

ATTACHMENT 7. INS DIRECT MAIL PROGRAM FORMS

Table A7-1 lists the INS form types currently included in the Direct Mail Program, with details of the required fee, if any, and where to file them. Forms are subject to change. All of these forms, except those noted with an asterisk, are available in Portable Document Format (PDF) with instructions for filing them on the DOJ web site:

<http://www.ins.usdoj.gov/graphics/formsfee/forms/index.htm>

The forms noted with an asterisk are included in this attachment at the end of Table A7-1.

TABLE A7-1
INS DIRECT MAIL PROGRAM FORMS

Form Number	Form Title	Filing Fee	Where to File
G-639	Freedom of Information/Privacy Act Request	Varies. See Form Instructions	District/Sub-Office, Service Center
G-731	Inquiry About Status of I-551 Alien Registration Card	None	Service Center
I-90	Application to Replace Permanent Resident Card	\$110	Service Center
I-102	Application for Replacement/Initial Nonimmigrant Arrival/Departure Record	\$85	District/Sub-Office or Service Center
I-129	Petition for a Non-immigrant Worker	\$110 base fee, plus \$500 additional for H-1B petitions.	Service Center, See Form
I-129F	Petition for Alien Fiancé(e)	\$95	Service Center
I-129S	Non-immigrant Petition Based on Blanket L Petition	None	Service Center
I-129W	Petition for Non-immigrant Worker Filing Fee Exemption	None	Service Center
I-130	Petition for Alien Relative	\$110	Service Center
I-131	Application for Travel Document	\$95	Nebraska, Texas, and Vermont Service Centers, See Form
I-140	Immigrant Petition for Alien Worker	\$115	Service Center
I-360	Petition for Amerasian, Widow(er), or Special Immigrant	\$80 (except there is no fee for Amerasians)	See Form. District/Sub-Office, Service Center, Vermont Service Center
I-485	Application to Register Permanent Residence or to Adjust Status	\$220 14 years and older. \$160 under 14 years of age.	See Form, District/Sub-Office, Service Center
I-485 Supplement B	Form I-485 Instructions for NACARA	No additional Fee	Texas Service Center
I-485 Supplement C	Instructions to Supplement C to Form I-485 (HRIFA)	No additional fee	Nebraska Service Center
I-526	Immigrant Petition By Alien Entrepreneur	\$350	Service Center, See Form
I-539	Application to Extend/Change Nonimmigrant Status	\$120	See Form, Service Center
I-589	Application for Asylum	None	Service Center (see Asylum Application column)

TABLE A7-1
INS DIRECT MAIL PROGRAM FORMS

Form Number	Form Title	Filing Fee	Where to File
I-687	Application for Status as a Temporary Resident	\$50 (under age 18); \$185 (18 and over); \$420 family max	Service Center
I-690	Application for Waiver of Excludability	\$35	Service Center
I-694	Notice of Appeal of Decision	\$50	Service Center
I-695	Application for Replacement Employment Authorization or Temporary Residence Card	\$15	Service Center
I-724	Application to Waive Exclusion Grounds	\$90	Consulate or District/Sub-Office
I-730	Refugee/Asylee Relative Petition	None	Nebraska Service Center
I-751	Petition to Remove the Conditions on Residence	\$125	Service Center
I-765	Application for Employment Authorization	\$100	See Form, District/Sub-Office, Service Center, Asylum Office
I-817	Application for Voluntary Departure Under the Family Unity Program	\$120	Service Center
I-821	Application for Temporary Protected Status	Not to exceed \$50.	Service Center
I-821 Package	Forms and Instructions for TPS for Nicaraguans and Hondurans	Not to exceed \$50.	Service Center
I-824	Application for Action on an Approved Application or Petition	\$120	Service Center
I-829	Petition by Entrepreneur to Remove Conditions	\$345	Service Center
I-864	Affidavit of Support	None	See Form, District/Sub-Office Service Center
I-864A	Affidavit of Support Contract Between Sponsor and Household Member	None	See Form, District/Sub-Office Service Center
I-864 Package	I-864, I-864A and I-865	None	See Form, District/Sub-Office Service Center
I-881	NACARA - Suspension of Deportation or Application for Special Rule Cancellation of Removal	\$215	Either California Service Center or Vermont Service Center, See Form
N-400	Application for Naturalization	\$225	Service Center
N-644	Application for Posthumous Citizenship	\$80	Service Center
N-648	Medical Certification for Disability Exceptions	None	Service Center

* The following forms are processed in the Service Centers, are not available on the INS web site, and are included herein:

- I-687 – Application for Status as a Temporary Resident
- I-724 – Application to Waive Exclusion Grounds



Table A7-2 lists additional forms processed in the Service Centers. These forms are not available on the INS web site, and are included herein.

TABLE A7-2
OTHER SERVICE CENTER WORKLOAD

Form Number	Form Title	Where Processed
BOIR-29	Notice of Appeal to the Board of Immigration Appeals of Decision of District Director	Service Center
I-17	Petition for Approval of School for Attendance by Nonimmigrant Students	Service Center
I-17A	Designated School Officials	Service Center
I-17B	School System Attachment	Service Center
I-175	Application for Nonresident Alien's Canadian Border Crossing Card	Service Center
I-90	I-90 Renewal Program (I-90 appears on Table A7-1 above)	CSC, NSC
I-181 Copy 2	Memorandum of Creation of Record of Lawful Permanent Residence	Service Center
I-181 Copy 3	Memorandum of Creation of Record of Lawful Permanent Residence	Service Center
I-190	Application for Nonresident Alien's Mexican Border Crossing Card	Service Center
I-191	Application for Advance Permission to Return to Unrelinquished Domicile	Service Center
I-192	Application for Advance Permission to Enter as Nonimmigrant Pursuant to Section 212(d)(3) of the Immigration and Nationality Act	Service Center
I-193	Application for Waiver of Passport and/or Visa	Service Center
I-212	Application for Permission to Reapply for Admission Into the United States After Deportation or Removal	Service Center
I-290B	Notice of Appeal to the Administrative Appeals Unit (AAU)	Service Center
I-600	Petition to Classify Orphan as an Immediate Relative	Service Center
I-600A	Application for Advance Processing of Orphan Petition [8CFR 204.1(b)(3)]	Service Center
I-601	Application for Waiver of Ground of Excludability	Service Center
I-612	Application for Waiver of The Foreign Residence Requirement of Section 212(e) of the Immigration and Nationality Act, as amended	Service Center
I-698	Application to Adjust Status from Temporary to Permanent Resident (Under Section 245A of Pub. L. 99-603)	Service Center
N-300	Application to File Declaration of Intention	Service Center
N-336	Request for Hearing on a Decision Naturalization Proceedings Under Section 336 of the Act	Service Center
N-470	Application to Preserve Residence for Naturalization Purposes	Service Center
N-565	Application for Replacement Naturalization/Citizenship Document	Service Center
N-600	Application for Certificate of Citizenship	Service Center
N-643	Certificate of Citizenship on Behalf of Adopted Child	Service Center
NAFTA CAN	See I-129	Nebraska Service Center
Optional Form 155A (State Department)	Immigrant Visa and Alien Registration	California Service Center, Texas Service Center
Optional Form 155B (State Department)	Immigrant Visa and Alien Registration	California Service Center, Texas Service Center

TABLE OF ATTACHED INS FORMS

Form #	Form Title	Page No.
BOIR-29	Notice of Appeal to the Board of Immigration Appeals of Decisions of District Director.....	A7-5
I-17	Petition for Appeal of School for Attendance by Nonimmigrant Student.....	A7-7
I-17A	Designated School Official.....	A7-12
17B	School System Attachment.....	A7-13
I-175	[Statement regarding arrests, deportations, exclusions, etc.].....	A7-15
I-181	Memorandum of Creation of Record of Lawful Permanent Residence.....	A7-16
I-190	[Request for temporary entry into US - in Spanish].....	A7-18
I-191	Application for Advance Permission to Return to Unrelinquished Domicile.....	A7-21
I-192	Application for Advance Permission to Enter as Nonimmigrant Pursuant to Section 212(d)(3) of the Immigration and Nationality Act.....	A7-23
I-193	Application for Waiver of Passport and/or Visa.....	A7-25
I-212	Application for Permission to Reapply for Admission Into the United States After Deportation or Removal.....	A7-27
I-290B	Notice of Appeal to the Administrative Appeals Unit (AAU).....	A7-29
I-600	Petition to Classify Orphan as an Immediate Relative.....	A7-31
I-600A	Application for Advance Processing of Orphan Petition.....	A7-35
I-601	Application for Waiver of Ground of Excludability.....	A7-39
I-612	Application for Waiver of The Foreign Residence Requirement of Section 212(e) of the Immigration and Nationality Act, as amended.....	A7-43
I-687	Application for Status as a Temporary Resident.....	A7-47
I-698	Application to Adjust Status from Temporary to Permanent Resident.....	A7-53
I-724	Application to Waive Exclusion Grounds.....	A7-57
N-300	Application to File Declaration of Intention.....	A7-66
N-336	Request for Hearing on a Decision in Naturalization Proceeding Under Section 336 of the Act.....	A7-69
N-470	Application to Preserve Residence for Naturalization Purpose.....	A7-71
N-565	Application for Replacement Naturalization/Citizenship Document.....	A7-75
N-600	Application for Certificate of Citizenship.....	A7-78
N-643	Certificate of Citizenship on Behalf of Adopted Child.....	A7-86
OF-155A	Immigrants Visa and Alien Registration.....	A7-88
OF-155B	Immigrants Visa and Alien Registration.....	A7-89

EOIR-29

INSTRUCTIONS

1. **Filing.** This notice of appeal must be filed with the Office of the Immigration and Naturalization Service (INS) having administrative control over the Record of Proceeding within 15 calendar days (or 18 calendar days if mailed) after service of the decision of the District Director. The Notice of Appeal is not to be forwarded directly to the Board of Immigration Appeals (BIA).
 2. **Fees.** A fee of one hundred and ten dollars (\$110) must be paid for filing this appeal. It cannot be refunded regardless of the action taken on the appeal. (Only a single fee need be paid if two or more persons are covered by a single decision.) **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States Currency. If appellant resides in Guam, check or money order must be payable to the "Treasurer of Guam." If appellant resides in the Virgin Islands, checks or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other appellants must make the check or money order payable to the "Treasurer of the United States." When check is drawn on account of a person other than the appellant, the name and "A" number of the appellant must be entered on the face of the check. If appeal is submitted from outside the United States, remittance may be made by bank international money order or foregoing draft drawn on a financial institution in the United States and payable to the "Treasurer of the United States" in United States currency. Personal checks are accepted subject to collectibility. An uncollected check will render the appeal form and any document issued pursuant thereto invalid.
 3. **Counsel.** In presenting and prosecuting this appeal, the INS may be represented by appropriate counsel. An appellant may be represented at no expense to the Government by counsel or other duly authorized representative. A separate notice of appearance must be filed with this notice of appeal.
 4. **Briefs.** When a brief is filed, it shall be submitted to the Office of the Immigration and Naturalization Service having administrative control over the Record of Proceeding in this matter within the time designated by the District Director. A copy shall be served on the opposing party. The District Director, or the BIA, for good cause, may extend the time of filing a brief or reply brief. The BIA in its discretion may authorize the filing of briefs with it, in which event the opposing party shall be allowed a specified time to respond.
 5. **Oral argument.** No personal appearance by the appellant or counsel is required. The BIA will consider every case on the record submitted, whether or not oral representations are made. Oral argument may be requested. If approved, oral argument in any case should not extend beyond fifteen (15) minutes, unless additional time is granted by the BIA pursuant to a request made in advance of the hearing. No interpreters are furnished by the Government for the argument before the BIA.
- An appellant will not be released from detention or permitted to enter the United States to present oral argument to the BIA personally. The appellant, however, may make arrangements to have someone represent him/her before the BIA. Unless such arrangements are made at the time the appeal is taken, the Board will not calendar the case for argument.
6. **Summary dismissal of appeals.** The BIA may deny oral argument and summarily dismiss any appeal in which (i) the party concerned fails to specify the reasons for his/her appeal on the reverse side of this form, (ii) the only reason specified by the party concerned for his/her appeal involves a finding of fact or conclusion of law which was conceded by him/her at the hearing, (iii) the appeal is from an order that grants the party concerned the relief which he/she requested. *It is understood that the appeal is frivolous or filed solely for the purpose of delay.*

**NOTICE OF APPEAL TO THE BOARD OF IMMIGRATION APPEALS
OF DECISION OF DISTRICT DIRECTOR**

In the Matter:

Fee Stamp

File Number: A - -

1. I hereby appeal to the Board of Immigration Appeals from the decision of the District Director, _____ District, dated _____, in the above entitled case.
2. Specify reasons for this appeal and continue on separate sheets if necessary. If the factual or legal basis for the appeal is not sufficiently described the appeal may be summarily dismissed.

3. I do do not desire oral argument before the Board of Immigration Appeals in Falls Church, Virginia.
4. I am am not filing a separate written brief or statement.

Signature of Appellant
(or attorney or representative)

(print or type name)

Date

Address (number, street, city, state, Zip code)

EDIR-29

(A7-6)



INSTRUCTIONS - (Please tear off this page before submitting petition.)

1. Filing of Petition: This petition (Form I-17) must be submitted in duplicate or with legible photocopies of pages 1, 2, and 3 to the district director or officer-in-charge of the Immigration and Naturalization Service office having administrative jurisdiction over the place in which the school or school system is located. One petition may be filed for an entire school system if all schools in the system are located in the same immigration district. Separate petitions are required for school-system schools located within the jurisdiction of different district directors. If the petition is for a school system, attach a Form I-17B listing these schools and campuses included in this petition. If a previously approved school system wishes approval for schools or campuses not listed on its original Form I-17B or wishes to delete schools or campuses that are, or to correct or update information on its original I-17B, it must submit a new Form I-17, without fee, accompanied by Form I-17B and, if applicable, Form I-17A, Designated School Officials. If a previously approved school that was not a school system becomes a school system and wishes approval for additional school(s) or campus(es), it must submit a new Form I-17, without fee, accompanied by Form I-17B, and, if applicable, Form I-17A.

Payment of Fee: A fee of one hundred thirty dollars (\$130) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam". If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service". When check is drawn on account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the petition and any document issued pursuant to it invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. A fee is not required if the petitioner is a school or school system owned or operated as a public education institution or system by the United States or a state or a political subdivision of it. Also, a fee is not required if the petition is for continuation of approval previously granted by the Immigration and Naturalization Service. (See instruction No. 9.)

Execution of Petition: This form must be executed by the principal officer of the school authorized to execute contracts. A petition in behalf of a public school must be made by the School Board and signed by its president or chairman. In the case of a petition in behalf of a public school, only questions 1 through 7, 9 11, 12, and 14 must be completed.

4. Supporting Documents:

(a) General:

Except in the case of a petition by a school within category (a), (b), or (c) of paragraph No. 5 below, a school catalog, if one is issued, must be submitted. If not included in the catalog or if a catalog is not issued, the school must furnish a written statement containing information concerning: (1) the size of its physical plant; (2) the nature of its facilities for study and training; (3) the educational, vocational, or professional qualifications of the teaching staff; (4) the salaries of teachers; (5) attendance and scholastic grading policy; (6) the amount and character of supervisory and consultative services available to students and trainees; and (7) finances (including certified copy of accountant's last statement of school's net worth, income and expenses.) Unless the petitioner is within categories (I) or (II) of paragraph (4) (b) below, it must submit a certification by the appropriate licensing, approving, or accrediting official that it is licensed, approved, or accredited. In lieu of such a certification, a school which is recognized by a state approving agency as an "educational institution" for study by veterans under the provisions of P.L. 550 (82nd Congress) may submit a statement of recognition signed by the appropriate official of the state approving agency. A charter is not considered a license, approval, or accreditation.

(b) Additional Documents Required:

- (i) **School or school system owned or operated as a public education institution by the United States or a state or political subdivision of it.** - must submit a certification to that effect signed by the appropriate public official.
- (ii) **Private or parochial elementary or secondary school or school system.** - must submit a certification signed by the appropriate public official that it meets the requirements of the state or local educational system.
- (iii) **Institution of higher education not included within category (a) or (b) of paragraph No. 5.** - must submit evidence that it confers upon its graduates recognized bachelor's, master's, doctor's, professional, or divinity degrees, or if it does not confer these degrees, that its credits have been and are accepted unconditionally by at least three institutions of higher learning within category (a) or (b). If unable to submit evidence of the unconditional acceptance of its credits, the petitioner may submit a statement that the petitioner is recognized as a "correspondent" or candidate for accreditation" from a nationally recognized regional association which has jurisdiction over accreditation of institutions of higher education in the geographic area where the petitioner is located.
- (iv) **Elementary or secondary school not included within category (a) or (b) of paragraph No. 5.** - must submit evidence that it qualifies graduates for acceptance by schools of higher educational level within category (a), (b), or (c) of paragraph No. 5.
- (v) **Vocational school, business school, language school, or American institution of research recognized as such by the Attorney General.** - must submit evidence that its courses of study are accepted as fulfilling the requirements for the attainment of an educational, professional, or vocational objective and are not avocational or recreational in character.

FORM I-17

(47-7)

Consultation by the Immigration and Naturalization Service with the Department of Education: Before a decision is made on the petition, the district director will consult the Department of Education by transmitting to that department the petition, supporting documents, and any report of interviews or other inquiry conducted by the Service, with a request for advice as to whether the petitioner is an established institution of learning or other recognized place of study, is operating a bona fide school, and has the necessary facilities, personnel and finances to instruct in recognized courses. Since the Department of Education has advised that each of the following is so considered, however, consultation with that department is not required if the school is within one of the following categories:

- (a) Any school or school system owned or operated as a public educational institution by the United States or a state or political subdivision of it;
- (b) Any school listed in the current Department of Education publication "Accredited Postsecondary Institutions and Programs", or "Education Directory, Colleges and Universities";
- (c) Any secondary school operated by or as part of an institution of higher learning listed in the current Department of Education publications, "Accredited Postsecondary Institutions and Programs", or "Education Directory, Colleges and Universities".

8. Interview of Petitioner: An authorized representative of the petitioner will be requested to appear in person before an immigration officer prior to adjudication of the petition, to be interviewed under oath concerning eligibility of the school for approval. If the school is within category (a), (b), or (c) of paragraph 8, the interview may be waived.

7. Eligibility for Approval: To be eligible for approval, the petitioner must establish that it is a bona fide school, that it is an established institution of learning or other recognized place of study, that it possesses the necessary facilities, personnel, and finances to conduct instruction in recognized courses, and that it is, in fact, engaged in instruction of students in these courses.

8. Notification of Approval of Petition: Upon approval of petition, the petitioner will be notified of the action taken.

9. Review of School Approval: Each district director of the Immigration and Naturalization Service is required to review the approval accorded to the schools in his or her district from time to time. The review is made to determine whether the school has complied with the reporting requirements concerning students and continues to be eligible for approval. Each school whose approval is reviewed may be required to furnish a currently executed I-17 (this form) as a petition for continuation of approval, without fee, together with the supporting documents specified in the form. The review may include an interview of the school's authorized representative and consultation with the Department of Education. If upon completion of the review, the district director finds that the school's approval should not be continued, he or she shall institute proceedings to withdraw its approval.

10. Designated Official: A "designated official" or designated school official, as defined in 8 CFR 214.2(b)(1), means a regularly employed member of the school administration whose office is located at the school and whose compensation does not come from commissions for recruitment of foreign students. An individual whose principal obligation to the school is to recruit foreign students for compensation does not qualify as a designated official. The president, owner, or head of a school or school system must designate a designated official. The designated official may not delegate this designation to any other person. No school or institution may have more than five designated officials at any one time except that in a multi-campus institution, no campus may have more than five designated officials at any one time. In an elementary or secondary school system, however, the entire school system is limited to five designated officials at any one time. Form(s) I-17A listing up to five designated school officials for each school or campus within a school system (except an elementary or secondary school system) must be attached to this form, but it is not necessary for each school or campus to have its own designated officials. If there is a change in designated officials, a new Form I-17A must be submitted to the Immigration and Naturalization Service office having jurisdiction over the school within thirty days. A designated official may sign certain forms relating to and has other responsibilities with respect to F-1 and/or M-1 students.

11. Change in School Term or School Classification Code: If a previously approved school has changed its school classification code (F or M or both), it must submit a new Form I-17, without fee, and, if applicable, Form I-17A and/or I-17B.

12. Authority: We request the information on this form to carry out the immigration laws contained in Title 8, United States Code. We need this information to determine whether a person is eligible for immigration benefits. This information you provide may also be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies during the course of the investigation required by the Service. You do not have to give this information. However, if you refuse to give some or all of it, your petition may be denied.

13. Reporting Burden: Public reporting burden for this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Justice, Immigration and Naturalization Service (Room 5304), Washington, D.C. 20536; and to the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0070, Washington, D.C. 20503.

