

Foreign National Contact Information

(January 2024)

Complete a Foreign National Contact (FNC) Information Form for all personal or professional contacts with whom you maintain continuous contact or confide personal information who are at least 18 years of age and considered one of the following:

- **Non-U.S. citizens** (to include U.S. Legal Permanent Residents (LPR) green card holders)
- **Naturalized U.S. citizens**
- **Dual citizens of the U.S. and any other country**

It is important that all information is legible, detailed, complete, and accurate. Please submit a separate form for each person.

Note: DO NOT contact the foreign national to obtain requested information unless it can be obtained in a non-alerting manner and without indicating governmental interest. Complete the form to the best of your ability.

1. FULL NAME: Underline family name, if applicable. Please ensure that all parts of the name are included. Include maiden name, if applicable. Include Ideograms and/or Telecodes, if applicable.

2. Other names used: (include aliases, nicknames, previous legal names, etc.) Include dates/circumstances regarding name use.

3. DATE OF BIRTH: (Month/Day/Year or approximate age) PLACE OF BIRTH: (Village, City, Province, State and Country)

Gender assigned at birth:	Male	Female	
Gender identity (if different):	Male	Female	Non-binary

4. CURRENT CITIZENSHIP(S): (Include dual) (US naturalization certificate number or INS LPR registration number)

- Past citizenship(s) including dates:

5. Tribal, clan, and sub-clan affiliation, if applicable:

6. NATURE OF RELATIONSHIP (i.e., family member, social, business, intimate, etc.); Date of initial contact; Date of most recent contact; DEGREE OF ASSOCIATION; and CIRCUMSTANCES OF MEETING; Who introduced you, etc.:
7. ADDRESS/PHONE/E-MAIL: Provide dates of residence as well as prior country (ies) of residence & dates.
- Addresses (current first and in reverse chronological order). If outside of the US, reason for moving to/from foreign country

 - Phone Number(s): (Include landlines, cell, work, home or other phone numbers known to you.)

 - Email Addresses(s) or known social networking addresses or identities:
8. OCCUPATION AND EMPLOYER: (if retired, occupation and employer prior to retirement).
- Current occupation: (include employer name and address if known)

 - All known previous occupations/employers including approx. dates and country:
9. FREQUENCY AND MEANS OF CONTACT: (i.e. telephone, email, text, social networking websites, letters, in person; PLANS FOR FUTURE CONTACT: (correspondence, periodic visits, etc.)

10. DESCRIBE ANY GOVERNMENT, POLITICAL, SECURITY SERVICE, MILITARY OR INTELLIGENCE AFFILIATION:

- If any, please describe any task or service you have been asked to perform by this individual or their associates:

11. DESCRIBE ANY KNOWN PARTICIPATION OR FINANCIAL SUPPORT TO ORGANIZATIONS THAT SEEK TO CHANGE US GOVERNMENT POLICY BY FORCE OR VIOLENCE:

12. DOES THIS PERSON KNOW OF YOUR (PROPOSED) EMPLOYMENT: If so, please describe circumstances and approximate date:

13. OTHER NOTEWORTHY INFORMATION or ADDITIONAL INFORMATION KEYED TO QUESTIONS 1-12 (use additional pages if necessary):

14. On rare occasions, the employer may prohibit continued contact with certain foreign nationals. Are you willing to cease contact with this individual if directed to do so? (Yes or no) If no, provide reason:

If this FNC is an **immediate family member**; (**spouse**; **parent** to include stepparents, adopted parents, and guardians; **sibling** to include stepsiblings, half-siblings, and adopted siblings; **children over age 18** to include biological, adopted, and stepchildren; **person over age 18 living with you** (regardless of relationship); **father-in-law** or **mother-in-law**), please complete the following questions (#15-22) regardless of the extent of contact you have with this individual. Please answer all questions to the best of your ability and write N/A if any question is not applicable. **These questions will be reviewed during the course of your background investigation.**

15. Explain (a) who sponsored your family member's entry into the U.S. (b) whose entry he/she has sponsored and (c) whether or not your family member has ever been denied entry into the U.S. (if yes, why). If he/she has entered the U.S. multiple times (i.e. on multiple visas), please explain each entry

Name: _____ SSN: _____ Date: _____

16. Describe the circumstances of the contact your family member has with relatives residing outside the U.S. Specifically explain (a) how often they have contact, (b) reason for maintaining contact, and (c) method of contact (i.e. telephone, fax, email, letters, in person, etc).
17. Provide all known (a) dates of travel and (b) reasons for travel of each trip your family member has taken outside the U.S.
18. Has your family member ever provided or received financial assistance from any foreign (non-U.S.) citizen and/or organization (regardless of the location of the person or organization)? If yes, explain (a) the individual(s) who gave/received the assistance (b) the amount of money involved, (c) how often the assistance occurred, (d) the reason for the assistance, (e) how the assistance is/was provided (i.e. wire transfer, direct payment, through a third party) and (f) what the agreement is regarding repayment.
19. Does your family member maintain any foreign (non-U.S.) financial interests (i.e., business investments, bank accounts, property, stocks, retirement, social security benefits, etc)? If yes, explain (a) the origin/purpose of the investment, (b) how much money is involved, (c) at what institution the money is maintained or where the property is located, and (d) whether or not you will likely receive inheritance from your family member
20. Does your family member have any current or previous legal actions (lawsuits, judgments, criminal charges, etc) or financial obligations (loans, collection accounts, etc) outside the U.S.? If yes, please explain the circumstances and current status of the legal action or obligation.

Foreign Contact's Name: _____

Relationship: _____

21. If your family member has had contact with any non-U.S. government entity, organization, or military entity, provide (a) with what person or organization he/she had contact (b) dates of contact and (c) reason for contact (i.e. employment, social, business, etc).

22. OTHER NOTEWORTHY INFORMATION or ADDITIONAL INFORMATION KEYED TO QUESTIONS 15-21

Name: _____ SSN: _____ Date: _____