



INTERNATIONAL REFUGEE ASSISTANCE PROJECT

BARRED TRAVELER QUESTIONNAIRE

Instructions:

- Please fill out as completely as possible, but you do not need to respond to any particular question that you are not comfortable answering. For example, you are not required to provide your full name, contact information, or similar identifying information, and you may skip any sensitive questions that you prefer to leave blank.

- We will do everything in our power to maintain the confidentiality of your responses, including destroying or deleting the information when it is no longer needed to assist or advocate for stranded travelers.

- Return completed questionnaires to airport@refugeerights.org

TRAVELER BIOGRAPHICAL INFORMATION

Traveler Name: _____

Name of Person Filling Out Form for Traveler: _____

Relationship to Traveler: _____

Traveler Date of Birth: _____

Or approximate age: _____

Traveler Place of Birth: _____

Traveler (or Best Contact) Mobile Number: _____

Traveler Email Address: _____

Traveler Country of Origin: _____

Traveler Citizenship(s): _____

Does Traveler Have Another Country of Citizenship? (list countries): _____

Traveler Religion (if willing to state): _____

Languages Traveler Speaks: _____

Traveler Willing to Speak with U.S. Congress/Other Government? (circle): Y / N

Traveler Willing to Speak with Press? (circle): Y / N

in Traveler's Party (complete additional details below): _____

DOES TRAVELER CONSENT TO SHARING INFORMATION IN THIS QUESTIONNAIRE WITH ATTORNEYS AND LEGAL VOLUNTEERS? Y / N

TRAVELER US IMMIGRATION STATUS AND RESIDENCY

Type of U.S. Visa: _____

Date of Visa Application, if Visa not yet Issued: _____

Date Issued, if Issued: _____

Date of Expiry, if applicable: _____

Date Revoked, if applicable: _____

Any other relevant details about visa status: _____

Did someone (petitioner) file a petition in order for you to immigrate or travel to the U.S.? _____

What is your relationship to the petitioner? (e.g. employer, family member): _____

Where does the petitioner live? _____

If the petitioner is an individual, what is that person's legal status in the U.S.? _____

CONNECTIVITY TO THE US

Does traveler live in the US? For how long, and what do they do in US? Describe, including name of school for students, employer for workers, etc.: _____

Does traveler have family members in the US? Describe nature of relationship and location of each relative: _____

What is the reason for current travel to US, if not explained above? _____

TRAVELER LOCATION AND TRAVEL PLANS

Travel status (*check the one that applies*):

- Currently located abroad, haven't yet attempted to return to U.S.
- Currently at departure airport
- In transit (not at departure airport or at U.S. Immigration Arrival Airport)
- Returned to layover or country of origin.
- Currently at U.S. Immigration Arrival Airport
- Still in United States, was planning to travel abroad, but haven't yet left.

Current Location Type (for example: Airport, Hotel, Residence, Other): _____

Airport/Hotel/Location name: _____

Terminal Number or Street Address: _____

City: _____

Country: _____

At Location Since: _____

Trip Origination Point: _____

Date of Most Recent Departure From U.S.: _____

Reason for Departure From U.S.: _____

Trip Itinerary (beginning and end dates and countries of planned trip, including airline names and flight numbers): _____

Planned travel destination in the US (beyond the airport): _____

SPECIAL HUMANITARIAN CONSIDERATIONS AND TRAVEL CIRCUMSTANCES

Fleeing or at risk of being returned to persecution or other danger? (circle): Y / N

If yes, describe in detail: _____

Medical issues? (circle): Y / N

If yes, provide relevant details, focused on specific harm or risk of not being permitted to travel to US: _____

Prior employment with or services provided to U.S. armed forces, military contractors, international humanitarian organizations, or other assistance to U.S.-based agencies/organizations? (circle): Y / N

If yes, provide relevant details: _____

Is the ban creating separation between a caretaker and a dependent? (circle): Y / N

If yes, provide relevant details: _____

Extreme and unusual financial hardship? (circle): Y / N

If yes, provide relevant details: _____

Other special circumstances (provide details): _____

TRAVEL PARTY BIOGRAPHICAL INFORMATION *(Complete for each member in Traveler's party (#1, #2, #3, etc) if possible and to the extent they are comfortable sharing the information. Use separate questionnaire for separated family members no longer with the Traveler's party.)*

Travel Party #1 Name: _____

Travel Party #1 Date of Birth: _____

Or approximate age: _____

Travel Party #1 Country of Origin: _____

Travel Party #1 Citizenship(s): _____

Travel Party #1 Relationship to Traveler: _____

Travel Party #1 Type of U.S. Visa: _____

Travel Party #1 Visa Status: _____

Travel Party #1 Date Issued: _____

Other Information about Travel Party #1 (medical issues, special considerations): _____