Form I-17

17-8

<p>INS USE ONLY</p> <p>School Code _____ 214F _____</p> <p>Approval for attendance of students under:</p> <p>1. <input type="checkbox"/> Section 101(a)(15)(F) of the Act.</p> <p>2. <input type="checkbox"/> Section 101(a)(15)(M) of the Act.</p> <p>3. <input type="checkbox"/> Both of the above sections of the Act.</p> <p>This request is to:</p> <p>1. <input type="checkbox"/> Create a file.</p> <p>2. <input type="checkbox"/> Update a file.</p>	<p style="text-align: center;">Fee Stamp</p> <hr/> <p>Date of Approval</p> <p>DD</p> <p>District</p>
---	--

This section is to be COMPLETED BY THE SCHOOL - DO NOT WRITE ABOVE THIS LINE - (Please read instructions before filling in form.) If you need more space to answer fully any items on this form, use a separate sheet; identify each answer with the letter and number of the corresponding item, and sign and date each sheet.
PRESS FINELY - LEGIBLE COPY REQUIRED

TO THE IMMIGRATION AND NATURALIZATION SERVICE:

1. Petition is made for approval, or continuation of approval, of this institution as a school for attendance by nonimmigrant alien students under (complete as appropriate):
- a. Section 101(a)(15)(F) of the Act (academic and language students),
 - b. Section 101(a)(15)(M) of the Act (vocational students),
 - c. Both of the above sections of the Act, and the following statement of fact is submitted:

2. Name of school _____

3. Mailing address of school _____

4. This school is a:
- a. Public institution (Leave No. 10 blank. Please note that no fee is required. See instruction No. 2)
 - b. Private institution (Complete No. 10).

5. This school is engaged in: (Check appropriate blocks and explain further if necessary).
- a. Primary Education
 - b. High School Education (Academic or Vocational)
 - c. Vocational or Technical Education (Other than High School)
 - d. Language Training
 - e. Higher Education (listing one or more of the following degrees: Associate, Bachelor's, Master's, PhD)
 - f. Other (Identify) _____

6. This school's sessions are based on:
- a. Semesters
 - b. Trimesters
 - c. Quarters
 - d. Other (explain) _____

7. Provide the date (month and day) registration begins for EACH session during a calendar year, including the summer session if your school has one. If there is no beginning registration date, please explain. If there are more than five sessions in your school do NOT enter any information in this space, but list all beginning registration dates on a piece of paper attached to this form

a. _____

b. _____

c. _____

d. _____

e. _____

RECEIVED	DATE IN	RECEIVED OUT	COMPLETED

Form I-17

97-9

8. Date school was established _____

9. Location of school (if different from mailing address) _____

10. Name and address of owner _____

11. a. Petition is for initial approval. (See instruction No. 2)
b. Petition is for continuation of approval (See instructions No. 2 and 9). If for continuation, complete the following:
(1) Date of original approval _____
(2) INS File Number _____

12. The school operates under the following Federal, state, local, or other authorization (if none, write "none"):

13. The school has been approved by the following national, regional, or state accrediting association or agency (if none, write "none"):

14. Nature of subject matter taught (check as many as are appropriate):
a. Liberal Arts d. Religion g. Other (Explain) _____
b. Fine Arts e. Professional Studies
c. Language f. Vocational or Technical Training

15. List the degrees available from your school.

16. Check as appropriate and explain further if necessary:
If the school is engaged in elementary or secondary education, it does does not qualify its graduates for acceptance by accredited schools of higher educational level. _____
If the school is engaged in higher education, it does does not confer recognized bachelor's, master's, doctor's, professional, or divinity degrees. Its credits are are not recognized by and transferable to institutions of study which confer degrees. _____
If the school is engaged in vocational or technical education, it does does not qualify its graduates for employment in the occupations for which preparation is offered. _____

17. Sessions are held as follows:
a. Day Only b. Night Only c. Day and Night

18. Requirements for admission:

19. Courses of study and time necessary to complete each:

20. Requirements for graduation:

21. Causes for expulsion:

22. Average annual number of
a. Classes _____ c. Teachers or Instructors _____
b. Students _____ d. Non-teaching employees _____

23. Approximate annual total cost of room, board, tuition, etc., per student \$ _____

If the school is approved, THE PETITIONER AGREES:

1. In acceptance of any nonimmigrant alien student, to furnish that student a Certificate of Eligibility (Immigration and Naturalization Service Form I-20A/B for an F-1 student or Form I-20M/N for an M-1 student).

2. To keep records containing the following specific information and documents relating to each nonimmigrant F-1 or M-1 student to whom the school issues a Form I-20A/B or I-20M/N, while the student is attending the school and until the school notifies the Service, in accordance with Immigration and Naturalization Service regulations, that the student is no longer pursuing a full course of study. The school must keep a record of having complied with the reporting requirements for at least one year. If a student who is out of status is restored to status, the school the student is attending is responsible for maintaining these records following receipt of notification from the Service that the student has been restored to status. The designated school official must make the following information and documents available to or furnish them to the Immigration and Naturalization Service upon request. The information and documents which the school must keep on each student are as follows:

1. The admission number from the student's Form I-20 ID copy.
2. Country of citizenship.
3. Address and telephone number in the United States.
4. Status, i.e., full-time or part-time.
5. Course load.
6. Date of commencement of studies.
7. Degree program and field of study.
8. Expected date of completion.
9. Nonimmigrant classification.
10. Termination date and reason, if known.
11. The documents which show the scholastic ability and financial status on which the student's admission to the school was based.
12. Information specified by the Service as necessary to identify the student, such as date and place of birth, and to determine the student's immigration status.

3. That in any advertisement, catalog, brochure, pamphlet, literature, or other material printed or reprinted by or for this school, any statement which may appear in that material concerning approval for attendance by nonimmigrant students must be limited solely to the following:

"This school is authorized under Federal law to enroll nonimmigrant alien students."

I CERTIFY that I am authorized to execute this petition. I understand that unless this institution fully complies with all terms as described on this form, approval may be withdrawn.

Dated at _____, this _____ day of _____, 19 _____.

Signature _____

Title _____

CORPORATE SEAL OF INSTITUTION

FORM 2-77

A7-

(A7-11)

U. S. DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Designated School Officials

DEFINITIONS -

A "designated official" or "designated school official", as defined in 8CFR214.3(d)(1), means a regularly employed member of school administration whose office is located at the school and whose compensation does not come from commissions for recruitment of foreign students. An individual whose principal obligation to the school is to recruit foreign students for compensation DOES NOT QUALIFY as a designated official. The designated official MAY NOT delegate this authority to any other person. No school or institution may have more than five designated officials at any one time. (In a multi-campus institution, each campus may have as many as five designated officials. In an elementary or secondary school system, however, the entire school system is limited to five designated officials.)

Form(s) I-17A (this form) listing up to five designated officials for each school or campus within a school system (except an elementary or secondary school system) must be attached to each Form I-17, Petition for Approval of School for Attendance by Nonimmigrant Students, but it is not necessary for each school or campus to have its own designated officials. If there is a change in designated officials, a new Form I-17A must be submitted to the Immigration and Naturalization Service office having jurisdiction over the school within thirty days. Only the new designated official(s) need to be listed when there is a change in designated officials.

A designated official may sign certain forms relating to and has other responsibilities with respect to F-1 and/or M-1 students.

I, THE UNDERSIGNED, have read the Immigration and Naturalization Service's regulations relating to nonimmigrant students, namely 8 CFR 214.1(b), 8 CFR 214.3(d), and 8 CFR 214.3(m); the Service's regulations relating to change of nonimmigrant classification for students, namely 8 CFR 248.1(c), 8 CFR 248.1(d), 8 CFR 248.3(b), and 8 CFR 248.3(d); the Service's regulations relating to school approval, namely 8 CFR 214.3; and the Service's regulations relating to withdrawal of school approval, namely 8 CFR 214.4. I intend to comply with these regulations. (Press Firmly - Legible Copy Required)

Designated Official Number 1 LAST NAME, FIRST NAME (Print or Type)	Title (Print or Type)	Signature	<input type="checkbox"/> Initial designation <input type="checkbox"/> Replacement for previous designated official number 1
Telephone number			
Designated Official Number 2 LAST NAME, FIRST NAME (Print or Type)	Title (Print or Type)	Signature	<input type="checkbox"/> Initial designation <input type="checkbox"/> Replacement for previous designated official number 2
Telephone number			
Designated Official Number 3 LAST NAME, FIRST NAME (Print or Type)	Title (Print or Type)	Signature	<input type="checkbox"/> Initial designation <input type="checkbox"/> Replacement for previous designated official number 3
Telephone number			
Designated Official Number 4 LAST NAME, FIRST NAME (Print or Type)	Title (Print or Type)	Signature	<input type="checkbox"/> Initial designation <input type="checkbox"/> Replacement for previous designated official number 4
Telephone number			
Designated Official Number 5 LAST NAME, FIRST NAME (Print or Type)	Title (Print or Type)	Signature	<input type="checkbox"/> Initial designation <input type="checkbox"/> Replacement for previous designated official number 5
Telephone number			

I, THE UNDERSIGNED PRESIDENT, OWNER, OR HEAD of the school or school system named below certify that the above individuals are designated officials of the school or school system.

Name (Print or Type)	Title (Print or Type)	Signature
----------------------	-----------------------	-----------

Name of School System, School, or Campus - List all schools or campuses and show three-digit suffix for which the above officials are designated if for more than one school or campus but not for the entire school system.

INS FILE No. if known. — 214F — — — Date
 (Only three digit suffix of school system, other than an elementary or secondary school system, designating not more than five school officials for the entire system or for more than one school or campus within the system)

Address of School System, School, or Campus

INSTRUCTIONS - If a school system is seeking approval for a number of schools for attendance by nonimmigrant students, form must be completed and submitted with Form I-17. Furnish all known information for each school or campus within system. If more space is needed to list all schools, attach additional forms as necessary, and number each at the bottom. Please PRINT or TYPE all information on this form.

If an approved school system wishes to update or correct the information on its original Form I-17B, a new Form I-17 must be submitted, without fee, accompanied by Form I-17B and, if applicable, I-17A.
PRESS FIRMLY - LEGIBLE COPY REQUIRED.

Name of School System _____ INS File Number _____
Requested Action: _____

- a. Initial approval for the following school(s) or campus(es):
- b. Addition of the following school(s) or campus(es) to the list of approved institutions within the above school system:
- c. Removal of the following school(s) or campus(es) from the list of approved institutions within the above school system:
- d. Change or correction in the following information relating to school(s) or campus(es) which have been approved. (Fill in only the information which is to be added to or adjusted in the INS records, and the school's three-digit suffix):

1. School or Campus Name		2. School or campus 3-digit suffix	
3. Mailing Address (include ZIP Code)		4. Location (if different from mailing address)	
1. School or Campus Name		2. School or campus 3-digit suffix	
3. Mailing Address (include ZIP Code)		4. Location (if different from mailing address)	
1. School or Campus Name		2. School or campus 3-digit suffix	
3. Mailing Address (include ZIP Code)		4. Location (if different from mailing address)	
1. School or Campus Name		2. School or campus 3-digit suffix	
3. Mailing Address (include ZIP Code)		4. Location (if different from mailing address)	
1. School or Campus Name		2. School or campus 3-digit suffix	
3. Mailing Address (include ZIP Code)		4. Location (if different from mailing address)	

For I-17A

A7-

I-17B

If the school is approved, THE PETITIONER AGREES:

1. Upon acceptance of any nonimmigrant alien student, to furnish that student a Certificate of Eligibility (Immigration and Naturalization Service Form I-20A/B for an F-1 student or Form I-20M/N for an M-1 student).
2. To keep records containing the following specific information and documents relating to each nonimmigrant F-1 or M-1 student to whom the school issues a Form I-20A/B or I-20M/N, while the student is attending the school and until the school notifies the Service, in accordance with Immigration and Naturalization Service regulations, that the student is no longer pursuing a full course of study. The school must keep a record of having complied with the reporting requirements for at least one year. If a student who is out of status is restored to status, the school the student is attending is responsible for maintaining these records following receipt of notification from the Service that the student has been restored to status. The designated school official must make the following information and documents available to or furnish them to the Immigration and Naturalization Service upon request. The information and documents which the school must keep on each student are as follows:
 1. The admission number from the student's Form I-20 ID copy.
 2. Country of citizenship.
 3. Address and telephone number in the United States.
 4. Status, i.e., full-time or part-time.
 5. Course load.
 6. Date of commencement of studies.
 7. Degree program and field of study.
 8. Expected date of completion.
 9. Nonimmigrant classification.
 10. Termination date and reason, if known.
 11. The documents which show the scholastic ability and financial status on which the student's admission to the school was based.
 12. Information specified by the Service as necessary to identify the student, such as date and place of birth, and to determine the student's immigration status.

3. That in any advertisement, catalog, brochure, pamphlet, literature, or other material printed or reprinted by or for this school, any statement which may appear in that material concerning approval for attendance by nonimmigrant students must be limited solely to the following:

"This school is authorized under Federal law to enroll nonimmigrant alien students."

I CERTIFY that I am authorized to execute this petition. I understand that unless this institution fully complies with all terms as described on this form, approval may be withdrawn.

Dated at _____, this _____ day of _____, 19 _____.

Signature _____

Title _____

INCORPORATE SEAL OF INSTITUTION

Form I-17A

A7-

A7-14

NAME (Last in CAPS)		FIRST	MIDDLE		
ADDRESS			FILE NO.		
PLACE OF BIRTH			NATIONALITY		
DATE OF BIRTH	EYES	HAIR	HEIGHT	WEIGHT	
			FT. IN.	LBS.	
SEX	MARKS				
<input type="checkbox"/> MALE					
<input type="checkbox"/> FEMALE					

I have never been arrested, refused a visa to enter the United States, apprehended by Immigration officials in the United States, granted voluntary departure or excluded or deported (includes) been a member of a proscribed organization (except as stated below).

Form I-175 (Rev. 4-1-75) U.S. DEPARTMENT OF JUSTICE - Immigration and Naturalization Service

Form I-175

A7-

A7-15

U.S. DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Memorandum of Creation of Record
of Lawful Permanent Residence

Place
File No.

Status as a lawful permanent resident of the United States is accorded:

Name in Case Of Street Address Apt. No. City, State, Zip	Sex 1 <input type="checkbox"/> Male 2 <input type="checkbox"/> Female		Date of Birth (Month/Day/Year)	
	City of Birth		Country of Birth	
	Country of Nationality		Country of Last Residence	
Marital Status 1 <input type="checkbox"/> Single 2 <input checked="" type="checkbox"/> Married 3 <input type="checkbox"/> Widowed 4 <input type="checkbox"/> Divorced 5 <input type="checkbox"/> Separated		Occupation	N/I Class at time of Adj.	Year Adm. to U.S. or Year of Change to Present N/I Class (whichever most recent)
Priority Date (Month/Day/Year)		Preference (if any)	Country to Which Chargeable (if any)	
Section 212 (a)(14) Labor Certification 1 <input type="checkbox"/> Applicable-Submitted 3 <input type="checkbox"/> Not Applicable		Mother's First Name	Father's First Name	
Last NIV issued at (U.S. Consulate Post)		Date of issuance of Last NIV	Number of Last NIV	Classification of Last NIV
Under the following provision of law				
<input type="checkbox"/> Public Law 95-612 <input type="checkbox"/> Public Law 96-212 <input type="checkbox"/> Private Law No. _____ of the _____ Congress _____ Session				
<input type="checkbox"/> Sec. 209 (a) of the I & N Act <input type="checkbox"/> Sec. 308 (a) of the I & N Act <input type="checkbox"/> Sec. 244 () of the I & N Act <input type="checkbox"/> Sec. 245 of the I & N Act				
<input type="checkbox"/> Sec. 248 of the I & N Act <input type="checkbox"/> Sec. 1 of the Act of 11/2/86 <input type="checkbox"/> Sec. 18 of the Act of 8/11/67 <input type="checkbox"/> Sec. 214 (d) of the I & N Act				
<input type="checkbox"/> Other law (Specify) _____				
As of _____ at _____				
Class of admission _____ PORT OF ENTRY FOR PERMANENT RESIDENCE				
REMARKS				
RECOMMENDED BY _____		DATE OF ACTION		
		DO		
		DISTRICT		
FOR USE BY VISA CONTROL OFFICE				
Date _____				
Foreign State _____				
Preference Category _____				
Number _____				
Month of issuance _____				
Signed _____				

CC: Page 2 Master Index copy sent on _____
 CC: Page 3 ADIT and Statistical report copy sent on _____

Form I-181 (Rev. 3-1-83)N

Form I-181 2. FOR MASTER INDEX REPORT
 A7. A7-16

U.S. DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Memorandum of Creation of Record
of Lawful Permanent Residence

Place
File No.

Status as a lawful permanent resident of the United States is accorded:

Name In Care Of Street Address Apt. No. City, State, Zip	Sex 1 <input type="checkbox"/> Male 2 <input type="checkbox"/> Female		Date of Birth (Month/Day/Year)	
	City of Birth		Country of Birth	
	Country of Nationality		Country of Last Residence	
Marital Status 1 <input type="checkbox"/> Single 2 <input type="checkbox"/> Married 3 <input type="checkbox"/> Widowed 4 <input type="checkbox"/> Divorced 5 <input type="checkbox"/> Separated		Occupation	N/I Class at time of Adj.	Year Adm. to U.S. or Year of Change to Present N/I Class (whichever most recent)
Priority Date (Month/Day/Year)		Preference (if any)	Country to Which Chargeable (if any)	
Section 212 (a)(14) Labor Certification 1 <input type="checkbox"/> Applicable-Submitted 2 <input type="checkbox"/> Not Applicable		Mother's First Name	Father's First Name	
Last NVV issued at (U.S. Consulate Post)		Date of Issuance of Last NVV	Number of Last NVV	Classification of Last NVV
Under the following provision of law				
<input type="checkbox"/> Public Law 98-412 <input type="checkbox"/> Public Law 98-212 <input type="checkbox"/> Private Law No. _____ of the _____ Congress _____ Session				
<input type="checkbox"/> Sec. 208 (a) of the I & N Act <input type="checkbox"/> Sec. 208 (b) of the I & N Act <input type="checkbox"/> Sec. 244 (11) of the I & N Act <input type="checkbox"/> Sec. 245 of the I & N Act				
<input type="checkbox"/> Sec. 249 of the I & N Act <input type="checkbox"/> Sec. 1 of the Act of 11/2/68 <input type="checkbox"/> Sec. 13 of the Act of 8/11/67 <input type="checkbox"/> Sec. 214 (d) of the I & N Act				
<input type="checkbox"/> Other law (Specify) _____				
As of _____ at _____ <small>(Month) (Day) (Year)</small>				
Class of admission (Insert Symbol) _____ POINT OF ENTRY FOR PERMANENT RESIDENCE				
REMARKS				
RECOMMENDED BY (Insert Office) _____		DATE OF ACTION		
		DD		
		DISTRICT		
FOR USE BY VISA CONTROL OFFICE				
Date _____				
Foreign State _____				
Preference Category _____				
Number _____				
Month of issuance _____				
Signed _____ <small>(Type Office, Dept. of Issue)</small>				

CC: Page 2 Master Index copy sent on _____
CC: Page 3 ADIT and Statistical report copy sent on _____

Form I - 187 (Rev. 3-1-63)H

3. FOR ADIT AND STATISTICAL REPORTS
17- (A7-17)

APPELLIDO (PATERNO) APPELLIDO (MATRNO) AIRE DE PELA OTROS NOMBRES (NICK NAME)

FECHA DE NACIMIENTO (MM-DD-YY) SEXO DE NACIMIENTO FIEL (SI)

CATEGORIA

NUMEROS DE PASAPORTE (SI SE TIENE) FECHA DE EXPIRACION DE PASAPORTE (SI SE TIENE)

REQUISITOS O DEMAS PARTICULARES

DE LEER LAS CONDICIONES Y LA INFORMACION SOBRE EL DERECHO Y OBLIGACIONES QUE SE DEBE CUMPLIR EN CONFORMIDAD A LAS LEYES Y REGLAMENTOS Y QUE CUMPLAN CON LAS OBLIGACIONES DE DE ENTRADA A LOS ESTADOS UNIDOS DE AMERICA.

FIRMA DEL SOLICITANTE

APPLICANT INTERVIEWED AND APPLICATION

SIGNATURE INTERVIEWER OFFICER

NUMBER RECEIVED BY ME ON AT

APPLICATION GRANTED DENIED

United States Department of Justice
Immigration and Naturalization Service

FORM I-190 (REV. 9-1-75) 2

Form I-190

A7-

A7-18

ADVERTENCIA DE ANTE

ESTA SOLICITUD ES PARA UNA TARJETA PARA OBTENER LA FOTOCOPIA Y FACILITAR SU ENTRADA
LOS PASAJES DEBEN SER VERIFICADOS PARA VERIFICAR SI SE TRATA DE LA TARJETA
Y LE DA ENTREGA A TRAVES DE UN PUNTO DE ENTREGA EN LOS ESTADOS UNIDOS SI SEHA PUL-
SADO EN EL CASO DE QUE SE TRATE DE UN PASAJE A ALGUN PAIS DE LOS ESTADOS UNIDOS
QUE SE LE ENLACE DE LA FOTOCOPIA CON SU PASAJE. ESTO SE HA HECHO PARA
MANTENER LA OBTENCION DE LA FOTOCOPIA EN UN PUNTO DE ENTREGA POR UN FUNCIONARIO DEL
GOBIERNO DE LOS ESTADOS UNIDOS.

FOTOGRAFIA

VERIFICAR CON ESTA SOLICITUD
UNA FOTOGRAFIA 1 1/2 X 1 1/4
RELANDA TOMADA DE FRENTE,
PAPEL DELGADO CON FONDO
BLANCO.

