.

[Do I need a new DS-160? →](#)