Travel Party #2 Name: _____

Travel Party #2 Date of Birth: _____

Or approximate age: _____

Travel Party #2 Country of Origin: _____

Travel Party #2 Citizenship(s): _____

Travel Party #2 Relationship to Traveler: _____

Travel Party #2 Type of U.S. Visa: _____

Travel Party #2 Visa Status: _____

Travel Party #2 Date Issued: _____

Other Information about Travel Party #2 (medical issues, special considerations): _____

Travel Party #3 Name: _____

Travel Party #3 Date of Birth: _____

Or approximate age: _____

Travel Party #3 Country of Origin: _____

Travel Party #3 Citizenship(s): _____

Travel Party #3 Relationship to Traveler: _____

Travel Party #3 Type of U.S. Visa: _____

Travel Party #3 Visa Status: _____

Travel Party #3 Date Issued: _____

Other Information about Travel Party #3 (medical issues, special considerations): _____

Add additional pages with answers to above questions for Travel Party #4, #5, #6, etc.

IMMIGRATION-RELATED COMMUNICATIONS WITH OFFICIALS OR AIRLINES

For each separate contact with immigration official, airline personnel or other official (“Contact #1”, “Contact #2”, “Contact #3”, etc.), provide the following:

Contact #1 Category:

- U.S. Customs and Border Patrol or Department of Homeland Security Official
- Other U.S. official
- Airline representative
- Non-U.S. immigration official
- Other (please describe): _____

Name of agency or airline you dealt with: _____

In what city and country?: _____

On what date? _____

By phone or in person? _____

What were you told by the agency/person/airline? _____

At what point in your journey?

- Before going to airport
- At airline check-in
- At immigration control at the departure airport
- In-flight,
- At arrivals immigration control
- Other (describe): _____

What documents did you provide? _____

Did they provide you written material related to the ban or to your travel? (Circle): Y / N

What were you told about your ability to enter/return to the U.S.? _____

Additional details: _____

Were you asked to sign anything or relinquish any documents? Y / N

If yes, describe circumstances and reasons given for
relinquishment/abandonment: _____

Did you ask to speak to any supervisory personnel? Y / N

What was the response? _____

Did you ask to speak to an attorney? Y / N

What was the response? _____

Were you detained, placed in a separate room, or asked to wait in any kind of holding
area? Y / N

If yes, describe circumstances, including length of time, separation from other
members of your travel party, use of restraints or handcuffs, provision of food or
water, availability of lavatory facilities: _____

Were you questioned about your religious beliefs, your views on U.S. President Trump,
your feelings toward the United States, or your support for groups and causes aligned
against the United States? Y / N

If yes, describe circumstances: _____

Were you asked about your social media posts or photos?

Y / N

If yes, describe circumstances: _____

Contact #2 Category:

U.S. Customs and Border Patrol or Department of Homeland Security Official

Other U.S. official

Airline representative

Non-U.S. immigration official

Other (please describe): _____

Name of agency or airline you dealt with: _____

In what city and country?: _____

On what date? _____

By phone or in person? _____

What were you told by the agency/person/airline? _____

At what point in your journey?

Before going to airport

At airline check-in

At immigration control at the departure airport

In-flight,

At arrivals immigration control

Other (describe): _____

What documents did you provide? _____

Did they provide you written material related to the ban or to your travel? (Circle): Y / N

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area? Y / N

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members of your travel party, use of restraints or handcuffs, provision of food or
water, availability of lavatory facilities: _____

Were you questioned about your religious beliefs, your views on U.S. President Trump,
your feelings toward the United States, or your support for groups and causes aligned
against the United States? Y / N

If yes, describe circumstances: _____

Were you asked about your social media posts or photos?

Y / N

If yes, describe circumstances: _____

ATTORNEY INFORMATION

Are you being represented by an attorney? (circle):

Y / N

Attorney Mobile Number: _____

Attorney Email: _____

May Your Attorney to Speak with Congress/Other Gov't? (circle):

Y / N

May Your Attorney Speak with Press? (circle):

Y / N

Other Comments: _____

INTERVIEWER INFORMATION

Interviewer Name: _____

Date of Contact: _____

Time of Contact: _____

Contact method (e.g., Phone, Email): _____

Questionnaire completed with the assistance of a translator?: Y / N

INTERVIEWER NOTES

Interviewer provided FAQ/Information Sheet or other information? (circle) Y / N

Traveler requested follow-up (legal assistance or other advocacy)? (circle): Y / N

Other Comments: _____

INTERNAL CODES

Response (circle): Y / N

Responding organization: _____

Response date: _____