OPORTUNIDAD DE ENTREGA AL
PUNTO DE ENTREGA DE LA
FOTOCOPIA EN EL CASO

EN CASO DE QUE SEAN NECESARIOS EN QUE SE ENVIEN DATOS POR
INTERMEDIOS DE LOS QUE SE ENVIEN DATOS EN FORMA DE
FOTOCOPIA UNA TARJETA PARA OBTENER LA FOTOCOPIA A LA PER-
SONA QUE FUERTE DE UNA FOTOCOPIA ENTREGADA CONTI-
NUA. EN CASO LA FOTOCOPIA O QUE UNA FOTOCOPIA DE
UNA FOTOCOPIA CONTIENE DATOS O QUE UNA FOTOCOPIA AL
MOMENTO O QUE SEA ENTREGADA EN FORMA O QUE SEA
UNA FOTOCOPIA ENTREGADA, ENLACE LA FOTOCOPIA DE IN-
FORMACION SOBRE LOS DATOS DE LA FOTOCOPIA O QUE
SEA O QUE SEA ENTREGADA EN FORMA CONTIENE O DE
CUALQUIER DATOS QUE SEAN AL MOMENTO O QUE PARA
UNA FOTOCOPIA DE LOS DATOS QUE SE ENVIEN EN
FORMA QUE SEAN EN LOS ESTADOS UNIDOS EN OBTI-
NER PUNTO DE ENTREGA. ESTARA SUJETA A ENTREGA FINAL.

SI "CUALQUIERA" DE LOS DATOS QUE SE ENVIEN
A NIVEL DE LA FOTOCOPIA DE ENTREGA AL
PUNTO DE ENTREGA CON ESTA SOLICITUD DE ENTREGA.

Feb. 2. 190

A7.

A7-19

ADVERTENCIA IMPORTANTE

A TARJETA TEMPORAL PARA CRUZAR LA FRONTERA SE EMITE CON EL OBJETO DE
LIMITAR LA ENTRADA A LOS ESTADOS UNIDOS COMO VISITANTE PARA FINES DE
COMERCIOS O DE RECREO. LA TARJETA NO LE DA DERECHO A RESIDIR O ACEPTAR
LEO EN LOS ESTADOS UNIDOS. SI DESEA PERMANECER EN EL PAIS MÁS DE 72
HRS O VIAJAR A ALGUN LUGAR DE LOS ESTADOS UNIDOS A MÁS DE 25 MILLAS DE
FRONTERA CON MEXICO, USTED DEBE TENER CONSIGO FORMA IMPRESA I-94 (FORM
A O FORMA SW-434 (FORM SW-434). EXPEDIDA POR UN FUNCIONARIO DEL SER-
VICIO DE INMIGRACION DE LOS ESTADOS UNIDOS.

Form I-190

A7

A7-20

(See instructions on reverse. Please typewrite or print plainly in ink)

FEE STAMP

Alien Registration No.

Date

I hereby apply for permission to return to the United States under the authority contained in Section 212(c) of the Immigration and Nationality Act.

TY NAME IS: (First) (Middle) (Last)

DATE OF BIRTH: (Month, day, year) PLACE OF BIRTH: (City, province, country) I AM A CITIZEN OF: (Country)

PRESENT ADDRESS: (Street and number, apt. no., city, state, country)

8) I was lawfully admitted to the United States for permanent residence at:

PORT: DATE: (Month, day, year) NAME OF VESSEL OR OTHER MEANS OF CONVEYANCE:

9) Since that admission I have departed from and reentered the United States as follows:

DEPARTED FROM THE UNITED STATES			RETURNED TO THE UNITED STATES			PURPOSE OF TRIP
Port	Date (Month, day, year)	Vessel or Other Means of Conveyance	Port	Date (Month, day, year)	Vessel or Other Means of Conveyance	

1) During the past 7 years I have resided at the following places: (List present address first)

(Complete Address - include Apt. No.)

(Complete Address - include Apt. No.)	From -	To -
		19 Present time
		19 19
		19 19
		19 19
		19 19

2) During the past 7 years I have been employed as follows: (List present employment first)

From -	To -	Employer's Name	Address	Occupation or Type of Business
19	19			
19	19			
19	19			
19	19			

3) My immediate family consists of the following persons:

Name	Relation	Date and Country of Birth	Citizen of	Present Address

7) I (Intend to or have) depart(ed) temporarily from the United States on or about (Date) and will remain (Country) approximately (Length of Time) for the purpose of (Part); and expect to apply for admission at (Part)

47-21

RECEIVED	TRANS. IN	RET'D-TRANS. OUT	COMPLETED
			120

3) I believe I may be inadmissible to the United States for the following reasons:

I understand that the information herein contained may be used in any criminal or civil proceedings, including deportation or exclusion, hereafter instituted against me.
I certify that the statements above are true and correct to the best of my knowledge and belief.

(Signature of Applicant)

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

(Signature)

(Address)

(Date)

Decision:

Application granted upon the following terms and conditions:

DATE
OF
ACTION
DD
DISTRICT

INSTRUCTIONS TO THE APPLICANT
READ INSTRUCTIONS CAREFULLY - FEE WILL NOT BE REFUNDED

- A) This form when completely executed, should be submitted to the District Director of the Immigration office having jurisdiction over your place of permanent residence.
- B) A fee of ~~eleven dollars~~ must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasury, Guam." If Applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.
- C) If the space provided in the form is insufficient to answer a question fully, you should attach a sheet of paper containing your answer which should be numbered to correspond with the question.
- D) In Part (3) where absences have been numerous as a resident alien border crosser or as a seaman it will be sufficient to give the approximate number of such absences and the years covered thereby.
- E) List specifically and in detail your reasons for possible inadmissibility. For example, if application is made because the applicant may be inadmissible due to conviction of crime, the designation of the crime, the date and place of its commission and of conviction thereof, and the sentence or other judgment of the court shall be stated in the application. In the case of disease, mental or physical defect or other disability, give exact description, duration thereof and date and place last treated.
- F) If applicant is mentally incompetent or is under 14 years of age, the application shall be executed by his parent or guardian.

The authority for collection of the information requested on this form is contained in 8 U.S.C. 1103(a). Submission of the information is voluntary. The principal purpose for which the information is collected is for use by a District Director of the Immigration and Naturalization Service to determine whether the applicant is eligible for advance permission to return to an unrequited domicile pursuant to the provisions of section 212(e) of the Immigration and Nationality Act, 8 U.S.C. 1182(e). The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof (if the applicant has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol, and individuals and organizations, during the course of investigation to elicit further information required by the Service to carry out its functions. Failure to provide any or all of the solicited information may result in the denial of the application.

Form I-191

47-22

Fee Stamp

(Please read instructions on reverse)

I hereby apply to the Attorney General for permission to enter the United States temporarily under the provisions of section 12(d)(3) of the Immigration and Nationality Act. File No. _____

1. FULL NAME (Print)		2. DATE OF BIRTH	
3. PLACE OF BIRTH (City-Town, State/Province, Country)		4. PRESENT CITIZENSHIP	
5. PRESENT ADDRESS			
6. DURING THE PAST FIVE YEARS I HAVE REMOVED AT THE FOLLOWING PLACES:			
7. PREFERRED PORT OF ENTRY INTO U.S.		8. MEANS OF TRANSPORTATION	
9. PROPOSED DATE OF ENTRY		10. APPROXIMATE LENGTH OF STAY IN THE UNITED STATES:	
11. MY PURPOSE FOR ENTERING THE UNITED STATES IS: (Explain fully)			
12. I BELIEVE I MAY BE INADMISSIBLE TO THE UNITED STATES FOR THE FOLLOWING REASONS AND NO OTHERS:			
13. I <input type="checkbox"/> have <input type="checkbox"/> have not heretofore filed an application for advance permission to enter as a nonimmigrant, on _____, 19____, at _____.			
14. I understand that the information herein furnished may be used in any proceedings (including civil or criminal judicial proceedings, or deportation or exclusion proceedings) heretofore instituted against me. I certify that the statements above and all attachments hereto are true and correct to the best of my knowledge and belief.			
_____ (Signature of Applicant)		_____ (Date)	
SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN APPLICANT			
I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.			
_____ (Signature)		_____ (Address)	
_____ (Date)		_____ (Date)	

A7-23

122

ACTION BY IMMIGRATION AND NATURALIZATION SERVICE

granted, subject to revocation at any time, upon the following terms and conditions:

DATE OF ACTION
DD OR OIC
OFFICE

INSTRUCTIONS

1. This application must be executed in duplicate and filed with the district director having jurisdiction over the port of entry.
2. A fee of eighty-five dollars (\$85) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.
3. If application is made because applicant may be inadmissible due to present or past membership in or affiliation with any Communist or other totalitarian party or organization, there shall be attached to the application a written statement of the history of applicant's membership or affiliation including the period of such membership or affiliation, whether applicant held any office in the organization, and whether membership or affiliation was voluntary or involuntary. If involuntary membership or affiliation is alleged, there shall also be attached to the application a written statement to support said allegation.
4. If application is made because applicant may be inadmissible due to disease, mental or physical defect or disability of any kind, the application shall describe the disease, defect or disability. If the purpose of seeking admission to the United States is for treatment, there shall be attached to the application statements in writing to establish -
 - (a) that satisfactory treatment cannot be obtained outside the United States,
 - (b) that arrangements have been completed for treatment, and where and from whom treatment will be received,
 - (c) what financial arrangements for payment of expenses incurred in connection with the treatment have been made, and
 - (d) that a bond will be available if required by the Attorney General.
5. If application is made because applicant may be inadmissible due to conviction of crime, the designation of the crime, the date and place of its commission and of the conviction thereof, and the sentence or other judgment of the court shall be stated in the application. In such case the application should be supplemented by official record of conviction, and any other documents relating to commutation of sentence, parole, probation, or pardon.

Form I-192

47-24

193

INSTRUCTIONS

FEE:

A fee of fifty dollars (\$50) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam". If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". All other applicants must make the check or money order payable to the "Immigration and Naturalization Service". When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$70 will be imposed if a check in payment of a fee is not cashed by the bank on which it is drawn.

Authority:

The authority for collection of the information requested on this form is contained in 8 USC 1102. Submission of the information is voluntary. The collected information will be used principally by the Service to determine whether the applicant is eligible for entry into the United States under the provisions of Section 211, 212, 214, 235, and 251 of the Immigration and Nationality Act. The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies. The Department of Defense including any component thereof (if the applicant has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol and individuals and organizations, during the course of investigation to elicit further information required by this Service to carry out its functions. Failure to provide any or all of the solicited information may result in the denial of the application.

Reporting Burden:

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Justice, Immigration and Naturalization Service (Room 2011), Washington, D.C. 20536; and to the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0042, Washington, D.C. 20503.

(See Instructions on Reverse)

FEE STAMP

FILE NO.

1. MY NAME IS: (Last) _____ (First) _____ (Middle) _____

2. MY UNITED STATES ADDRESS IS: (Apt. No.) _____ (Number and Street) _____ (City) _____ (State) _____ (ZIP Code) _____

3. MY PERMANENT ADDRESS ABROAD IS: _____

4. THE COUNTRY OF WHICH I AM A CITIZEN, SUBJECT OR NATIONAL IS: _____

5. PLACE OF BIRTH: _____ DATE OF BIRTH _____

6. DATE OF ARRIVAL: _____ PORT OF ARRIVAL _____

7. MANNER OF ARRIVAL: (Name of Vessel, Airline, etc.) _____

8. PLACE PASSPORT PREVIOUSLY ISSUED: _____ DATE: _____ CLASSIFICATION: _____ VALID TO: _____

9. PLACE PASSPORT ISSUED: _____ DATE: _____ VALID TO: _____

10. THE REASON I AM NOT IN POSSESSION OF PASSPORT VISA IS AS FOLLOWS:
(CONTINUE ON REVERSE, IF NECESSARY)

DATE OF THIS APPLICATION _____ CITY AND STATE _____

I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT.

(Signature of Applicant)

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

(Signature)

(Address)

(Date)

APPLICANT NOT TO WRITE BELOW THIS LINE

Application approved. Waiver granted

Under Section 211(b)
by authority of _____ (INS)

Under Section 212(d) (4)
by authority of _____ (INS)
with concurrence of _____ (INS)

Admitted as Form I-193 (State Department) until _____

Application disapproved.

DATE OF ACTION

DD OR OIC OFFICE

Application for Permission to Reapply
 for Admission Into the United States
 After Deportation or Removal

(To be filed in duplicate)

Read Instructions on Reverse

Date _____

Fee Stamp

I request permission to reapply for admission into the United States.

1. Name (Last) (First) (Middle)	2. File numbers on correspondence from U.S. Immigration Service (if known)
3. Name used when last deported or removed from the U.S.	4. Date of Birth
5. Other names used or known by	6. Place of Birth (city or town; state or province; and country)
7. Circumstances under which deported or removed from the United States (check applicable blocks) <input type="checkbox"/> Excluded and deported (less than one year ago) <input type="checkbox"/> Arrested and deported (less than five years ago) <input type="checkbox"/> Removed after having fallen into distress (less than five years ago) <input type="checkbox"/> Removed as alien enemy (less than five years ago) <input type="checkbox"/> Removed at U.S. Government expense in lieu of deportation (less than five years ago)	8. Length of residence in the United States (years)
	9. Place of residence at time of deportation or removal from United States (city and state)
11. Country to which deported or removed	10. Place Deportation Hearing held or application for removal made (city)
12. Date of deportation or removal from United States	12. Detention facility or jail where detained (city and state) (if not detained, write "None")
13. Status desired if permitted to re-enter United States <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Visitor <input type="checkbox"/> Student <input type="checkbox"/> Other (specify)	14. Port of Departure from United States
15. Location of American Consulate where application for visa will be made (city and country)	16. Reasons for desiring to re-enter the United States
17. Signature of Applicant	18. Name and relationship of United States citizen or lawful resident alien spouse, parent or children, if any
19. Street and number; city or town; state or province; and country of present residence	

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

21. I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

(Signature)

(Address)

(Date)

THIS SPACE FOR USE OF IMMIGRATION OFFICER

Decision

Date of Action

DD
 or
 OIC
 Office

A7-27

INSTRUCTIONS

Submit application in duplicate.

A. Persons who are permitted to reapply for admission without filing this application.

1. Persons who were excluded from admission and deported more than one year ago.
2. Persons who voluntarily departed from the United States without expense to the United States Government and without an order of deportation having been entered.
3. Persons who have been outside the United States for five successive years following their last deportation or removal.

B. Where to submit application.

1. If you are abroad and intend to apply for an immigrant visa, submit the application to the District Director of the Immigration and Naturalization Service of the district in which your deportation proceedings were held, unless you are concurrently applying for a waiver of grounds of excludability under Section 212 (g), (h), or (i) of the Immigration and Nationality Act, as amended. In the latter event, this application should be filed with the American Consul with whom you are filing your application for a waiver of the grounds of excludability. If you are abroad and intend to apply to an American Consul for a nonimmigrant visa or a border crossing card, this application should be filed with the American consul with whom you are also filing your application for nonimmigrant visa or border crossing card, if requested to do so by the Consul.
2. If you are at a port of entry applying for admission into the United States, submit the application to the District Director of the Immigration and Naturalization Service having jurisdiction over that port;
3. If you are in the United States and will file an application for waiver under Section 212 (g), (h), or (i) of the Immigration and Nationality Act with an American consul you should file this application and the application for the waiver simultaneously with the American consul. If you are in the United States and are applying for adjustment of your status under Section 245 of the Act, or are seeking to be granted advance permission to reapply prior to your departure from the United States, submit the application to the District Director of the Immigration and Naturalization Service having jurisdiction over the place where you are residing.

C. What must accompany your application.

1. Attach all Correspondence that you have in your possession relating to your deportation.
2. If you have listed any relative under Item 18 on the front, you must submit documentary evidence of your relationship to such person. In addition, if such person is a U.S. citizen, you must submit proof. If he/she is not a U.S. citizen, you must furnish such person's full name, date and place of birth and place of admission to the United States, and his/her Alien Registration number, if known.

3. If you wish, you may attach a statement giving the facts you believe the Immigration and Naturalization Service should consider in making a decision on your application, and you may attach any evidence in support of your statement.
4. Fee: A fee of ninety dollars (\$90) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If you reside in Guam, check or money order must be payable to the "Treasurer, Guam". If you reside in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". All other applicants must make the check or money order payable to the "Immigration and Naturalization Service". When check is drawn on account of a person other than yourself, your name must be entered on the face of the check. If application is submitted from outside of the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

D. Authority: We request the information on this form to carry out the immigration laws contained in Title 8, United States Code 1304(e). We need this information to determine whether a person is eligible for immigration benefits. The information you provide may also be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies during the course of the investigation required by this Service. You do not have to give this information. However, if you refuse to give some or all of it, your application may be denied.

E. Reporting Burden: Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Justice, Immigration and Naturalization Service (Room 5304), Washington, D.C. 20536; and to the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0099, Washington, D.C. 20503.

A7-23

Important: See instructions on other side.

Fee Stamp

In the Matter of: _____

File Number: _____

1. I am filing an appeal from the decision dated:

2. Please check the one block which applies:

I am not submitting a separate brief or evidence.

I am submitting a separate brief and/or evidence with this form.

I am sending a brief and/or evidence to the AAU within 30 days

I need _____ days to submit a brief and/or evidence to the AAU. *(May be granted only for good cause shown. Explain in a separate letter.)*

Person Filing Appeal

SIGNATURE _____

Name _____

Address _____
Number Street

City _____ State _____ ZIP Code _____

Date _____

I am an attorney or representative, and I represent:

Person and/or organization for whom you are appearing

You must attach a Notice of Entry of Appearance (Form G-28) if you are an attorney or representative and did not submit such a form before.

3. Briefly, state the reason(s) for this appeal:

A7-29

A7-

INSTRUCTIONS

1. **Filing.** You must file your appeal with the Immigration and Naturalization Service (INS) office which made the unfavorable decision within 30 calendar days after service of the decision (33 days if your decision was mailed). The date of service is normally the date of the decision. Do not send your appeal directly to the Administrative Appeals Unit (AAU). Submit an original appeal only. Additional copies are not required.
2. **Fee.** You must pay \$110.00 to file this form. (You only need to pay one fee of \$110.00 if two or more aliens are covered by the unfavorable decision.) The fee will not be refunded, regardless of the action taken in your case. **DO NOT MAIL CASH.** All checks or money orders, whether U.S. or foreign, must be payable in U.S. currency at a financial institution in the United States. When a check is drawn on the account of a person other than yourself, write your name on the face of the check. If the check is not honored, INS will charge you \$5.00.

Pay by check or money order in the exact amount. Make the check or money order payable to "Immigration and Naturalization Service." However,
 - A. if you live in Guam, make the check or money order payable to "Treasurer, Guam," or
 - B. if you live in the U.S. Virgin Islands, make the check or money order payable to "Commissioner of Finance of the Virgin Islands."
3. **Attorney or Representative.** You may, if you wish, be represented, at no expense to the government, by an attorney or other duly authorized representative. Notice of Entry of Appearance (Form G-28) that your attorney or representative must submit with this notice is available at INS offices.
4. **Brief.** You do not need to submit a brief in support of your appeal, but you may submit one. Or you may submit a simple written statement instead. You may also submit evidence.

You may submit a brief, statement, and/or evidence with this form. Or you may send these materials to the AAU within 30 days of the date you sign this form. You must send any materials you submit after filing the appeal to:

Administrative Appeals Unit
Immigration and Naturalization Service
425 Eye Street, N.W.
Washington, D.C. 20536

If you need more than 30 days, you must explain why in a separate letter attached to this form. The AAU may grant more time only for good cause.
5. **Oral Argument.** You may ask for oral argument before the AAU in Washington, D.C., in a separate letter attached to this form. The letter must explain specifically why oral argument is necessary.

If your request is granted, the AAU will write to you about setting the date and time. Oral argument is normally limited to fifteen minutes. The government does not furnish interpreters for oral argument.
6. **Visa Petition Beneficiary.** If you are the beneficiary of a visa petition or the beneficiary's attorney or representative you may not file an appeal on this form. When a decision on a petition may be appealed, the petitioner, an authorized official of a petitioning corporation, or the petitioner's attorney or representative must sign this form. (The only exceptions are the beneficiaries of third preference and Public Law 97-359 Amerasian petitions. These beneficiaries may file appeals on this form.)

STATE: _____

Married petitioner Unmarried petitioner

The petition is approved for orphan:

Adopted abroad Coming to U.S. for adoption.
Pre-adoption requirements have been met.

Remarks:

File number

DATE OF ACTION

DD

DISTRICT

Please type or print legibly in ink. Use a separate petition for each child.

Petition is being made to classify the named orphan as an immediate relative.

BLOCK I - Information About Prospective Petitioner

1. My name is: (Last) (First) (Middle)

2. Other names used (including maiden name if appropriate):

3. I reside in the U.S. at: (C/O if appropriate) (Apt. No.)
(Number and street) (Town or city) (State) (ZIP Code)

4. Address abroad (if any): (Number and street) (Apt. No.)
(Town or city) (Province) (Country)

5. I was born on: (Month) (Day) (Year)
in: (Town or City) (State or Province) (Country)

6. My phone number is: (include Area Code)

7. My marital status is:
 Married
 Widowed
 Divorced
 Single
 I have never been married.
 I have been previously married _____ time(s).

8. If you are now married, give the following information:
Date and place of present marriage
Name of present spouse (include maiden name of wife)
Date of birth of spouse Place of birth of spouse
Number of prior marriages of spouse
My spouse resides With me Apart from me
(provide address below)
(Apt. No.) (No. and street) (City) (State) (Country)

9. I am a citizen of the United States through:
 Birth Parents Naturalization Marriage
If acquired through naturalization, give name under which naturalized, number of naturalization certificate, and date and place of naturalization:

If not, submit evidence of citizenship. See instruction 2.a(2).
If acquired through parentage or marriage, have you obtained a certificate in your own name based on that acquisition?
 No Yes
Have you or any person through whom you claimed citizenship ever lost United States citizenship?
 No Yes (If yes, attach detailed explanation.)

Continue on reverse.

