

**OFFICE OF CONGRESSWOMAN ANNA G. ESHOO  
PRIVACY CONSENT FORM**

**Visas**

*Please print clearly*

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name: (Last) \_\_\_\_\_,

(First) \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: (Daytime): \_\_\_\_\_ (Evening) \_\_\_\_\_

E-mail: \_\_\_\_\_

Federal Agency Involved: \_\_Department of State and USCIS\_\_\_\_\_

Name of Applicant for visa as it appears on the passport:

\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Passport #: \_\_\_\_\_

Location of Embassy/Consulate of interview: \_\_\_\_\_

Date and time of interview: \_\_\_\_\_

Agency Case #: \_\_\_\_\_

- Please describe the nature and date of your latest correspondence or contact with the agency:

- Please briefly explain the problem you are having with the federal agency referenced above:

- Have you previously contacted this or any other representative's office regarding this matter? If so, when?

*In accordance with the provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), I hereby authorize Congresswoman Anna Eshoo and her staff to make inquiries on my behalf to any federal agency and to receive confidential information in their efforts to assist me in resolving a federal matter.*

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Signature

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Printed Name

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Today's Date

Please Return to:

698 Emerson Street  
Palo Alto, California 94301  
650-323-2984 (phone)  
650-323-3498 (fax)