

U.S. Department of State

CONTACT INFORMATION AND WORK HISTORY FOR NONIMMIGRANT VISA APPLICANT

OMB APPROVAL NO. 1405-0144 EXPIRES: 04/30/06 ESTIMATED BURDEN: 1 HOUR

Tamil Nadu

PLEAS	SE TYPE OR PRINT YOUR ANS	SWERS IN THE SPACE PROVIDED	BELOW EACH ITEM	
PLEASE ATT	ACH AN ADDITIONAL SHEET	IF YOU NEED MORE SPACE TO CO	ONTINUE YOUR ANSWERS	
1. Last Name <i>(s)</i>		First Name(s)	Middle Name	
Murthy	Ganesh			
2. Date of Birth <i>(mm-dd-yyyy)</i>	3. Place of Birth Country	City/Town	State/Province	

Chennai

4. Permanent Home Address and Telephone Number (include apartment number, street, city, state or province, postal zone, and country)

345 Mount Road, Adyar, Chennai - 600 045, INDIA

Phone: (44) 1234-5678

01/23/1976

Full Name and Address of Spouse (if applicable) (postal box number unacceptable)

India

Name (Last, First, Middle) Telephone Number Address

Murthy, Riddhi

345 Mount Rd, Adyar, Chennai 600 045 INDIA (44) 1234-5678

Full Names and Addresses of Children, Parents, and Siblings (postal box number unacceptable)

Name (Last, First, Middle) Relationship Telephone Number

(44) 1234-5678 Murthy, Meera 345 Mount Rd, Adyar, Chennai 600 045 Daughter 345 Mount Rd, Adyar, Chennai 600 045 Murthy, Shankar Father (44) 1234-5678 Murthy, Parvathi 345 Mount Rd, Adyar, Chennai 600 045 Mother (44) 1234-5678

List at Least Two Contacts in Applicant's Country of Residence Who Can Verify Information About Applicant (do not list immediate family members or other relatives) (postal box number unacceptable)

Name (Last, First, Middle) Address Telephone Number

123 Park Road, Adyar, Chennai 600 045 (44) 3333-4444 Narayan, Suresh Muthysamy, Ramesh 222 Creek Road, Anna Nagar, Chennai 600 023 (44) 5555-6666

Paperwork Reduction Act Statement

*Public reporting burden for this collection of information is estimated to average 1 hour per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. In accordance with 5 CFR 1320 5(b), persons are not required to respond to the collection of this information unless this form displays a currently valid OMB control number. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: U.S. Department of State (A/RPS/DIR) Washington, DC 20520.

WORK EXPERIENCE - PRESENT	1					
Job Title: Software Engineer	Date (<i>mm-dd-yyyy</i>) From 07/01/2003	Date (<i>mm-dd-yyyy</i>) To 05/06/2005				
Employer's Name and Address:						
Star Systems, 43 Rose Garden Road, T. Nagar, Chennai 600 0	22 Telephone Number	2222-2222				
Describe Your Duties:						
Design and develop software applications for e-commerce webs	site.					
WORK EXPERIENCE - PREVIOUS						
Job Title: Software Engineer	Date (mm-dd-yyyy) From 07/01/2002	Date (mm-dd-yyyy) To 06/30/2003				
Employer's Name and Address:						
Ramco Systems, 54 Grand St, T. Nagar, Chennai 600 022	Telephone Number	3333-3333				
Describe Your Duties:						
Design and develop software applications for accounting.						
WORK EXPERIENCE - PREVIOUS						
Job Title:	Date (mm-dd-yyyy) From	Date (mm-dd-yyyy) To				
Employer's Name and Address:	Telephone Number					
Describe Your Duties:						
WORK EXPERIENCE - PREVIOUS						
Job Title:	Date (mm-dd-yyyy) From	Date (mm-dd-yyyy) To				
Employer's Name and Address:						
	Telephone Number					
Describe Your Duties:						
I certify that I have read and understood all the questions set forth in this form and the answers I have furnished on this form are true and correct to the best of my knowledge and belief. I understand that any false or misleading statement may result in the permanent refusal of a visa or denial of entry into the United States.						
APPLICANT'S SIGNATURE	DATE (mm-dd-yyyy) 05	/U0/2005				

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