Received	Trans. In	Ret'd Trans. Out	Completed

Application for Adoption of an Orphan

1. Name of prospective petitioner _____

2. Name of prospective petitioner's spouse _____

3. Date of birth (Year) _____

4. Sex Male Female

5. Place of birth (City) (State or Province) (Country) _____

6. The beneficiary is an orphan because (check one):
 He/she has no parents.
 He/she has only one parent who is the sole or surviving parent.

7. If the orphan has only one parent, answer the following:
a. State what has become of the other parent: _____
b. Is the remaining parent capable of providing for the orphan's support? Yes No
c. Has the remaining parent, in writing, irrevocably released the orphan for emigration and adoption? Yes No

8. Has the orphan been adopted abroad by the petitioner and spouse jointly or the unmarried petitioner? Yes No
 If yes, did the petitioner and spouse or unmarried petitioner personally see and observe the child prior to or during the adoption proceedings? Yes No
 Date of adoption _____
 Place of adoption _____

9. If either answer in question 8 is "No", answer the following:
a. Do petitioner and spouse jointly or does the unmarried petitioner intend to adopt the orphan in the United States? Yes No
b. Have the preadoption requirements, if any, of the orphan's proposed state of residence been met? Yes No
c. If b. is answered "No", will they be met later? Yes No

10. To petitioner's knowledge, does the orphan have any physical or mental affliction? Yes No
 If "Yes", state the affliction: _____

11. Who has legal custody of the child? _____

12. Name of child welfare agency, if any, assisting in this case: _____

13. Name of attorney abroad, if any, representing petitioner in this case: _____
 Address of above: _____

14. Address in the United States where orphan will reside: _____

15. Present address of orphan: _____

16. If orphan is residing in an institution, give full name of institution: _____

17. If orphan is not residing in an institution, give full name of person with whom orphan is residing: _____

18. Give any additional information necessary to locate orphan such as name of district, sector, zone or locality in which orphan resides:

19. Location of American Consulate where application for visa will be made:
 (City in Foreign Country) _____ (Foreign Country) _____

Certification of Prospective Petitioner
 I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct and that I will care for an orphan/orphans properly if admitted to the United States.
 (Signature of Prospective Petitioner) _____
 Executed on (Date) _____

Certification of Married Prospective Petitioner's Spouse
 I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct and that my spouse and I will care for an orphan/orphans properly if admitted to the United States.
 (Signature of Prospective Petitioner) _____
 Executed on (Date) _____

Signature of Person Preparing Form if Other Than Petitioner
 I declare that this document was prepared by me at the request of the prospective petitioner and is based on all information of which I have any knowledge.
 (Signature) _____
 Address _____
 Executed on (Date) _____

Form I-600

47-32

A7-

...of any prior marriages through a separate proceeding and a separate certificate of citizenship issued on or after the date of the filing of the petition.

...of any prior marriages through a separate proceeding and a separate certificate of citizenship issued on or after the date of the filing of the petition.

(3) If petitioner's naturalization occurred within 90 days immediately preceding the filing of this petition, or if it occurred prior to September 27, 1950, the naturalization certificate must accompany the petition.

An unexpired U.S. passport valid for five years may also be submitted.

- b. **Parent(s).** The petition may be filed by a married United States citizen and spouse or unmarried United States citizen at least twenty-five years of age. The spouse does not need to be a United States citizen.
 - c. **Adoption abroad.** If the orphan was adopted abroad, it must be established that both the married petitioner and spouse or the unmarried petitioner personally saw and observed the child prior to or during the adoption proceedings. The adoption decree must show that a married petitioner and spouse adopted the child jointly or that an unmarried petitioner was at least twenty-five years of age at the time of the adoption.
 - d. **Proxy adoption abroad.** If both the petitioner and spouse or the unmarried petitioner did not personally see and observe the child prior to or during the adoption proceedings abroad, the petitioner (and spouse, if married) must submit a statement indicating the petitioner's (and, if married, the spouse's) willingness and intent to readopt the child in the United States. If requested, the petitioner must submit a statement by an official of the state in which the child will reside that readoption is permissible in that state. In addition, evidence of compliance with the preadoption requirements, if any, of that state must be submitted.
 - e. **Preadoption requirements.** If the orphan has not been adopted abroad, the petitioner and spouse or the unmarried petitioner must establish that the child will be adopted in the United States by the petitioner and spouse jointly or by the unmarried petitioner and that the preadoption requirements, if any, of the state of the orphan's proposed residence have been met.
2. **Filing petition for known child.** An orphan petition for a child who has been identified must be submitted on a completed Form I-800 with the certification of petitioner executed and the required fee. If the petitioner is married, the Form I-800 must also be signed by the petitioner's spouse. The petition must be accompanied by the following:
- a. **Proof of United States citizenship of the petitioner.**
 - (1) If the petitioner is a citizen by reason of birth in the United States, submit the petitioner's birth certificate, or if birth certificate is unobtainable, a copy of petitioner's baptismal certificate under seal of the church, showing place of birth, (baptism must have occurred within 2 months after birth), or if birth or baptismal certificate cannot be obtained, affidavits of two United States citizens who have personal knowledge of petitioner's birth in the United States.
 - (2) If the petitioner was born outside the United States and became a citizen through the naturalization or citizenship of a parent or husband and has not been issued a certificate of citizenship in his/her

- b. **Proof of marriage of petitioner and spouse.** The married petitioner should submit a certificate of the marriage and proof of termination of all prior marriages of himself/herself and spouse. In the case of an unmarried petitioner who was previously married, submit proof of termination of all prior marriages. NOTE: If any change occurs in the petitioner's marital status while the case is pending, the District Director should be notified immediately.
- c. **Proof of age of orphan.** Petitioner should submit certificate of orphan's birth if obtainable; if not obtainable, submit an explanation together with the best available evidence of birth.
- d. **Death certificate(s) of the child's parent(s),** if applicable.
- e. **A certified copy of adoption decree** together with certified translation, if the orphan has been lawfully adopted abroad.
- f. **Evidence that the sole or surviving parent is incapable of providing for the orphan's care and has in writing irrevocably released the orphan for emigration and adoption,** if the orphan has only one parent.
- g. **Evidence that the orphan has been unconditionally abandoned to an orphanage,** if the orphan has been placed in an orphanage by his/her parent or parents.
- h. **Evidence that the preadoption requirements, if any, of the state of the orphan's proposed residence have been met, if the child is to be adopted in the United States.** If it is not possible to submit this evidence upon initial filing of the petition under the laws of the state of proposed residence, it may be submitted later. The petition, however, will not be approved without it.
- i. **A home study with a statement or attachment recommending or approving of the adoption or proposed adoption signed by an official of the responsible state agency in the state of the child's proposed residence or of an agency authorized by that state, or, in the case of a child adopted abroad, of an appropriate public or private adoption agency which is licensed in the United States.** Both individuals and organizations may qualify as agencies. If the recommending agency is a licensed agency, the recommendation must set forth that it is licensed, the state in which it is licensed, its license number, if any, and the period of validity of its license. The research, including interviewing, however, and the preparation of the home study may be done by an individual or group in the United States or abroad satisfactory to the recommending agency. A responsible state agency or licensed agency can accept a home study made by an unlicensed or foreign agency and use that home study as a basis for a favorable recommendation. The home study must contain, but is not limited to, the following elements:

A7-33
17-

Completed application cards (Form FD-258) must be submitted by both the orphan petitioner and spouse or by the unaccompanied petitioner. The cards are available at any office of the Immigration and Naturalization Service. The applications may be recorded on Form FD-258 by Service employees, other law enforcement officers, Service outreach contacts, charitable and voluntary agencies, and any other reputable persons or organizations.

3. Filing petition for known child without full documentation on child or home study. When a child has been identified but the documentary evidence relating to him/her or the home study is not yet available, an orphan petition may be filed without that evidence or home study. The evidence outlined in instructions 2a, 2b, and 2c, however, must be submitted. If the necessary evidence relating to the child or the home study is not submitted within one year from the date of submission of the petition, the petition will be considered abandoned, and the fee will not be refunded. Any further proceeding will require the filing of a new petition.
4. Submitting an application for advance processing of an orphan petition in behalf of a child who has not been identified. A prospective petitioner may request advance processing when the child has not been identified or when the prospective petitioner and/or spouse are/is going abroad to locate or adopt a child. If unmarried, the prospective petitioner must be at least twenty-four years of age provided that he/she will be at least twenty-five at the time of the adoption and the completed petition in behalf of a child is filed. The request must be on Form I-600A, Application for Advance Processing of Orphan Petition, and must be accompanied by the evidence required by that form. After a child or children are located and/or identified, a separate Form I-600, Petition to Classify Orphan as an Immediate Relative, must be filed for each child. A new fee is not required if only one Form I-600 is filed, if it is filed within one year of completion of all advance processing in a case where there has been a favorable determination concerning the prospective petitioner's ability to care for a beneficiary orphan. Normally, Form I-600 should be submitted to the office of this Service where the advance processing application was filed. A prospective petitioner who is going abroad to adopt or locate a child in a country other than Austria, Germany, Greece, Italy, Korea, the Philippines, Hong Kong, Mexico, Singapore, Uruguay, or Thailand, however, should file Form I-600 at the American consulate or embassy having jurisdiction over the place where the child is residing or will be located unless the case is being retained at the state/ide office. A prospective petitioner who is going abroad to adopt or locate a child in Austria, Germany, Greece, Italy, Korea, the Philippines, Singapore, Hong Kong, Mexico, Uruguay, or Thailand should file Form I-600 at the Service office having jurisdiction over the place where the child is residing or will be located unless the case is being retained at the state/ide office. The case may be retained at the state/ide office if the petitioner requests that it and it appears that the case will be processed more quickly that way.

5. Documents in General. All supporting documents must be originals or official copies of the original records issued by and bearing the seals of the official custodians of the records. If return of the originals is desired and if copies are by law permitted to be made, photostatic or xeroxed copies may be submitted. A photostatic copy unaccompanied by the original may be accepted if the copy bears a certification by an Immigration or consular office that the copy was compared with the original and found to be identical. Any document in a foreign language must be accompanied by a translation in English. The translator must certify that he/she is competent to translate and that the translation is accurate. Do not make a photostat of a certificate of naturalization or citizenship.

Submission of petition. A petitioner residing in the United States should send his completed petition to the office of this Service having jurisdiction over his/her place of residence. A petitioner residing outside the United States should submit the completed American consular application card to the nearest American consulate.

The fee for filing a petition is one hundred dollars. It consists of a filing fee of fifty dollars and a processing fee of fifty dollars. The fee must be paid in cash or by check or money order payable in United States dollars to the "Immigration, Naturalization and Service Center, U.S. Department of Justice, Washington, D.C. 20535". If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". All other petitions must make the check or money order payable to the "Immigration and Naturalization Service". When a check is drawn on the account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collection. An uncollectible check will render the petition and any documents attached pursuant to it invalid. A charge of \$4.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. When more than one petition is submitted by the same petitioner in behalf of orphans who are brothers and/or sisters, only one fee will be required.

6. Assistance. Assistance may be obtained from a recognized social agency or from any public or private agency. The following recognized social agencies, which have offices in any of the principal cities of the United States, have agreed to furnish assistance:

- American Branch of International Social Services, Inc.
345 East 49th Street
New York, New York 10017
- Greek Archdiocese of North and South America
10 East 79th Street
New York, New York 10021
- United HAS Service, Inc.
200 Park Avenue South
New York, New York 10003
- Catholic Committee for Refugees
United States Catholic Conference
201 Park Avenue South
New York, New York 10003
- Church World Service, Inc.
475 Riverside Drive
New York, New York 10027

9. Penalties. Willful false statements on this form or supporting documents can be punished by fine or imprisonment. U.S. Code, Title 18, Sec. 1001 (Formerly Sec. 80.)
10. Authority. 8 U.S.C. 1154(j). Routine uses for disclosure under the Privacy Act of 1974 have been published in the Federal Register and are available upon request. The Immigration and Naturalization Service will use the information to determine immigrant eligibility. Submission of the information is voluntary, but failure to provide any or all of the information may result in denial of the petition.
11. Reporting Burden. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Justice, Immigration and Naturalization Service (Room 5304), Washington, D.C. 20535; and to the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0048, Washington, D.C. 20503.

Form I-600

Printed by the Government Printing Office

(A7-34) A7

U.S.G.P.O.: 1982 - 342-603/72378

Block I - Information About Prospective Petitioner

Married Unmarried
prospective petitioner will furnish proper care to a beneficiary orphan if admitted to the United States.

There are are not
preadoption requirements in the state of the child's
proposed residence.

The following is a description of the preadoption requirements,
if any, of the state of the child's proposed residence:

The preadoption requirements, if any,
 have been met. have not been met.

Fee Stamp

DATE OF FAVORABLE
DETERMINATION

DD

DISTRICT

File number of petitioner, if applicable

Please type or print legibly in ink.

Application is made by the named prospective petitioner for advance processing of an orphan petition.

<p>BLOCK I - Information About Prospective Petitioner</p> <p>1. My name is: (Last) (First) (Middle)</p> <hr/> <p>2. Other names used (including maiden name if appropriate):</p> <hr/> <p>3. I reside in the U.S. at: (C/O if appropriate) (Apt. No.) (Number and street) (Town or city) (State) (ZIP Code)</p> <hr/> <p>4. Address abroad (if any): (Number and street) (Apt. No.) (Town or city) (Province) (Country)</p> <hr/> <p>5. I was born on: (Month) (Day) (Year) in: (Town or City) (State or Province) (Country)</p> <hr/> <p>6. My phone number is: (Include Area Code)</p> <hr/> <p>7. My marital status is: <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> I have never been married. <input type="checkbox"/> I have been previously married _____ time(s).</p>	<p>8. If you are now married, give the following information:</p> <p>Date and place of present marriage</p> <hr/> <p>Name of present spouse (include maiden name of wife)</p> <hr/> <p>Date of birth of spouse Place of birth of spouse</p> <hr/> <p>Number of prior marriages of spouse</p> <hr/> <p>My spouse resides: <input type="checkbox"/> With me <input type="checkbox"/> Apart from me (provide address below)</p> <p>(Apt. No.) (No. and street) (City) (State) (Country)</p> <hr/> <p>9. I am a citizen of the United States through: <input type="checkbox"/> Birth <input type="checkbox"/> Parents <input type="checkbox"/> Naturalization <input type="checkbox"/> Marriage If acquired through naturalization, give name under which naturalized, number of naturalization certificates, and date and place of naturalization:</p> <hr/> <p>If not, submit evidence of citizenship. See instruction 2.B(2). If acquired through parentage or marriage, have you obtained a certificate in your own name based on that acquisition? <input type="checkbox"/> No <input type="checkbox"/> Yes Have you or any person through whom you claimed citizenship ever lost United States citizenship? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, attach detailed explanation.)</p>
--	--

Continue on reverse.

Received	Trans. In	Ret'd Trans. Out	Completed

A7-35
A7-

11. Do you intend to travel abroad to locate or adopt a child?
 Yes No

12. Does your spouse, if any, plan to travel abroad to locate or adopt a child?
 Yes No

13. If the answer to question 11 or 12 is "yes", give the following information:
 a. Your date of intended departure _____
 b. Your spouse's date of intended departure _____
 c. City, province _____

14. Will the child come to the United States for adoption after complying with the publication requirements, if any, of the state of _____?
 Yes No

15. If the answer to question 14 is "yes", will the child be adopted after having been personally seen and observed by you and your spouse, if married?
 Yes No

16. Where do you wish to file your adoption petition?
 The service office located at _____
 The American Consulate or Embassy at _____

17. Do you plan to adopt more than one child?
 Yes No
 If "Yes", how many children do you plan to adopt? _____

Certification of Prospective Petitioner
 I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct and that I will care for an orphan/orphans properly if admitted to the United States.
 (Signature of Prospective Petitioner) _____
 Executed on (Date) _____

Certification of Married Prospective Petitioner's Spouse
 I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct and that my spouse and I will care for an orphan/orphans properly if admitted to the United States.
 (Signature of Prospective Petitioner) _____
 Executed on (Date) _____

Signature of Person Preparing Form if Other Than Petitioner
 I declare that this document was prepared by me at the request of the prospective petitioner and is based on all information of which I have any knowledge.
 (Signature) _____
 Address _____
 Executed on (Date) _____

Form 7-600A

47-36

d. Fingerprints.

Completed fingerprint cards (Forms FD-258) must be submitted by both the married petitioner and spouse or by the unmarried petitioner. The cards are available at any office of the Immigration and Naturalization Service. The fingerprints may be recorded on Form FD-258 by Service employees, other law enforcement officers, Service outreach centers, charitable and voluntary agencies, and any other reputable persons or organizations.

3. Documents in General. All supporting documents must be originals or official copies of the original records issued by and bearing the seals of the official custodians of the records. If return of the originals is desired and if copies are by law permitted to be made, photostatic or typewritten copies may be submitted. A photostatic copy unaccompanied by the original may be accepted if the copy bears a certification by an immigration or consular office that the copy was compared with the original and found to be identical. Any document in a foreign language must be accompanied by a translation in English. The translator must certify that he/she is competent to translate and that the translation is accurate. Do not make a photostat of a certificate of naturalization or citizenship.

4. Submission of application. A prospective petitioner residing in the United States should send the completed application to the office of this Service having jurisdiction over his/her place of residence. A prospective petitioner residing outside the United States should consult the nearest American consulate for the overseas or stateside office of this Service designated to act on the application.

5. Fee. Read instructions carefully. A fee of one hundred forty dollars (\$140) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. Do not mail cash. All fees must be submitted in the exact amount. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam". If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service". When a check is drawn on the account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the petition and any document issued pursuant to it invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. When more than one petition is submitted by the same petitioner in behalf of orphans who are brothers and/or sisters, only one fee will be required.

Form I-600A

A7-37
A7

6. When Child/Children located and/or identified. A prospective petitioner must file Form I-600 at the American consulate or embassy having jurisdiction over the place where the child is residing or will be located unless the case is being retained at the stateside office. A prospective petitioner who is going abroad to adopt or locate a child in Austria, Germany, Greece, Italy, Korea, the Philippines, Hong Kong, Mexico, Singapore, Uruguay, or Thailand should file Form I-600 at the Service office having jurisdiction over the place where the child is residing or will be located unless the case is being retained at the stateside office. The case may be retained at the stateside office if the petitioner requests it and it appears that the case will be processed more quickly that way. Form I-600 must be accompanied by all the evidence required on the instruction sheet of that form except that the evidence required by and submitted with this form need not be furnished.

7. Assistance. Assistance may be obtained from a recognized social agency or from any public or private agency. The following recognized social agencies, which have offices in many of the principal cities of the United States, have agreed to furnish assistance:

American Branch of International Social Services, Inc.
345 East 46th Street
New York, New York 10017

Greek Archdiocese of North and South America
10 East 79th Street
New York, New York 10021

United HIAS Service, Inc.
200 Park Avenue South
New York, New York 10003

Catholic Committee for Refugees
United States Catholic Conference
201 Park Avenue South
New York, New York 10003

Church World Service, Inc.
478 Riverside Drive
New York, New York 10027

8. Penalties. Willful false statements on this form or supporting documents can be punished by fine or imprisonment. U.S. Code, Title 18, Sec. 1001 (Former: Sec. 80.)

9. Authority. 8 U.S.C. 1154(a). Routine uses for disclosure under the Privacy Act of 1974 have been published in the Federal Register and are available upon request. The Immigration and Naturalization Service will use the information to determine immigrant eligibility. Submission of the information is voluntary, but failure to provide any or all of the information may result in denial of the petition.

10. Reporting Burden. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: U.S. Department of Justice, Immigration and Naturalization Service (Room 5304), Washington, D.C. 20534; and to the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-00 Washington, D.C. 20503.

for Advance Processing



where an orphan is located
IDENTIFIED OR YOU

United States citizenship of the prospective

advance processing application Form I-800A. An application for advance processing may be filed by a married United States citizen or an unmarried United States citizen who does not need to be a United States citizen. It may also be filed by an unmarried United States citizen at least twenty-four years of age provided that he/she will be at least twenty-five at the time of the adoption and of filing an orphan petition in behalf of a child.

b. Eligibility for Orphan Petition (Form I-800). In addition to the requirements concerning the citizenship and age of the petitioner described in instruction 1a, when a child is located and identified, the following eligibility requirements will apply:

- (1) **Child.** Under immigration law, an orphan is an alien child who has no parents because of the death or disappearance of, abandonment or desertion by, or separation or loss from both parents. An orphan is also a child who has only one parent who is not capable of taking care of the orphan and has, in writing, irrevocably released the orphan for emigration and adoption. A petition to classify an alien as an orphan may not be filed in behalf of a child in the United States unless that child is in parole status and has not been adopted in the United States. The petition must be filed before the child's eighteenth birthday.
- (2) **Adoption abroad.** If the orphan was adopted abroad, it must be established that both the married petitioner and spouse or the unmarried petitioner personally saw and observed the child prior to or during the adoption proceedings. The adoption decree must show that a married petitioner and spouse adopted the child jointly or that an unmarried petitioner was at least twenty-five years of age at the time of the adoption.
- (3) **Proxy adoption abroad.** If both the petitioner and spouse or the unmarried petitioner did not personally see and observe the child prior to or during the adoption proceedings abroad, the petitioner (and spouse, if married) must submit a statement indicating the petitioner's (and, if married, the spouse's) willingness and intent to readopt the child in the United States. If requested, the petitioner must submit a statement by an official of the state in which the child will reside that readoption is permissible in that state. In addition, evidence of compliance with the preadoption requirements, if any, of that state must be submitted.
- (4) **Preadoption requirements.** If the orphan has not been adopted abroad, the petitioner and spouse or the unmarried petitioner must establish that the child will be adopted in the United States by the petitioner and spouse jointly or by the unmarried petitioner and that the preadoption requirement, if any, of the state of the orphan's proposed residence have been met.

2. Filing advance processing application. An advance processing application must be submitted on Form I-800A with the certification of prospective petitioner executed and the required fee. If the prospective petitioner is married, the Form I-800A must also be signed by the prospective petitioner's spouse. The application must be accompanied by:

- (1) If the petitioner is a citizen by reason of birth in the United States, present the petitioner's birth certificate, or if birth certificate is unavailable, a copy of petitioner's baptismal certificate under seal of the church, showing place of birth. Baptism must have occurred within 2 months after birth, or if birth or baptismal certificate cannot be obtained, affidavits of two United States citizens who have personal knowledge of petitioner's birth in the United States.
- (2) If the petitioner was born outside the United States and became a citizen through the naturalization or citizenship of a parent or husband and has not been issued a certificate of citizenship in his/her own name, submit evidence of the citizenship and marriage of the parent or husband, as well as termination of any prior marriages. Also, if petitioner claims citizenship through a parent, submit petitioner's birth certificate and a separate statement showing the date, place, and means of all his/her arrivals and departures into and out of the United States.
- (3) If petitioner's naturalization occurred within 90 days immediately preceding the filing of this petition, or if it occurred prior to September 27, 1990, the naturalization certificate must accompany the petition.

An unexpired U.S. passport valid for five years may also be submitted.

b. Proof of marriage of petitioner and spouse. The married petitioner should submit a certificate of the marriage and proof of termination of all prior marriages of himself and spouse. In the case of an unmarried petitioner who was previously married, submit proof of termination of all prior marriages. NOTE: If any change occurs in the petitioner's marital status while the case is pending, the District Director should be notified immediately.

c. A home study with a statement or attachment recommending or approving of the adoption or proposed adoption signed by an official of the responsible state agency in the state of the child's proposed residence or of an agency authorized by that state, or, in the case of a child adopted abroad, of an appropriate public or private adoption agency which is licensed in the United States. Both individuals and organizations may qualify as agencies. If the recommending agency is a licensed agency, the recommendation must set forth that it is licensed, the state in which it is licensed, its license number, if any, and the period of validity of its license. The research including interviewing, however, and the preparation of the home study may be done by an individual or group in the United States or abroad satisfactory to the recommending agency. A responsible state agency or licensed agency can accept a home study made by a nonlicensed or foreign agency and use that home study as a basis for a favorable recommendation. The home study must contain, but is not limited to, the following elements:

FORM I-800A 4/11/91 ✓

AT-58
AT

Please read instructions carefully. Fee will not be refunded.
Please type or print plainly with a ball point pen.

Filing the Application

The application and supporting documents should be taken or mailed to:

The American Consulate at which the applicant is applying for a visa, if the applicant is not in the United States; or

The office of the Immigration and Naturalization Service having jurisdiction over the applicant's place of residence, if the applicant is in the United States, and is applying for status as a permanent resident.

Fee

No fee is required if this application is filed for an alien who:

Is afflicted with tuberculosis;

Is mentally retarded; or

Has a history of mental illness.

All other applications must be accompanied by a fee of ninety dollars (\$90). The fee cannot be refunded, regardless of the action taken on the application. Do not mail cash.

Payment must be made by a check or money order:

Drawn on a bank or other institution located in the United States;

Payable in United States currency; and

Payable in the exact amount (\$90).

If the check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check.

Personal checks are accepted subject to collectibility. An uncollectible check will void the application and any documents issued pursuant to the application. A charge of \$5.00 will be imposed if the check is not honored by the bank on which it is drawn.

Unless the applicant resides in the Virgin Islands or Guam, the check or money order must be made payable to the "Immigration and Naturalization Service".

If the applicant resides in the Virgin Islands, make the check or money order payable to the "Commissioner of Finance of the Virgin Islands".

If the applicant resides in Guam, make the check or money order payable to the "Treasurer, Guam".

Applicants with Tuberculosis

An applicant with active tuberculosis or suspected tuberculosis must complete Statement A on page two of this form. The applicant and his or her sponsor is also responsible for having:

Statement B completed by the physician or health facility which has agreed to provide treatment or observation, and Statement D, if required, completed by the appropriate local or state health officer.

This form should then be returned to the applicant for presentation to the consular office, or to the appropriate office of the Immigration and Naturalization Service.

This form should then be returned to the applicant for presentation to the consular office, or to the appropriate office of the Immigration and Naturalization Service.

Submission of the application without the required, fully executed statements will result in the return of the application to the applicant without further action.

IV. Applicants with Mental Conditions

An alien who is mentally retarded or who has a history of mental illness shall attach a statement that arrangements have been made for the submission of a medical report, as follows, to the office where this form is filed:

The medical report shall contain:

A complete medical history of the alien, including details of any hospitalization or institutional care or treatment for any physical or mental condition;

Findings as to the current physical condition of the alien, including reports of chest X-rays and a serologic test if the alien is 15 years of age or older, and other pertinent diagnostic tests; and

Findings as to the current mental condition of the alien, with information as to prognosis and life expectancy and with a report of a psychiatric examination conducted by a psychiatrist who shall, in the case of mental retardation, also provide an evaluation of intelligence.

For an alien with a past history of mental illness, the medical report shall also contain available information on which the United States Public Health Service can base a finding as to whether the alien has been free of such mental illness for a period of time sufficient in the light of such history to demonstrate recovery.

The medical report will be referred to the United States Public Health Service for review and, if found acceptable, the alien will be required to submit such additional assurances as the United States Public Health Service may deem necessary in his or her particular case.

Reporting Burden. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U. S. Department of Justice, Immigration and Naturalization Service, Room 5304, Washington, D. C. 20536; and to the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0048, Washington, D. C. 20503.

51-601 (Rev. 6-4-11-61)Y

A7-39

DO NOT WRITE IN THIS BLOCK

- | | | |
|--------------------------------------|---------------------------------------|-----------|
| <input type="checkbox"/> 212 (a) (1) | <input type="checkbox"/> 212 (a) (10) | Fee Stamp |
| <input type="checkbox"/> 212 (a) (3) | <input type="checkbox"/> 212 (a) (12) | |
| <input type="checkbox"/> 212 (a) (6) | <input type="checkbox"/> 212 (a) (19) | |
| <input type="checkbox"/> 212 (a) (9) | <input type="checkbox"/> 212 (a) (23) | |

A. Information about applicant -

1. Family Name (Surname in CAPS) (First) (Middle)

2. Address (Number and Street) (Apartment Number)

3. (Town or City) (State/Country) (ZIP/Postal Code)

4. Date of Birth (Month/Day/Year) 5. I&NS File Number
 A-

6. City of Birth 7. Country of Birth

8. Date of visa application 9. Visa applied for at:

10. Applicant was declared inadmissible to the United States for the following reasons: (List acts, convictions, or physical or mental conditions. If applicant has active or suspected tuberculosis, the reverse of this page must be fully completed.)

11. Applicant was previously in the United States, as follows:

City & State	From (Date)	To (Date)	I&NS Status

12. Social Security Number

B. Information about relative, through whom applicant claims eligibility for a waiver -

1. Family Name (Surname in CAPS) (First) (Middle)

2. Address (Number and Street) (Apartment Number)

3. (Town or City) (State/Country) (ZIP/Postal Code)

4. Relationship to applicant 5. I&NS Status

C. Information about applicant's other relatives in the U.S. (List only U.S. citizens and permanent residents)

1. Family Name (Surname in CAPS) (First) (Middle)

2. Address (Number and Street) (Apartment Number)

3. (Town or City) (State/Country) (ZIP/Postal Code)

4. Relationship to applicant 5. I&NS Status

1. Family Name (Surname in CAPS) (First) (Middle)

2. Address (Number and Street) (Apartment Number)

3. (Town or City) (State/Country) (ZIP/Postal Code)

4. Relationship to applicant 5. I&NS Status

1. Family Name (Surname in CAPS) (First) (Middle)

2. Address (Number and Street) (Apartment Number)

3. (Town or City) (State/Country) (ZIP/Postal Code)

4. Relationship to applicant 5. I&NS Status

Signature (of applicant or petitioning relative)

Relationship to applicant Date

Signature (of person preparing application, if not the applicant or petitioning relative) I declare that this document was prepared by me at the request of the applicant, or petitioning relative, and is based on all information of which I have any knowledge.

Signature

Address Date

Initial receipt

Resubmitted
 A7-48

Released		Completed		
Received	Sent	Approved	Denied	Returned

To be completed for applicants with active tuberculosis or suspected tuberculosis

Statement by Applicant

Upon admission to the United States I will:

- 1. Go directly to the physician or health facility named in Section B;
2. Present all X-rays used in the visa medical examination to substantiate diagnosis;
3. Submit to such examinations, treatment, isolation, and medical regimen as may be required; and
4. Remain under the prescribed treatment or observation whether on inpatient or outpatient basis, until discharged.

Signature of Applicant

Date

B. Statement by Physician or Health Facility

(May be executed by a private physician, health department, other public or private health facility, or military hospital.)

I agree to supply any treatment or observation necessary for the proper management of the alien's tuberculous condition.

I agree to submit Form CDC 75.18 "Report on Alien with Tuberculosis Waiver" to the health officer named in Section D:

- 1. Within 30 days of the alien's reporting for care, indicating presumptive diagnosis, test results, and plans for future care of the alien; or
2. 30 days after receiving Form CDC 75.18 if the alien has not reported.

Satisfactory financial arrangements have been made. (This statement does not relieve the alien from submitting evidence, as required by consul, to establish that the alien is not likely to become a public charge.)

I represent (enter an "X" in the appropriate box and give the complete name and address of the facility below.)

- 1. Local Health Department
2. Other Public or Private Facility
3. Private Practice
4. Military Hospital

Name of Facility (please type or print)

Address (Number & Street) (Apartment Number)

City, State & ZIP Code

Signature of Physician

Date

C. Applicant's Sponsor in the U.S.

Arrange for medical care of the applicant and have the physician complete Section B.

If medical care will be provided by a physician who checked box 2 or 3, in Section B., have Section D. completed by the local or State Health Officer who has jurisdiction in the area where the applicant plans to reside in the U.S.

If medical care will be provided by a physician who checked box 4., in Section B., forward this form directly to the military facility at the address provided in Section B.

Address where the alien plans to reside in the U.S.

Address (Number & Street) (Apartment Number)

City, State & ZIP Code

D. Endorsement of Local or State Health Officer

Endorsement signifies recognition of the physician or facility for the purpose of providing care for tuberculosis. If the facility or physician who signed in Section B is not in your health jurisdiction and is not familiar to you, you may wish to contact the health officer responsible for the jurisdiction of the facility or physician prior to endorsing.

Endorsed by Signature of Health Officer

Date

Enter below the name and address of the Local Health Department to which the "Notice of Arrival of Alien with Tuberculosis Waiver" should be sent when the alien arrives in the U. S.

Official Name of Department

Address (Number & Street) (Apartment Number)

City, State & ZIP Code

Please read instructions with care.

If further assistance is needed, contact the office of the Immigration and Naturalization Service with jurisdiction over the intended place of U.S. residence of the applicant.

Form I-601 (Rev. 04/11/91) Y Page 1

Handwritten number 17-41 in a circle

DO NOT WRITE IN THIS BLOCK		
<input type="checkbox"/> 212 (a) (1)	<input type="checkbox"/> 212 (a) (10)	Fee Stamp
<input type="checkbox"/> 212 (a) (3)	<input type="checkbox"/> 212 (a) (12)	
<input type="checkbox"/> 212 (a) (6)	<input type="checkbox"/> 212 (a) (19)	
<input type="checkbox"/> 212 (a) (9)	<input type="checkbox"/> 212 (a) (23)	

A. Information about applicant -

1. Family Name (Surname in CAPS)	(First)	(Middle)
2. Address (Number and Street)	(Apartment Number)	
3. (Town or City)	(State/Country)	(ZIP/Postal Code)
4. Date of Birth (Month/Day/Year)	5. I&NS File Number	
	A-	
6. City of Birth	7. Country of Birth	
8. Date of visa application	9. Visa applied for at:	

10. Applicant was declared inadmissible to the United States for the following reasons: (List acts, convictions, or physical or mental conditions. If applicant has active or suspected tuberculosis, the reverse of this page must be fully completed.)

11. Applicant was previously in the United States, as follows:

City & State	From (Date)	To (Date)	I&NS Status

12. Social Security Number

B. Information about relative, through whom applicant claims eligibility for a waiver -

1. Family Name (Surname in CAPS)	(First)	(Middle)
2. Address (Number and Street)	(Apartment Number)	
3. (Town or City)	(State/Country)	(ZIP/Postal Code)
4. Relationship to applicant	5. I&NS Status	

C. Information about applicant's other relatives in the U.S. (List only U.S. citizens and permanent residents)

1. Family Name (Surname in CAPS)	(First)	(Middle)
2. Address (Number and Street)	(Apartment Number)	
3. (Town or City)	(State/Country)	(ZIP/Postal Code)
4. Relationship to applicant	5. I&NS Status	

1. Family Name (Surname in CAPS)	(First)	(Middle)
2. Address (Number and Street)	(Apartment Number)	
3. (Town or City)	(State/Country)	(ZIP/Postal Code)
4. Relationship to applicant	5. I&NS Status	

1. Family Name (Surname in CAPS)	(First)	(Middle)
2. Address (Number and Street)	(Apartment Number)	
3. (Town or City)	(State/Country)	(ZIP/Postal Code)
4. Relationship to applicant	5. I&NS Status	

Additional Information and Instructions

Signature and Title of Requesting Officer

Address	Date
---------	------

This office will maintain only a folder relating to the applicant pursuant to A.M. 2712.01

17-42

Application for Waiver of The
Foreign Residence Requirement
of Section 212(e) of the Immigration and
Nationality Act, as amended

OMB No. 1115-0043

INSTRUCTIONS: (READ CAREFULLY—FEE WILL NOT BE REFUNDED)

(Please tear off this sheet before
submitting application)

Application on this form may be submitted only by an alien who believes that compliance with the foreign residence requirement of Section 212(e) of the Immigration and Nationality Act, as amended, would impose exceptional hardship upon his/her spouse or child who is a citizen of the United States or a lawful permanent resident thereof, or by an alien who believes that returning to the country of his/her nationality or last residence would subject him/her to persecution on account of race, religion, or political opinion.

- 1. FOREIGN RESIDENCE REQUIREMENT.** In order to be eligible to apply for an immigrant visa or for permanent residence in the United States, or for a nonimmigrant visa at a temporary workstation, certain exchange visitors (visa symbols J-1 and J-2) must reside and be physically present in the country of their nationality or last foreign residence for an aggregate of at least two years following departure from the United States.

An exchange visitor is subject to the two year foreign residence requirements only if:

- His/her participation in the exchange program was financed at any time in whole or in part, directly or indirectly, by an agency of the United States Government or by the government of his/her country of nationality or last foreign residence; or
- prior to issuance of an exchange visitor visa, or admission as an exchange visitor without visa, or acquisition of status as an exchange visitor, to participate in an exchange program, his/her country of nationality or last foreign residence was designated by the Secretary of State as clearly requiring the alien's specialized knowledge or skill;
- he/she entered the United States on, or changed status to that of an exchange visitor on or after January 10, 1977, to participate in graduate medical education or training.

If a participant in an exchange program is subject to the two year foreign residence requirement, his/her spouse and unmarried minor children who were admitted as exchange visitors or acquired such status after admission are also subject to this requirement. If you have any question as to whether you are subject to the two year foreign residence requirement, the nearest Immigration and Naturalization Service office or American Consulate will be glad to advise you.

- 2. ELIGIBILITY FOR WAIVER OF THE TWO YEAR FOREIGN RESIDENCE REQUIREMENT.** Waiver of the two year foreign residence requirement may be authorized only if:

- The alien has a United States citizen or lawful resident alien spouse or unmarried minor child and establishes in an application to the Immigration and Naturalization Service that compliance with the two year foreign residence requirement would impose exceptional hardship upon such spouse or child; or
- the alien established in an application to the Immigration and Naturalization Service that returning to his/her country of nationality or last foreign residence would subject him/her to persecution on account of race, religion or political opinion; or
- a United States Government agency requests the Secretary of State to recommend a waiver in the alien's behalf for the reason that compliance with the two year foreign residence requirement would be detrimental to a program or activity of official interest to the agency; or
- the country of the alien's nationality or last foreign residence furnishes the Secretary of State a written statement that it has no objection to the waiver. This ground, however, is not available to the alien who came to the United States on or after January 10, 1977 as

an exchange visitor, or who acquired such status on or after that date, in order to receive graduate medical education or training.

In no case may the two year foreign requirement be waived unless a favorable recommendation is made by the Director of the United States Information Agency to the Attorney General.

3. SUBMISSION OF APPLICATION.

If you are in the United States, submit the application to the office of the Immigration and Naturalization Service having jurisdiction over your place of residence. If you are abroad, submit the application to the office of the Immigration and Naturalization Service having jurisdiction over the place of your last residence in the United States.

An alien who believes that a United States Government agency may be officially interested in his/her case and may wish to request a waiver in his/her behalf should inquire directly of that agency whether it would make such request.

An alien who seeks a waiver of the foreign residence requirement on the basis that the foreign country of his/her nationality or last foreign residence has no objection to the waiver should, if in the United States, apply directly to the Embassy of the country concerned; if abroad, direct inquiry to his/her foreign ministry.

- 4. SPOUSE OF APPLICANT.** If your spouse is or was an exchange alien who is subject to the foreign residence requirement solely because of a relationship to you, he or she may be included in this application by checking Box A in Block 6 of the application. If your spouse is subject to the foreign residence requirement because of participation in an exchange program, your spouse may apply for a waiver of the foreign residence requirement by submitting a separate application on Form I-612; in such case Box B of Block 6 should be checked on each application.

- 5. PREPARATION OF APPLICATION.** The application must be typewritten or printed legibly in ink with block letters.

- 6. SUPPORTING DOCUMENTS.** The following documents must be submitted with this application.

- To prove United States citizenship of spouse or child, if you check Box "A" in Block 5.
 - If your spouse or child is a citizen by reason of birth in the United States, submit (a) birth certificate of spouse or child; (b) if birth certificate is unobtainable, a copy of the baptismal certificate under seal of the church, showing place of birth (baptism must have occurred within 2 months after birth); or (c) if birth or baptismal certificate cannot be obtained, affidavits of two United States citizens who have personal knowledge of the birth of your spouse or child in the United States;
 - If your spouse or child was born outside the United States, became a citizen of the United States through a parent, and not been issued a certificate of citizenship, submit evidence of the citizenship and marriage of parent, as well as termination of any prior marriages of parent. Also submit birth certificate;

(J-612)

(A743)

child and a signed statement showing the date, port and means of all arrivals and departures (in and out of the United States by spouse or child. (Do not make a photocopy of a marriage certificate of citizenship. See Instruction No. 3.)

- (3) If naturalization of spouse or child occurred within 90 days immediately preceding the filing of this application, the naturalization certificate must accompany the application. (Do not make a photocopy of such certificate. See Instruction No. 3.)
- b. To prove relationship between applicant and spouse or child, if you check Box "A" in Block 5.
 - (1) Every application must be accompanied by a certificate of marriage to the spouse and proof of legal termination of all previous marriages of applicant and spouse. If application is based on hardship to a child, also submit the birth certificate of the child.
- c. To support your application for waiver.

You may, in addition to your own required statement, submit any documentary evidence available to you which you believe bears on the matter of exceptional hardship or persecution.
- d. If you are in the United States, you must submit your temporary entry permit (Form I-94, Arrival-Departure Record) and the entry permit of your spouse if the latter is in this country and is not a U.S. citizen or lawful permanent resident. If the entry permit is attached to the passport, remove it for this purpose. **DO NOT SEND IN THE PASSPORT.**

7. DOCUMENTS IN GENERAL. All supporting documents must be submitted in the original. If you desire to have the original of any of the documents returned, and if copies are by law permitted to be made, you may submit photographic or typewritten copies, with the original, and the original will be returned to you. However, a photographic or other machine-made copy unaccompanied by the original document may be accepted if the copy bears a certification by an Immigration or Consular officer that the copy was compared with the original and found to be

identical. Any document in a foreign language must be accompanied by a translation in English. The translator must certify that he is competent to translate and that the translation is accurate. (Do not make a copy of a certificate of naturalization or citizenship. To do so is prohibited by law.)

8. PENALTIES - SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT OR USING ANY FALSE DOCUMENT IN THE SUBMISSION OF THIS APPLICATION.

Title 18, United States Code, section 1426(b) provides: "Whoever, without lawful authority, prints, photographs, makes or causes any print or impression in the likeness of a * * * certificate of naturalization or citizenship, or any part thereof, shall be fined not more than \$5,000 or imprisoned not more than five years, or both."

9. A fee of ninety dollars (\$90) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be assessed if a check in payment of a fee is not honored by the bank on which it is drawn.

I-612

17-44

Application for Waiver of The
 Foreign Residence Requirement
 of Section 212(e) of the Immigration and
 Nationality Act, as amended

OMB No. 1118-0059
 Expires 11/83

This application must be typewritten or printed legibly in ink with black letters.

Fee Stamp

1. Name (Last in CAPS)		First	Middle	If a married woman, give maiden name	
2. Mailing Address (Apt. No.)		(Number and Street)	(Town or City)	(State or Province)	(Country) (ZIP Code, if in U.S.)
Present or last U.S. Residence		(Number and Street)	(City)	(State)	(ZIP Code)
3. Date of Birth	Country of Birth	Country of Nationality		Country of Last Foreign Residence	
Alien Registration Number, if known					
4. I believe I am subject to the foreign residence requirements because: (Check appropriate box(es))					
A. <input type="checkbox"/> I participated in an exchange program which was financed by an agency of the U.S. Government or the government of the country of my nationality or last foreign residence for the purpose of promoting international educational and cultural exchange.					
B. <input type="checkbox"/> An agency of the Government of the U.S., or the government of the country of my nationality or last foreign residence gave me a grant (such as a Fulbright grant), stipend or allowance for the purpose of participation in an exchange program. Name of U.S. Government agency or foreign country _____					
C. <input type="checkbox"/> I became an exchange visitor after the Secretary of State designated the country of my nationality or last foreign residence as clearly requiring the services of persons with my specialized knowledge or skill.					
D. <input type="checkbox"/> I entered the United States as, or my status was changed to that of, an exchange visitor on or after January 10, 1977 to participate in graduate medical education or training.					
5. I am applying for waiver of the foreign residence requirement on the ground that: (Check appropriate box(es))					
A. <input type="checkbox"/> My departure from the United States would impose exceptional hardship upon my United States citizen or lawful permanent resident spouse or child.					
B. <input type="checkbox"/> I cannot return to the country of my nationality or last foreign residence because I would be subject to persecution on account of race, religion, or political opinion.					
<p>IMPORTANT: If you have checked Box "A" you must attach to this application a statement dated and signed by you giving a detailed explanation of the basis for your belief that compliance by you with the two-year foreign residence requirement of Section 212(e) of the Immigration and Nationality Act, as amended, would impose exceptional hardship upon your spouse or child who is a citizen of the United States or a lawful permanent resident thereof. Without such statement your application is incomplete. You must include in the statement all pertinent information concerning the income and savings of yourself and your spouse. There should also be attached such documentary evidence as may be available to support the allegations of hardship.</p> <p>If you have checked Box "B" you must attach a statement dated and signed by you setting forth in detail the manner(s) you believe that you cannot return to the country of your nationality or last foreign residence because you would be subject to persecution on account of race, religion, or political opinion. There should also be attached such documentary evidence as may be available to support the allegations of persecution.</p>					
6. If married, check appropriate box(es): (See instruction No. 4)					
A. <input type="checkbox"/> My spouse is included in this application.			B. <input type="checkbox"/> My spouse is filing a separate application for waiver.		

I-612

A7-45

RECEIVED	TRANS. IN	RETD. TRANS. OUT	COMPLETED

7. List all program numbers and names of all program sponsors.

8. Major field of activity (Check one)			9. Occupation
<input type="checkbox"/> (1) Agriculture	<input type="checkbox"/> (4) Engineering	<input type="checkbox"/> (7) Natural and Physical Sciences	
<input type="checkbox"/> (2) Business Administration	<input type="checkbox"/> (5) Humanities	<input type="checkbox"/> (8) Social Sciences	
<input type="checkbox"/> (3) Education	<input type="checkbox"/> (6) Medicine	<input type="checkbox"/> (9) Other	

10. Date and port of last arrival in the United States as participant in a designated exchange program.

11. If you are now abroad, give date of departure from U.S.		12. Number of prior marriages of applicant _____ If married, number of prior marriages of applicant's spouse _____	
13. Name of spouse	Date and Country of birth	Nationality	Country of last foreign residence
14. Names of children	Date and Country of birth	Nationality	Country of last foreign residence

15. If you checked Box "A" in Block 5 above, furnish the following information concerning your spouse or one of your children who is a citizen of the United States and who you believe would suffer exceptional hardship if you resided outside the United States for two years following your departure from this country.

Name of United States citizen spouse or child:	United States citizenship of spouse or child was acquired through (check one) <input type="checkbox"/> Birth in the United States <input type="checkbox"/> Naturalization <input type="checkbox"/> Parent(s)	
If United States citizenship of spouse or child was acquired through naturalization, give the following:		
Number of naturalization certificates	Date of naturalization	Place of naturalization
If United States citizenship of spouse or child was acquired through parent(s), has spouse or child obtained a certificate of citizenship?		
If so, give number of certificate(s) _____. If not, submit evidence in accordance with instruction 6(a) (2).		

16. If you checked Box "A" in Block 5 above and you do not have a spouse or child who is a citizen of the United States, furnish the following information concerning your spouse or one of your children who is a lawful permanent resident of the United States and who you believe would suffer exceptional hardship if you resided outside the United States for two years following your departure from this country.

Name of lawful resident alien spouse or child:	Alien Registration Number
Date, place, and means of admission for lawful permanent residence:	

I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on _____ (Date) _____ (Place) _____ (Signature of applicant)

Signature of person preparing form, if other than applicant: I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge:

(Signature)

(Address of person preparing form, if other than applicant)

(Date)

(Occupation)

I-687 Instructions - Page 1
(Conditions of Application)

Please carefully read all of the instructions: The fee will not be refunded.

Failure to follow instructions may require return of your application and delay final action. If your application is returned, no further action will be taken. You must resubmit your application with the requested documentation or information to renew processing.

Applications for status as a temporary resident as 1) an alien who illegally entered the United States prior to January 1, 1982 or 2) an alien who entered the United States as a nonimmigrant prior to January 1, 1982 and whose authorized stay expired before such date or whose unlawful status was known to the Immigration and Naturalization Service as of January 1, 1982 must be submitted or resubmitted by May 4, 1988. Failure to do so will make the applicant ineligible for the benefit sought.

1. **Preparation of Application:** A separate application for each applicant must be typewritten or printed legibly in ink. Applications by family members must be submitted together in order to receive the reduced family fee structure identified in item #5 of the instructions. The application must be completed in full. If extra space is needed to answer any item, attach a continuation sheet and indicate the item number. Various organizations and individuals (Qualified Designated Entities) have been designated by the Attorney General to assist applicants in the preparation of their applications. Your application must be submitted to an Immigration Legalization Office that is within the jurisdiction of the INS District Office over your place of residence.

2. **Eligibility:** An application may be filed by any alien who would qualify within the following guidelines. If you are not certain that you would qualify, you may contact a Qualified Designated Entity near your place of residence or an Immigration Legalization Office in your area. The following aliens may be eligible for temporary resident status.

- (a) An alien who can establish that he/she entered the United States before January 1, 1982 and that he/she has resided continuously in the United States in an unlawful status since such date.

- (b) An alien who entered the United States as a nonimmigrant prior to January 1, 1982 and whose authorized stay expired before such date or whose unlawful status was known to the Government as of January 1, 1982 and who has resided continuously in the United States in an unlawful status since such date.

In order to be eligible for Temporary Resident status under paragraphs (a) and (b), the applicant must have been continuously physically present in the United States since the date of enactment of the Immigration Reform and Control Act of 1986 (November 8, 1986).

Absences that are brief, casual, and innocent will not break the continuous physical presence requirement if made before May 1, 1987. Aliens who were outside of the United States on the date of enactment or departed the United States after enactment may apply if they reentered prior to May 1, 1987, provided they meet the continuous residence requirements, and are otherwise eligible for legalization.

3. **Ineligible Classes:** The following classes of aliens are ineligible for temporary residence.

- (a) An alien who has been convicted of a felony or three or more misdemeanors committed in the United States.
- (b) An alien who has assisted in the persecution of any person or persons on account of race, religion, nationality, membership in a particular social group, or political opinion.
- (c) An alien who at any time was a nonimmigrant exchange visitor who is subject to the two-year foreign residence requirement unless the requirement has been satisfied or waived pursuant to the provisions of Section 212(e) of the Act.

4. **Penalties for False Statements in Applications:** Whoever files an application for adjustment of status under Section 245A of the Act and who knowingly and willfully falsifies, misrepresents, conceals or covers up a material fact or makes any false, fictitious, or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious, or fraudulent statement or entry will be subject to criminal prosecution and/or deportation.

Authority for Collecting this Information: The authority to prescribe this form is contained in the "Immigration Reform and Control Act of 1986." The information is necessary to determine whether a person is eligible for the immigration benefit sought. Information on race is requested in question #10 for statistical purposes only. You do not have to give this information. All other questions must be answered. Failure to do so may result in the denial of the application.

Confidentiality: The information provided in this application is confidential and may only be used to make a determination on the application or for enforcement of the penalties for false statements referred to in instruction #4. The information provided is subject to verification by the Immigration and Naturalization Service.

1-687

5. **Fees:** A fee of one hundred eighty-five dollars (\$185.00) for each application, or fifty dollars (\$50.00) for each application for a minor child (under 18 years of age) is required at the time of filing with the Immigration and Naturalization Service. The maximum amount payable by a family (husband, wife, and any minor children) shall be four hundred twenty dollars (\$420.00). The fee is not refundable regardless of the action taken on the application. A separate cashier's check or money order must be submitted for each application. *All fees must be submitted in the exact amount.* No cash or personal checks will be accepted. The cashier's check or money order must be made payable to "Immigration and Naturalization Service" unless applicant resides in the Virgin Islands or Guam. (Applicants residing in the Virgin Islands make cashier's checks or money orders payable to "Commissioner of Finance of the Virgin Islands". Applicants residing in Guam make cashier's check or money order payable to "Treasurer, Guam".)

6. **Photographs:** Submit two (2) color photographs of yourself taken within thirty (30) days of the date of this application. These photos must have a white background, be glossy, unretouched, and not mounted; dimension of facial image should be about one inch from chin to top of hair; you should be shown in 3/4 frontal view showing right side of face with right ear visible; using pencil or felt pen, lightly print your name on the back of each photograph. Failure to comply with the above instructions will result in the return of the application without further action.

7. **Fingerprints:** A completed fingerprint card (Form FD-258) must be submitted by each applicant 14 years of age or older. Fingerprint cards with instructions for their completion are available at Qualified Designated Entity offices. Applicants may be fingerprinted by law enforcement offices, Outreach Centers, charitable and voluntary agencies, or other reputable persons or organizations. The fingerprint card (FD-258) on which the prints are submitted, the ink used, and the quality and classifiability of the prints must meet standards prescribed by the Federal Bureau of Investigation. The card must be signed by you in the presence of the person taking your fingerprints, who must then sign his/her name and enter the date in the spaces provided. It is important to furnish all the information called for on the card.

8. **Interview:** You will be required to be present for a personal interview by an officer of the Immigration and Naturalization Service. In most locations, interviews will be scheduled subsequent to receipt of the application.

9. **Documents - General:** At the time of filing, copies of documents which are notarized or certified as true and correct by a Qualified Designated Entity or by the applicant's representative in the format prescribed in 8 CFR 204.2(j)(1) or (2) may be submitted with the application. However, at the time of the interview, wherever possible, the original documents must be presented except for the following: official government records; employment or employment related records maintained by employers, unions, or collective bargaining organizations; medical records; school records maintained by a school or school board; or other records maintained by a party other than the applicant.

Copies of these records must be endorsed as true and correct and must bear the signature or seal of issuing parties or the signature and title of persons authorized to act in their behalf. All certified copies of documents become the property of the Attorney General. At the discretion of the district director, original documents, even if accompanied by certified copies, may be temporarily retained.

Any document in a foreign language must be accompanied by a summary translation into English. A summary translation is a condensation or abstract of the document's text but includes all pertinent facts. The translator must certify that he/she is competent to translate into English and that the translation is accurate.

10. **Documents to Establish Identity:** The following list gives examples of the types of documents which may serve to establish your identity. This list is not all inclusive and other evidence may be considered if none of the following is available:

- Birth Certificate, Baptismal Certificate, or other evidence of birth
- Passport
- National Identification Card from country of origin
- Driver's License
- School Identification Card
- State Identification Card

11. **Documents to Establish Admissibility:**

(a) Medical Report of Examination (Form I-693).

(b) Evidence of Income: examples of documents which may be used as evidence of financial support or income include:

- Letters from employers which illustrate full-time employment.
- W-2 Tax Records or other wage records.
- Bank statements or evidence of other assets.
- Form I-134 (Affidavit of Support) completed by a responsible person in the United States.
- Any other evidence to establish that the applicant is not likely to become a public charge.

(c) An application for a Waiver of Grounds of Excludability (Form I-690) may be required if you answer any of the items 39 through 43 in the affirmative.

12. **Documents to Establish Residence:** Examples of documents which may be submitted to prove continuity of residence include:

- Leases
- Rent Receipts
- Employer, union or other business records
- Birth certificates of children born in the United States
- Automobile license receipts
- Vehicle registrations
- Deeds
- Mortgages
- Utility bill receipts
- Installment loan records
- Church records
- Medical records

Letters from landlords should include the landlord's present address and the beginning and terminating dates of the applicant's residence. Letters from employers' organizations or churches should be on official stationery and include relevant dates, the organization seal (if any) and the signer's name and title.

Form I-687

A7-48
A7.

**U.S. Department of Justice
Immigration and Naturalization Service**

**Application for Status as a Temporary Resident OMB #11115-0123
(Under Section 245A of the Immigration and Nationality Act)**

Begin with item #1, after carefully reading the instructions.

The block below is for Government Use Only.

Name and Location (City or Town) of Qualified Designated Entity	Fee Stamp
	Fee Receipt No. (This application)
	Principal Applicant's File No. A -
Qualified Designated Entity I.D. No.	File No. (This applicant) A -

Applicant: Do not write above this line. See instructions before filling in application. If you need more space to answer fully any question on this form, use a separate sheet and identify each answer with the number of the corresponding question. Fill in with typewriter or print in block letters in ink.

1. I hereby apply for status as indicated by the block checked below (check block A or B).

A Temporary Residence as an alien who legally entered the U.S. prior to January 1, 1962.

B Temporary Residence as an alien who entered the U.S. as a nonimmigrant prior to January 1, 1962 and whose authorized stay expired before such date or whose unlawful status was known to the Government as of January 1, 1962.

2. Family Name (Last Name in CAPITAL Letters) (First Name) (Middle Name)

3. Date of Birth (Month/Day/Year)

4. Other Names Used or Known by (including maiden name, if married)

5. Telephone Numbers (include Area Codes)
Home:
Work:

6. Home Address in the U.S. (No. and Street) (Apt. No.) (City) (State) (ZIP Code)

7. Mailing Address in the U.S. (if different from #6.) (Apt. No.) (City) (State) (ZIP Code)

8. Last Address outside the U.S. (City or Town) (County, Province or State) (Country)

9. Sex Male Female

10. Race Asian or Pacific Islander Black, not of Hispanic origin Other (specify below)
 Hispanic White, not of Hispanic origin

11. Marital Status Never Married Divorced Widowed
 Now Married Separated

12. Country of Citizenship (Country)

13. Place of Birth (City or Town) (County, Province or State) (Country)

14. Have you previously applied for temporary residence as a legalization applicant?
 No Yes (if "Yes" give date, place of filing, and final disposition, if known)

15. Do you have any other record with I&NS?
 No Yes (if "Yes" give number(s))
A - _____
Other _____

16. When did you last come to the U.S.? (Month/Day/Year)

17. Manner of Entry (Visitor, Student, Crewman, etc.)
 With visa (visitor, student, etc.) specify _____
 Without visa

18. Place of Last Entry
 U.S. Port of entry (City and State) _____
 Border - Not through port (State) _____

19. List all Social Security Numbers used.
(1) _____ (3)
(2) _____ (4)

20. Mother's Name (Maiden) (Last) (First) Living Deceased (year) _____

21. Father's Name (Last) (First) Living Deceased (year) 148

687

34. To assist in establishing the required residence, please list all affiliations or associations with clubs, organizations, churches, unions, businesses, etc.

Name of Organization	Location	From (Month/Year)	To (Month/Year)

35. Absences from the United States since entry. (List most recent absence first and list absences back to January 1, 1962.)

Country	Purpose of Trip	From (Month/Year)	To (Month/Year)

36. Employment in the United States since first entry. (List present or most recent first and list back to date of entry; if none since entry, write "None".)

Full Name and Address of Employer (with ZIP Code) (or Self employed and business address)	Your Occupation	Annual Wages	Wages per Hour	From (Month/Year)	To (Month/Year)

37. I have registered under the Military Selective Service Act. My Selective Service No. is _____
 I am a male over the age of 17 and under the age of 26 required to register under the Military Selective Service Act and have not done so. I wish to register at this time. SSS Form 1 is attached.
 I am a male born after 1959 and over the age of 26 and cannot now register.
 I am exempt from Selective Service Registration either because I am a female or I was born before 1960.

38. have have not assisted in the persecution of any person or persons on account of race, religion, nationality, membership in a particular social group or political opinion.
39. have have not been treated for a mental disorder, drug addiction or alcoholism.
40. have have not been arrested, convicted or confined in a prison.
41. have have not been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action.
42. have have not received public assistance from any source, including, but not limited to, the United States Government, any state, county, city or municipality. (Check the first block if you or a dependent member of your immediate family has received such assistance, including the name(s) of recipient(s) and Social Security number(s) used.)

47-51

43. Applicants for Temporary Resident status must establish that they are not excludable from the United States under the following provisions of section 212 (a) of the Act. An applicant who is excludable under any of the provisions of section 212 (a) of the Act is ineligible for a position of temporary resident status. An applicant who is excludable under a provision of section 212 (a) of the Act may be waived from such exclusion, as provided for temporary resident status, if an application for waiver on form I-229 is filed and approved.

A. Grounds of exclusion which may not be waived:

• Listed by paragraph number of section 212 (a):

- (9) Aliens who have been convicted or who have been convicted of a crime involving moral turpitude (does not include minor traffic violations).
- (10) Aliens who have been convicted of two or more offenses for which the aggregate sentences to confinement actually imposed were five years or more.
- (22) Aliens who have been convicted of a violation of any law or regulation relating to narcotic drugs or marihuana, or who have been illicit traffickers in narcotic drugs or marihuana.
- (27) Aliens who intend to engage in activities prejudicial to the national interests or unlawful activities of a subversive nature.
- (28) Aliens who are or at any time have been anarchists; or members of or affiliated with any Communist or other totalitarian party, including any subdivision or affiliate thereof.
- (29) Aliens who have advocated or taught, either by personal utterance, or by means of any written matter, or through affiliation with an organization:
 - 1) Opposition to organized government;
 - 2) The overthrow of government by force or violence;
 - 3) The assaulting or killing of government officials because of their official character;
 - 4) The unlawful destruction of property;
 - 5) Sabotage; or
 - 6) The doctrine of world communism, or the establishment of a totalitarian dictatorship in the United States.
- (33) Aliens who, during the period beginning on March 22, 1933, and ending on May 8, 1945, under the direction of, or in association with:
 - 1) The Nazi government in Germany;
 - 2) Any government in any area occupied by the military forces of the Nazi government in Germany;
 - 3) Any government established with the assistance or cooperation of the Nazi government of Germany;
 - 4) Any government which was an ally of the Nazi government of Germany;
 ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, national origin, or political opinion.

• Provisions of 212 (a):

Aliens who at any time were exchange visitors subject to the two-year foreign residence requirement unless the requirement has been satisfied or waived pursuant to the provisions of section 212 (c) of the Act.

Do any of the above provisions apply to you?

No Yes (If "Yes" explain on a separate sheet of paper.)

B. Grounds of exclusion which may be waived for humanitarian purposes, to assure family unity or when it is in the public interest.

• Listed by paragraph number of section 212 (a):

- (1) Aliens who are mentally retarded.
- (2) Aliens who are insane.
- (3) Aliens who have suffered one or more attacks of insanity.
- (4) Aliens afflicted with psychopathic personality, sexual deviator, or a mental defect.
- (5) Aliens who are narcotic drug addicts or chronic alcoholics.
- (6) Aliens who are afflicted with any dangerous contagious disease.
- (7) Aliens who have a physical defect, disease or disability affecting their ability to earn a living.
- (8) Aliens who are paupers, professional beggars or vagrants.
- (11) Aliens who are polygamists or advocate polygamy.
- (12) Aliens who are prostitutes or former prostitutes, or who have procured or attempted to procure or to import, prostitutes or persons for the purpose of prostitution or for any other immoral purpose, or aliens coming to the United States to engage in any other unlawful commercialized vice, whether or not related to prostitution.
- (13) Aliens coming to the United States to engage in any immoral sexual act.
- (15) Aliens likely to become a public charge.
- (16) Aliens who have been excluded from admission and deported and who again seek admission within one year from the date of such deportation.
- (17) Aliens who have been evicted and deported and who reentered the United States within five years from the date of deportation.
- (18) Aliens who have procured or have attempted to procure a visa or other documentation by fraud, or by willfully misrepresenting a material fact.
- (22) Aliens who have applied for exemption or discharge from training or service in the Armed Forces of the United States on the ground of allegiance and who have been refused or discharged from such training or service.
- (31) Aliens who at any time shall have, knowingly and for gain, encouraged, induced, assisted, abetted, or aided any other alien to enter or to try to enter the United States in violation of law.

Do any of the above provisions apply to you?

No Yes (If "Yes" explain on a separate sheet of paper.)

44. If your native alphabet is in other than Roman letters, write your name in your native alphabet.		45. Language of native alphabet	
46. Signature of Applicant - I CERTIFY, under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. I hereby consent and authorize the Service to verify the information provided, and to conduct police, welfare and other record checks pertinent to this application.		47. Date (Month/Day/Year)	
48. Signature of person preparing form, if other than applicant. I DISCLOSE that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.		49. Date (Month/Day/Year)	
50. Name and Address of person preparing form, if other than applicant (type or print).		51. Occupation of person preparing form	
QUALIFIED DESIGNATED ENTITY USE ONLY			
52. Reviewed by (Print or Type Name)		53. Signature	
		54. Date	
IMMIGRATION AND NATURALIZATION SERVICE USE ONLY			
55. Recommendation: Temporary Residence <input type="checkbox"/> Approved <input type="checkbox"/> Denied		56. Recommendation: Waiver of Excludability under Section 212 (a) _____ is <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
57. Class of Admission		58. Place of Adjustment	
		59. Date of Adjustment	
60. Recommended by (Print or type Name and Title)		61. Signature	
		62. ID No.	
		63. Date	
64. Final Action: Temporary Residence <input type="checkbox"/> Approved <input type="checkbox"/> Denied		65. Director Regional Processing Facility	
		66. ID. No.	
		67. Date	

A7-32
177

I. The Application Process

How to File

A separate application must be filed by each applicant. Applications must be typewritten or clearly printed in ink and completed in full. If extra space is needed to answer an item, attach a continuation sheet and indicate your name, A90 number and item number. Applications must be mailed to one of the four Regional Processing Facilities depending on where you reside. (See below.)

If you reside in: Connecticut; Delaware; District of Columbia; Maine; Maryland; Massachusetts; New Hampshire; New Jersey; New York; Pennsylvania; Puerto Rico; Rhode Island; Vermont; Virgin Islands; Virginia; or West Virginia:

Mail application to: Regional Processing Facility, U.S. Immigration and Naturalization Service, P.O. Box 968, Williston, VT 05495

If you reside in: Alaska; Colorado; Idaho; Illinois; Indiana; Iowa; Kansas; Michigan; Minnesota; Missouri; Montana; Nebraska; North Dakota; Ohio; Oregon; South Dakota; Utah; Washington; Wisconsin; or Wyoming:

Mail application to: Regional Processing Facility, U.S. Immigration and Naturalization Service, Federal Building and U.S. Courthouse, 100 Centennial Mall, Room B-25, Lincoln, NE 68508

If you reside in: Alabama; Arkansas; Florida; Georgia; Kentucky; Louisiana; Mississippi; New Mexico; North Carolina; Oklahoma; South Carolina; Tennessee; or Texas:

Mail application to: Regional Processing Facility, U.S. Immigration and Naturalization Service, P.O. Box 669570, Dallas, TX 75356-9570

If you reside in: Arizona; California; Guam; Hawaii; or Nevada:

Mail Application to: Regional Processing Facility, U.S. Immigration and Naturalization Service, P.O. Box 30080, Laguna Niguel, CA 92677-0080

Note: It is recommended that you retain a complete copy of your application for your records.

Fee

A fee of eighty dollars (\$80.00) for each I-698 application is required at the time of filing with the Immigration and Naturalization Service. The maximum amount payable by a family (husband, wife, and children under 18 years of age living at home) shall be two hundred and forty dollars (\$240.00). Fees are not refundable regardless of the action taken on the application. All fees must be in the form of a U.S. Postal Money Order, Money Order, or Bank Check; cash or personal checks of any type will not be accepted.

All money orders and bank checks must be made payable to "Immigration and Naturalization Service". You will receive a fee receipt after your application is received and processed at a Regional Processing Facility. Any stop payment action taken by you or your representative will cause the Service to terminate action on the application.

Photographs

Submit with the application one color photograph of yourself taken within thirty (30) days of the date of the application. Two additional color photographs will be required at the time of the interview. Do not send these two additional photographs with the I-698 application. The photos must have a white background, be glossy, unretouched, and not mounted; dimension of facial image should be about one inch from chin to top of hair. You must be shown in the photos in a three-fourths frontal view showing right side of face with right ear and both eyes visible. Your name and A90 million file number should be placed lightly in pencil on the back of the photographs.

Medical Examination

A medical examination form (I-693) is required only for those applicants who were not given a serologic test for human immunodeficiency virus (HIV) infection as part of their medical examination when applying for temporary residence. If you are 15 years of age or older and your medical examination for temporary residence did not include a serologic test for HIV, you should choose a doctor from a list of doctors or clinics in your area that have been approved by the Immigration and Naturalization Service to perform medical examinations and make arrangements with the doctor or clinic to have a serologic test for HIV.

Note: If you must comply with this requirement you do not have to undergo another complete medical examination. The medical examination form need only reflect the results of the serologic test.

Documents - General

The submission of original documents is not required at the time of filing your application (Form I-698). Copies certified as true and complete by a qualified designated entity in good-standing or by your attorney or accredited representative in the format prescribed in 8 CFR 204.2(j)(1) or (2) may be submitted with Form I-698. Original documents must be presented when, and if, requested by the Service. If any original document is submitted, it will be retained by the Service. Any document in a foreign language must be accompanied by a summary translation into English. A summary translation is a shortened version of the document's text but includes all pertinent facts. The translator must certify that he/she is competent to translate into English and that the translation is accurate.

699

A7-53

152

Regional Processing Facility

The Service has four Regional Processing Facilities where applications will be received and processed. Once received at a Regional Processing Facility your application will be reviewed for completeness and examined by INS personnel to determine your eligibility and admissibility as an immigrant. Once the application is reviewed and examined an interview will be scheduled for you.

Interview

Interviews will take place at selected INS offices throughout the United States. It is important that you bring your "appointment for interview notice" and any other requested information to the interview. You must also bring Form I-688, Temporary Resident Card to the interview as this card will be modified to reflect temporary evidence of permanent residence until such time as your I-551, Alien Registration Card is received through the mails.

II. Confidentiality and Penalties for False Statements

As in the temporary resident application process, the information provided in your permanent resident application is strictly confidential and may only be used to make a determination on the application or for the enforcement of penalties for false statements. The information provided is subject to verification by the Immigration and Naturalization Service.

The authority to require you to file Form I-696, Application to Adjust Status From Temporary to Permanent Resident, is contained in the "Immigration Reform and Control Act of 1986." The information is necessary to determine whether you are eligible for permanent resident status and for preparing the Alien Registration Card (I-551). All questions must be answered. Failure to answer any question may result in a processing delay or denial of the application.

Penalties for False Statement in Applications

Whoever files an application for adjustment of status under Section 245A of the Act and who knowingly and willfully falsifies, misrepresents, conceals or covers up a material fact or makes any false, fictitious, or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry will be subject to criminal prosecution.

III. I-772 - Declaration of Intending Citizen

Section 274B of the Immigration and Nationality Act prohibits discrimination in employment hiring and firing based on an individual's national origin or citizenship status. To be afforded the protection of this section a temporary resident alien must file a notice of intent to become a U.S. citizen (I-772). An I-772 can be obtained by contacting an INS office. For additional information concerning immigration related unfair employment practices contact the

Form 2-698

Office of Special Counsel for Immigration Related Unfair Employment Practices by mail at P.O. Box 66490, Washington, D.C. 20066-7995 or by telephone at 1-800-295-7888 or 202-663-8121 or 202-663-8710 (for hearing impaired).

IV. Name Changes

If your name has changed you must submit a certified copy of the decree of the court or marriage certificate as appropriate. A married woman may file her application under either her maiden or present married name.

V. Eligibility Requirements

An application may be filed by any alien who was granted Temporary Resident status under Section 245A of the Immigration and Nationality Act as amended by the Immigration Reform and Control Act of 1986 and section 902 of the Department of State Authorization Bill of 1987. In order to be found eligible for Permanent Residence under Section 245A you must:

- a) Apply for such adjustment during the one year period beginning with the nineteenth month that begins after the date you were granted such temporary resident status;
- b) Reside continuously in the United States, that is since becoming a temporary resident alien no single absence from the United States exceeded thirty (30) days or the total of all absences exceeded ninety (90) days. A single absence from the United States of more than 90 days, or aggregate of more than 90 days during the period for which continuous residence is required for adjustment to permanent residence shall break the continuity of such residence, unless you can establish to the satisfaction of the Service that you did not, in fact, abandon your residence in the United States during such period;
- c) Be found admissible to the United States as an immigrant, except as otherwise provided in the provisions of paragraph (14), (20), (21), (25) and (32) of Section 212(a) of the Immigration and Nationality Act;
- d) Have not been convicted of any felony or three or more misdemeanors committed in the United States;
- e) Be able to demonstrate that you either:
 - 1) Meet the requirements of Section 312 of the Immigration and Nationality Act, as amended (relating to minimal understanding of ordinary English and a knowledge and understanding of the history and government of the United States); or
 - 2) Are satisfactorily pursuing a course of study recognized by the Attorney General, to achieve such understanding of English and such knowledge and understanding of the history and government of the United States. You can obtain further information about available courses by contacting your local INS legalization or district office.

A7-54
27

Please read instructions; fee will not be refunded.		Fee Stamp	
INS User Bar Code		Applicant's File No.	
Place adhesive address label here from booklet or fill in name and address, and A 90 million file number in appropriate blocks.)		A-9	
1. Family Name (Last Name in CAPITAL Letters) (See instructions) (First Name) (Middle Name)		2. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
3. Name as it appears on Temporary Resident Card (I-688) if different from above.		4. Phone No.'s (Include Area Codes) Home: Work:	
5. Reason for difference in name (See instructions)			
6. Home Address (No. and Street)		(Apt. No.)	(City) (State) (Zip Code)
7. Mailing Address (if different)		(Apt. No.)	(City) (State) (Zip Code)
Place of Birth (City or Town)		(County, Province or State) (Country)	8. Date of Birth (Month/Day/Year)
10. Your Mother's First Name		11. Your Father's First Name	
12. Enter your Social Security Number			
13. Absences from the United States since becoming a Temporary Resident Alien. (List most recent first.) (If you have a single absence in excess of 90 days or the total of all your absences exceeds 90 days, explain and attach any relevant information.)			
Country	Purpose of Trip	From (Month/Day/Year)	To (Month/Day/Year)
Total Days Absent			
14. When applying for temporary resident alien status, I <input type="checkbox"/> did <input type="checkbox"/> did not submit a medical examination form (I-684) with my application that included a serologic (blood) test for human immunodeficiency virus (HIV) infection. (If you did not, submit a medical examination form (I-684) with this application that includes a serologic test for HIV.)			
15. Since becoming a temporary resident alien, I <input type="checkbox"/> have <input type="checkbox"/> have not been arrested, convicted or confined in a prison. (If you have, provide the date(s), place(s), specific charge(s) and attach any relevant information.)			
16. Since becoming a temporary resident alien, I <input type="checkbox"/> have <input type="checkbox"/> have not been the beneficiary of a pardon, amnesty (other than legislation), rehabilitation decree, other act of clemency or similar action. (If you have, explain and attach any relevant documentation.)			
17. Since becoming a temporary resident alien, I <input type="checkbox"/> have <input type="checkbox"/> have not received public assistance from any source, including but not limited to, the United States Government, any state, county, city or municipality. (If you have, explain (i.e. name(s) and Social Security Number(s) used and attach any relevant information.)			

18. Concerning the requirement of minimal understanding of ordinary English and a knowledge and understanding of the history and government of the United States (check appropriate block under Section A or B.)

- A. I will satisfy these requirements by:
- Examination at the time of interview for permanent residence.
 - Satisfactorily pursuing a course of study recognized by the Attorney General.

- B. I have satisfied these requirements by:
- Having satisfactorily pursued a course of study recognized by the Attorney General (please attach appropriate documentation).
 - Exemption, in that I am 65 years of age or older, under the age of 16, or I am physically unable to comply. (If physically unable to comply, explain and attach relevant documentation.)

19. Applicants for status as Permanent Residents must establish that they are not excludable from the United States under the following provisions of section 212 of the INA. An applicant who is excludable under a provision of section 212 (a) which may not be waived is inadmissible for permanent resident status. An applicant who is excludable under a provision of section 212 (a) which may be waived may, if otherwise eligible, be granted permanent resident status, if an application for waiver on form I-600 is filed and approved.

- A. Grounds for exclusion which may not be waived:
- Listed by paragraph number of section 212 (a):
 - (9) Aliens who have committed or who have been convicted of a crime involving moral turpitude (does not include minor traffic violations).
 - (10) Aliens who have been convicted of two or more offenses for which the aggregate sentences to confinement actually imposed were two years or more.
 - (11) Aliens likely to become a public charge.
 - (12) Aliens who have been convicted of a violation of any law or regulation relating to narcotic drugs or marihuana, or who have been found guilty of a violation of any law or regulation relating to a single offense of simple possession of thirty grams or less of marihuana.
 - (17) Aliens who intend to engage in activities prejudicial to the national interests or national activities of a sovereign nation.
 - (20) Aliens who are or at any time have been members, or members of or affiliated with any Communist or other totalitarian party, including any subdivision or affiliate thereof.
 - (20) Aliens who have advocated or taught, either by personal utterance, or by means of any written matter, or through affiliation with an organization:
 - 1) Opposition to organized government;
 - 2) The overthrow of government by force or violence;
 - 3) The advocating or killing of government officials because of their official character;
 - 4) The unlawful destruction of property;
 - 5) Sabotage; or
 - 6) The doctrines of world communism, or the establishment of a totalitarian dictatorship in the United States.
 - (23) Aliens who, during the period beginning on March 23, 1933, and ending on May 8, 1945, under the direction of, and in association with:
 - 1) The Nazi government in Germany;
 - 2) Any government in any area occupied by the military forces of the Nazi government in Germany;
 - 3) Any government established with the assistance or cooperation of the Nazi government of Germany;
 - 4) Any government which was an ally of the Nazi government of Germany;
 ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, national origin, or political opinion.
 - Provisions of 212 (c):
 - Aliens who at any time were exchange visitors subject to the two-year foreign residence requirement unless the requirement has been waived or waived pursuant to the provisions of section 212 (c) of the Act. (Does not apply to the Extended Voluntary Departure (EVD) class of temporary resident aliens.)

- B. Grounds for exclusion which may be waived:
- Listed by paragraph number of section 212 (a):
 - (1) Aliens who are mentally retarded.
 - (2) Aliens who are insane.
 - (3) Aliens who have suffered one or more attacks of insanity.
 - (4) Aliens afflicted with psychopathic personality, sexual deviation, or a mental defect.
 - (5) Aliens who are narcotic drug addicts or chronic alcoholics.
 - (6) Aliens who are afflicted with any dangerous contagious disease.
 - (7) Aliens who have a physical defect, disease or disability affecting their ability to earn a living.
 - (8) Aliens who are paupers, professional beggars or vagrants.
 - (11) Aliens who are polygamists or advocates polygamy.
 - (12) Aliens who are prostitutes or former prostitutes, or who have procured or attempted to procure or to import, prostitutes or persons for the purpose of prostitution or for any other immoral purpose, or aliens coming to the United States to engage in any other unlawful commercialized vice, whether or not related to prostitution.
 - (13) Aliens coming to the United States to engage in any immoral sexual act.
 - (16) Aliens who have been excluded from admission and departed and who again seek admission within one year from the date of such deportation.
 - (17) Aliens who have been arrested and deported and who reentered the United States within five years from the date of deportation.
 - (19) Aliens who have procured or have attempted to procure a visa or other documentation by fraud, or by willfully misrepresenting a material fact.
 - (22) Aliens who have applied for exemption or discharge from training or service in the Armed Forces of the United States on the ground of alienage and who have been relieved or discharged from such training or service.
 - (31) Aliens who at any time shall have, knowingly and for gain, encouraged, induced, assisted, abetted, or aided any other alien to enter or to try to enter the United States in violation of law.

Do any of the above classes apply to you?
 No Yes (If "Yes", attach an explanation, and any relevant documentation. Place mark (X) on the before ground(s) of exclusion.)

Do any of the above classes apply to you?
 No Yes (If "Yes", attach an explanation, and any relevant documentation and submit Form I-600. Place mark (X) on the before ground(s) of exclusion.)

20. If your native alphabet is other than Roman letters, write your name in your native alphabet.	21. Language of native alphabet
22. Signature of Applicant - I CERTIFY, under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. I hereby consent and authorize the Service to verify the information provided, and to conduct record checks pertinent to this application.	23. Date (Month/Day/Year)
24. Signature of person preparing form, if other than applicant. I DECLARE that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.	25. Date (Month/Day/Year)
26. Name and Address of person preparing form, if other than applicant (type or print).	27. Occupation

Form 2-573

A7-56
AT

U.S. Department of Justice
Immigration and Naturalization Service

OMB# 1118-000X
Application to Waive Exclusion Grounds

INSTRUCTIONS

Purpose of This Form.

This form is used to apply for a waiver of the exclusion provisions of the immigration law. This form lists the grounds of exclusion which may be waived. There are other grounds which cannot be waived. If you are not sure you are excludable, contact your local INS office or American Consulate for assistance.

Who May File; Initial Evidence Requirements.

General. If you have been found excludable under a ground listed below, you may be able to apply for a waiver. You must file your application with a written statement indicating why you believe you should be granted a waiver and with the other initial evidence required in the appropriate subsection. In your statement explain the beginning and end dates of your proposed trip(s) for which you seek a waiver as well as the reason(s) and purpose of the trip(s). Include any information and evidence you wish considered as to why you should be given the requested waiver.

In this application the term "immigrant" refers to a person applying for admission with an immigrant visa or applying for adjustment to permanent resident status. The term "permanent resident" refers to a person who is a lawful permanent resident of the United States, but does not qualify as a returning resident. The term "returning resident" refers to a person who has been a permanent resident for the past 7 consecutive years, is returning from a temporary trip abroad, was not deported, and who has not been convicted of an aggravated felony and served a term of imprisonment of at least 1 year for that felony.

Lack of valid passport or visa. If, when you apply to enter the U.S., you are excludable because you do not have a valid passport or valid nonimmigrant visa, you can apply for a waiver, but you must establish when filing your application that your trip was due to an unforeseen emergency. If, when you apply to enter the U.S. with an immigrant visa, it is found that the visa has expired or was issued in error, you can apply for a waiver, but you must establish when filing your application that you could not reasonably have known that the visa had expired or was issued in error.

Controlled substance trafficking. You are excludable if there is reason to believe you have been an illicit trafficker in any controlled substance, or have knowingly assisted, abetted, conspired or colluded with others in such trafficking. You may apply for a waiver if you are a nonimmigrant, returning resident or refugee/asylee. File the application with evidence of any past violations (see General Evidence), and evidence of rehabilitation (see General Evidence).

Prostitution or procurement. You are excludable if, within the past 10 years you have sought to enter the U.S. to engage in prostitution or in the procurement of prostitutes or to receive the proceeds of prostitution. Your past record can be waived. File your application with evidence of the violations (see General Evidence). If you are an immigrant or permanent resident, you must also file evidence that you are the spouse, parent, son, or daughter of a U.S. citizen or permanent resident. Also submit evidence of rehabilitation (see General Evidence).

Exercise of diplomatic immunity from prosecution. You are excludable if you ever exercised immunity from prosecution for a serious crime and as a consequence left the U.S., and did not subsequently submit fully to the jurisdiction of the U.S. court with respect to that offense. File your application with:
• evidence of the violations (see General Evidence).

- a statement from the prosecuting authority as to whether or not prosecution is planned or contemplated, and
- a detailed explanation of your decision to exercise diplomatic immunity to avoid full submission to the jurisdiction of a U.S. court. Include the date of your departure from the U.S. Also indicate if you have made any attempts at restitution (if applicable).
- Also file evidence that it has been at least 15 years since you committed any excludable offense, and evidence of rehabilitation (see General Evidence). Also see Extreme Hardship provision.

One or more other criminal violations. You are excludable if:

- you have ever committed a crime involving moral turpitude or violated any law or regulation relating to a controlled substance, unless either:
 - you committed the crime before you turned 18 and the crime was committed more than 5 years ago; or
 - the maximum possible penalty for the crime did not exceed imprisonment for one year, and you were sentenced to a term of 6 months or less; or
- you have ever committed 2 or more crimes for which the total sentence imposed was 5 years or more.

File your application with:

- evidence of the violations (see General Evidence), and
- Also file evidence that it has been at least 15 years since you committed any excludable offense, and evidence of rehabilitation (see General Evidence). Also see Extreme Hardship Provision.

You are not eligible for a waiver if you have been convicted of murder or a crime involving torture. An immigrant or permanent resident is also not eligible for a waiver of a violation of any law relating to controlled substances, other than one conviction of simple possession of 30 grams or less of marijuana.

Extreme Hardship Provision:

If you are excludable under the exercise of diplomatic immunity from prosecution, or one or more other criminal violations provisions, your waiver may be based on extreme hardship.

- You must submit evidence that you are the spouse, parent, son, or daughter of a U.S. citizen or lawfully admitted permanent residence alien. Also submit evidence of rehabilitation (see General Evidence) and evidence of the extreme hardship that would be caused to your U.S. citizen or lawfully resident spouse, parent, son or daughter.

Exportation from the United States of goods, technology, or sensitive information. You are excludable if you have violated any law prohibiting the export from the United States of goods, technology, or sensitive information. You may apply for a waiver of this provision if you are a nonimmigrant.

- Submit evidence of your violation (see General Evidence)

Terrorist activities. You are excludable if there is reason to believe you have ever engaged in terrorist activities. You may apply for a waiver if you are a nonimmigrant. File this application with:

- evidence that you are no longer engaged in terrorist activities,
- evidence that you have no intention of engaging in terrorist activities in the future.

DRAFT

A7-57
A7-

- If you have a mental disorder, a mental status evaluation detailing past and current mental disorders and current progress. The evaluation must include details of any associated behavior that has posed, or may pose, a threat to yourself or others.

Drug abuse or addiction. You are excludable if you are a drug abuser or addict. You may apply for a waiver if you are a nonimmigrant, returning resident, or refugee/asylee. File your application with a complete medical report (see General Evidence).

General Evidence.

Any foreign language document must be accompanied by a full English translation which the translator has certified as complete and correct, and by the translator's certification that he or she is competent to translate from the foreign language into English.

Family relationships. If you must file evidence that you are related to a U.S. citizen or permanent resident, you must file:

- a copy of that person's birth certificate, naturalization certificate, alien registration card, or other evidence of his or her status in the U.S., and
- a copy of a birth certificate, marriage certificate, adoption decree, or other document showing your relationship to that person.

Evidence of criminal violations. If you must file evidence of criminal violations, you must include:

- a completed Form G-825A biographic information sheet and a set of your fingerprints on Form FD-258;
- a national police report from the countries where you have resided, indicating your criminal history, or, in the absence of a national authority which provides such reports, official reports from the local police departments where you have resided for the last 5 years;
- full and complete copies of the court records for all crimes (other than minor traffic violations), indicating the crime committed, the sentence imposed, the sentence actually served, whether any probation or parole has been successfully completed, and copies of any pardon, clemency, expungement or similar action; and
- if you admit committing a crime but there are no official records, you must submit a statement detailing the crime committed.

Evidence of rehabilitation. If you must file evidence of rehabilitation, any police reports submitted must indicate your rehabilitation. You may also include any other evidence you wish to submit, such as letters attesting to your good moral character from individuals of high standing in the community, documentation of volunteer work in the community, etc.

Medical Report. If you must file a medical report, it must include: your complete medical examination, including a detailed medical history, a finding as to your current condition, a prognosis of your condition, the need for future medical follow-up treatment, and intended future continuing observation and treatment. You must also file a statement that you are aware of the warning signs of recurrence of the condition and will seek treatment and/or counseling. If you have had a physical or mental disorder which may pose a threat to yourself or others, the medical examination must also include:

- an analysis of the potential that the condition will recur and the estimated potential that it will pose a threat to you or to others;
- recommended action that can be taken to reduce the potential of the condition's recurrence; and
- observable symptoms that serve as a warning that the condition is recurring.

If a waiver is approved, and after admission to the U.S. you fail to comply with the terms, conditions and controls imposed on your admission, you may be subject to deportation.

General Filing Instructions.

Please answer all questions by typing or clearly printing in black ink. Indicate that an item is not applicable with "N/A". If an answer is "none", write "none". If you need extra space to answer any item, attach a sheet of paper with your name and your alien registration number (A#), if any, and indicate the number of the item to which the answer refers.

You must file your application with the required initial evidence. Your application must be properly signed and filed with the correct fee. If you are under 14 years of age, your parent or guardian may sign the application.

Where to File.

Except as noted below, you must file the application at the American Consulate or INS office where you are applying for a visa or other benefit. If you are applying for a waiver of previous exclusion, deportation, or removal, you must file the application at the INS office where the previous proceedings were held.

If you are filing this application with a change of status, adjustment of status, or immigrant or nonimmigrant petition, file this application at the same office as that separate application or petition.

If you are outside the U.S. and you are applying for a waiver of the 2-year foreign residence requirement, you must file the application with the INS office having jurisdiction over your last address in the U.S. If you qualify as a returning resident and believe that you may be excludable, you may apply for this waiver while in the U.S.

Fee.

The fee for this application is \$65.00 per waiver requested (per block checked in Part 2, Question 2 of the application form). The fee must be submitted in the exact amount. It cannot be refunded. DO NOT MAIL CASH. All checks and money orders must be drawn on a bank or other institution located in the United States and must be payable in United States currency. The check or money order should be made payable to the Immigration and Naturalization Service, except that:

- if you live in Guam, and are filing this application in Guam, make your check or money order payable to the "Treasurer, Guam."
- if you live in the Virgin Islands, and are filing this application in the Virgin Islands, make your check or money order payable to the "Commissioner of Finance of the Virgin Islands."

Checks are accepted subject to collection. An uncollected check will render the application and any document issued invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

Processing Information.

Acceptance. Any application that is not signed, or is not accompanied by the correct fee, will be rejected with a notice that the application is deficient. You may correct the deficiency and resubmit the application. However, an application is not considered properly filed until accepted by the Service.

Initial processing. Once an application has been accepted, it will be checked for completeness, including submission of the required initial evidence. If you do not completely fill out the form, or file it without required initial evidence, you will not establish a basis for eligibility, and we may deny your application.

Requests for more information or interview. We may request more information or evidence, or we may request that you appear at an INS office for an interview. We may also request that you submit the originals of any copy. We will return these originals when they are no longer required.

- evidence of rehabilitation (see General Evidence), and
- a detailed explanation of your reasons for coming to the United States.

Member of Communist or other totalitarian party. You are excludable if you are an immigrant and have been, a member of, or affiliated with, the Communist or any other totalitarian party, unless:

- such membership was involuntary, solely under age 18, by operation of law, or to obtain employment, food rations or other essentials of living; or
- your membership or affiliation terminated at least 2 years ago (5 years ago if the party still controls the government of a foreign state that is the totalitarian dictatorship).

File your application with:

- evidence that you are the parent, spouse, son, daughter, brother, or sister of a U.S. citizen or the spouse, son, or daughter of a permanent resident (see General Evidence),
- a statement giving the name of each Communist or other totalitarian party to which you belonged, explaining why and when you joined; dates of membership; any offices you held; why you remained a member and the degree to which you accepted the structure, goals, methods, and philosophy of the party; and, if you left, the reasons why you left.

Previous exclusion, deportation, or removal. You are excludable if within the past year you were excluded from admission, or if within the past 5 years you were deported or removed from the U.S. File your application with:

- copies of any documents you have relating to previous immigration proceedings, or a statement about the proceeding, including the date of exclusion, deportation or removal,
- evidence of any family relationship to a U.S. citizen or permanent resident (see General Evidence),
- evidence of any persons filed in your behalf.

Assisting illegal entry of others. You are excludable if you have ever encouraged, induced, assisted, abetted or aided any other alien to enter or to try to enter the U.S. in violation of law. File your application with:

- complete information about the violations (see General Evidence),
- if you are an immigrant seeking admission or adjustment of status as an immediate relative or immigrant other than under section 203(a)(4), or have been a permanent resident for less than 7 years, you must submit evidence that the alien you assisted was your spouse, parent, son, or daughter.

Use of fraudulent documents. You are excludable under Section 274C of the Immigration and Nationality Act if you have attempted to forge, counterfeit, alter or falsify make any document to satisfy a requirement of the Immigration and Nationality Act, or ever obtained, received, accepted, used or tried to use any such document or a document issued to another person; and, you are the subject of a final order of violation of section 274C. You may apply for a waiver if you are a nonimmigrant, returning resident, or refugee/asylee. File the application with a letter from the administrative law judge who imposed the civil penalty stating that he or she has no objection to the granting of this waiver. (Note: If you are excludable under this provision you are also excludable under misrepresentation or fraud in immigration proceedings and must also apply for a waiver of that provision.)

Misrepresentation or fraud in immigration proceedings. You are excludable if you have ever sought to procure, have procured, or seek to procure a visa or other document by fraud or willful misrepresentation. File your application with:

- copies of any documents you have relating to your attempt to procure the benefit through fraud or misrepresentation, and
- a statement describing the manner in which you attempted to gain such benefit.
- if you are an immigrant or permanent resident, also file evidence that you are the spouse, parent, son or daughter of a U.S. citizen or permanent resident (see General Evidence), or that the fraud occurred more than 10 years ago.

Ineligible for citizenship. You are excludable if you are permanently ineligible for citizenship. You may apply for a waiver if you are a nonimmigrant or returning resident. File a statement detailing the events which caused you to be ineligible for citizenship and explaining why you believe you should be granted the waiver.

Draft evasion. You are excludable if you ever departed the U.S. to avoid or evade training or service in the armed forces. You may apply for a waiver if you are a nonimmigrant, returning resident, or refugee/asylee. You must file the application with a statement giving the date of your departure and explaining your reasons for departing the U.S. to avoid military service.

Withholding child custody. You are excludable if you are detaining or withholding custody outside the U.S. of a U.S. citizen child from a person granted custody of the child by a United States court order. File your application with a copy of the court order giving custody to another person, and evidence that you are coming to the United States to comply with the court order.

Two-year foreign residence requirement. You are excludable if you held a nonimmigrant status and:

- your status was for the purpose of participating in a program funded, in whole or part, by an agency of the U.S. Government or the government of the country of your nationality or last residence; or
- when you acquired such status you were a national or resident of a country designated as requiring the services of persons engaged in the field of specialized knowledge or skill in which you were admitted to engage; or
- you acquired such status to receive graduate medical education or training.

File your application with:

- copies of the Form(s) I-94, Nonimmigrant Arrival/Departure Record, of yourself, your spouse, and your children, if applicable,
- copies of your IAP-66 forms issued by your program sponsors; and
- evidence that you are the spouse or parent of a U.S. citizen or permanent resident (see General Evidence) and that compliance with the requirement would impose exceptional hardship upon them, or
- evidence that compliance would result in your persecution on account of race, religion, or political opinion in the country to which you would have to return to comply with the requirement, or
- a recommendation from the USIA that the waiver be granted based on either:
 - a letter from the country of your citizenship or last residence that it has no objection to the waiver, or
 - a letter from an interested U.S. government agency.

If you are filing as a recipient under the AA-1 program, you are not required to obtain this waiver.

Communicable diseases. You are excludable if you have a communicable disease of public health significance. File your application with:

- a complete medical report (see General Evidence),
- evidence that no cost will be incurred by any government agency of the U.S. without that agency's prior consent due to your condition, and
- a completed Supplement A to this application (if you are other than an immigrant, you need only complete Section 1 of the supplement).

If you are an immigrant, also file evidence that you are the spouse, unmarried son or daughter, or parent of a U.S. citizen permanent resident, or alien with an immigrant visa (see General Evidence).

Physical or mental disorder that has posed or may pose a threat to you or others. You are excludable if you have a physical or mental disorder, and behavior associated with that disorder, that has posed, or may pose, a threat to yourself or others. File your application with:

- a complete medical report (see General Evidence), and

- evidence of rehabilitation (see General Evidence), and
- a detailed explanation of your reasons for coming to the United States.

Member in Communist or other totalitarian party. You are excludable if you are an immigrant and have been a member of, or affiliated with, the Communist or any other totalitarian party, unless:

- such membership was involuntary, solely under age 18, by operation of law, or to obtain employment, food rations or other essentials of living; or
- your membership or affiliation terminated at least 2 years ago (5 years ago if the party still controls the government of a foreign state that is the totalitarian dictatorship).

File your application with:

- evidence that you are the parent, spouse, son, daughter, brother, or sister of a U.S. citizen or the spouse, son, or daughter of a permanent resident (see General Evidence),
- a statement giving the name of each Communist or other totalitarian party to which you belonged, explaining why and when you joined; dates of membership; any offices you held; why you remained a member and the degree to which you accepted the structure, goals, methods, and philosophy of the party; and, if you left, the reasons why you left.

Previous exclusion, deportation, or removal. You are excludable if within the past year you were excluded from admission, or if within the past 5 years you were deported or removed from the U.S. File your application with:

- copies of any documents you have relating to previous immigration proceedings, or a statement about the proceeding, including the date of exclusion, deportation or removal,
- evidence of any family relationship to a U.S. citizen or permanent resident (see General Evidence),
- evidence of any petitions filed in your behalf.

Assisting illegal entry of others. You are excludable if you have ever encouraged, induced, assisted, abetted or aided any other alien to enter or to try to enter the U.S. in violation of law. File your application with:

- complete information about the violations (see General Evidence),
- if you are an immigrant seeking admission or adjustment of status as an immediate relative or immigrant other than under section 203(a)(4), or have been a permanent resident for less than 7 years, you must submit evidence that the alien you assisted was your spouse, parent, son, or daughter.

Use of fraudulent documents. You are excludable under Section 274C of the Immigration and Nationality Act if you have attempted to forge, counterfeit, alter or falsely make any document to satisfy a requirement of the Immigration and Nationality Act, or ever obtained, received, accepted, used or tried to use any such document or a document issued to another person; and, you are the subject of a final order for violation of section 274C. You may apply for a waiver if you are a nonimmigrant, returning resident, or refugee/asylee. File the application with a letter from the administrative law judge who imposed the civil penalty stating that he or she has no objection to the granting of this waiver. (Note: If you are excludable under this provision you are also excludable under misrepresentation or fraud in immigration proceedings and must also apply for a waiver of that provision.)

Misrepresentation or fraud in immigration proceedings. You are excludable if you have ever sought to procure, have procured, or seek to procure a visa or other document by fraud or willful misrepresentation. File your application with:

- copies of any documents you have relating to your attempt to procure the benefit through fraud or misrepresentation, and
 - a statement describing the manner in which you attempted to gain such benefit.
- If you are an immigrant or permanent resident, also file evidence that you are the spouse, parent, son or daughter of a U.S. citizen or permanent resident (see General Evidence), or that the fraud occurred more than 10 years ago.

Ineligible for citizenship. You are excludable if you are permanently ineligible for citizenship. You may apply for a waiver if you are a nonimmigrant or returning resident. File a statement detailing the events which caused you to be ineligible for citizenship and explaining why you believe you should be granted the waiver.

Draft evasion. You are excludable if you ever departed the U.S. to avoid or evade training or service in the armed forces. You may apply for a waiver if you are a nonimmigrant, returning resident, or refugee/asylee. You must file the application with a statement giving the date of your departure and explaining your reasons for departing the U.S. to avoid military service.

Withholding child custody. You are excludable if you are detaining or withholding custody outside the U.S. of a U.S. citizen child from a person granted custody of the child by a United States court order. File your application with a copy of the court order giving custody to another person, and evidence that you are coming to the United States to comply with the court order.

Two-year foreign residence requirement. You are excludable if you held a nonimmigrant status and:

- your status was for the purpose of participating in a program funded, in whole or part, by an agency of the U.S. Government or the government of the country of your nationality or last residence; or
- when you acquired such status you were a national or resident of a country designated as requiring the services of persons engaged in the field of specialized knowledge or skill in which you were admitted to engage; or
- you acquired such status to receive graduate medical education or training.

File your application with:

- copies of the Form(s) I-94, Nonimmigrant Arrival/Departure Record, of yourself, your spouse, and your children, if applicable,
- copies of your IAP-68 forms issued by your program sponsor; and
- evidence that you are the spouse or parent of a U.S. citizen or permanent resident (see General Evidence) and that compliance with the requirement would impose exceptional hardship upon them, or
- evidence that compliance would result in your persecution on account of race, religion, or political opinion in the country to which you would have to return to comply with the requirement, or
- a recommendation from the USIA that the waiver be granted based on either:
 - a letter from the country of your citizenship or last residence that it has no objection to the waiver, or
 - a letter from an interested U.S. government agency.

If you are filing as a recipient under the AA-1 program, you are not required to obtain this waiver.

Communicable disease. You are excludable if you have a communicable disease of public health significance. File your application with:

- a complete medical report (see General Evidence),
- evidence that no cost will be incurred by any government agency of the U.S. without that agency's prior consent due to your condition, and
- a completed Supplement A to this application (if you are other than an immigrant, you need only complete Section of the supplement).

If you are an immigrant, also file evidence that you are the spouse, unmarried son or daughter, or parent of a U.S. citizen, permanent resident, or alien with an immigrant visa (see General Evidence).

Physical or mental disorder that has posed or may pose threat to you or others. You are excludable if you have physical or mental disorder, and behavior associated with it, disorder, that has posed, or may pose, a threat to yourself or others. File your application with:

- a complete medical report (see General Evidence), and

Decision. An application for a waiver may be approved in the discretion of the Service. If your application is denied, you will be notified in writing of the reasons for the denial. A nonimmigrant waiver may be limited in time or purpose. If you apply for status as an immigrant, you may be eligible to apply for another waiver based upon the requirements for an immigrant waiver.

Penalties. If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are filing for, and may deny any other immigration benefit. In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

Privacy Act Notice. We ask for the information on this form, and associated evidence, to determine if you have established eligibility for the immigration benefit you are filing for. Our legal right to ask for this information is in 8 USC 1182. We may provide this information to other government agencies. Failure to provide this information, and any requested evidence, may delay a final decision or result in denial of your request.

Paperwork Reduction Act Notice. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. Accordingly, the reporting burden for this collection of information is computed as follows: (1) learning about the law and form, 15 minutes; (2) completing the form, 10 minutes; and (3) assembling and filing the application, 25 minutes, for an estimated average of 60 minutes per response. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to both the Immigration and Naturalization Service, 425 I Street, N.W., Room 2001D, Washington, D.C. 20526; and the Office of Management and Budget, Paperwork Reduction Project, OMB 1115-3000, Washington, D.C. 20503.

Form I-726 (06-09-99)

A7-61
DRAFT
A7-

U.S. Department of Justice
Immigration and Naturalization Service

OMB No. 1118-300X
Application to Waive Exclusion Grounds

START HERE - Please Type or Print

Part 1. Information about you.

Family Name		Given Name	USCIS Initial
Address - C/O			
Street Number and Name		Apt. #	
City	State or Province ZIP Code	Country	
Date of Birth (month/day/year)	Country of Birth	AP	
Social Security #			

Part 2. Application Type.

1. I am applying for status as: (check one)

- a. a nonimmigrant
- b. an immigrant
- c. a permanent resident
- d. a returning resident (certain permanent residents - see instructions)
- e. an asylee/refugee
- f. Other _____

2. I believe that I am excludable due to (check all that apply).

(Check the instructions to make sure you are eligible to apply for a waiver.)

- a. lack of a valid passport or visa
- b. controlled substance trafficking
- c. previous prostitution or procurement
- d. exercise of diplomatic immunity from prosecution
- e. one or more other criminal violations
- f. previous terrorist activities
- g. membership in communist or other totalitarian party
- h. previous exclusion, deportation, or removal
- i. assisting illegal entry of others
- j. use of fraudulent documents
- k. misrepresentation or fraud in immigration proceedings
- l. ineligible for citizenship
- m. draft evasion
- n. withholding child custody
- o. the two-year foreign residence requirement
- p. a communicable disease of public health significance
- q. a physical or mental disorder with associated harmful behavior
- r. drug abuse or addiction
- s. illegal exportation from the United States of goods, technology, or sensitive information

DRAFT

FOR INS USE ONLY

Returned	Receipt
Resubmitted	
Reloc Sent	
Reloc Rec'd	
<input type="checkbox"/> Applicant interviewed	

Waiver approved under Section:
(Check as many as apply)

- 212(c) int. resident w/7 YRS.
 - 212(d)(9)(A) N-1 exempt security
 - 212(d)(9)(B) N-1 security
 - 212(d)(4) N-1 passport/visa
 - 212(d)(11) LAFPI assisting illegal entry
 - 212(d) 2 YR. foreign resident. req.
 - 212(d) Health-related grounds
 - 212(d) Criminal grounds
 - 212(d) Misrepresentation
 - 212(d) Imm. passport & Visa
 - 212(d) Guam passport
 - 212(d)(2)(D)(i) Totalitarian Party Mem.
 - 212(a)(9)(A) Previously excluded
 - 212(a)(9)(B) Previously deported/removed
- Other: _____

Action Block

Form completed by
Attorney or Representative, if any
 Fill in box if G-26 is attached to represent the applicant

VOLAG/

ATTY State License #

Part 3. Processing Information.

Name (Last & maiden name)		Consulate where you will apply for a visa
Home telephone #	Work Telephone #	Country of Citizenship
IF IN THE U.S.	Date of Arrival (Month/Day/Year)	I-84#
	Current nonimmigrant status:	Expires on (Month/Day/Year)

(Attach a copy of your INS documentation, e.g. Alien Registration Card, I-84, etc). If a returning resident, on separate paper list each date of departure and return to the U.S. within the past 7 years)

Passport Information	Passport #	Date of issuance (Month/Day/Year)
	Country	Expiration Date (Month/Day/Year)
Nonimmigrant Visa Information	Nonimmigrant Visa #	Date of issuance (Month/Day/Year)
	Classification	Expiration Date (Month/Day/Year)
		Place of issuance

Part 4. Family Members. List any relative who lives in the U.S. (attach separate paper if additional space is needed).

1 Family name	Given name	Middle initial
Address		
Relationship	Immigration status	AF (if any)
2 Family name	Given name	Middle initial
Address		
Relationship	Immigration status	AF (if any)

Part 5. Signature. (Read the information on possible in the instructions before completing this section. If you are going to file this petition at an INS office in the United States, sign below. If you are going to file it at a U.S. Consulate or INS Office overseas, sign in front of a U.S. INS or Consulate official.)

I certify, or, if outside the United States, I swear or affirm, under penalty of perjury under the laws of the United States of America that this application, and the evidence submitted with it, is all true and correct. I authorize the release of any information from my records which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking.

Signature	Date
Signature of INS or Consular Officer	Print Name
	Date

Please Note: If you do not completely fill out this form or fail to submit required documents listed in the instructions, you may not be found eligible for the requested waiver and this application may be denied.

Part 6. Signature of person preparing form if other than above. (Sign below)

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature	Print Name	Date
-----------	------------	------

Firm Name and Address

A7-63
DRAFT

4. Endorsement of Local or State Health Officer. Endorsement signifies recognition of the physician or facility for the purpose of providing care for the communicable disease of public health significance. If the facility or physician who signed Section 3 is not in your health jurisdiction and is not familiar to you, you may wish to contact the health officer responsible for the jurisdiction of the facility or physician prior to endorsement:

Signature of Health Officer		Date:
Name of Health Officer (Printed or Typed)		
Enter the name and address of the local health department to which the "Notice of Arrival of Alien with a Communicable Disease of Public Health Significance" should be sent when the alien arrives in the U.S.		
Official Name of Department		
Street Number and Name		Apt #
City	State	Zip Code

INSTRUCTIONS FOR THIS SUPPLEMENT

Give your name at the top of the form and complete Sections 1 and 2. Attach a medical evaluation as explained in the instructions. After you have arranged for medical treatment in the U.S., have the physician or health facility that has agreed to provide treatment or observation complete Section 3.

If Section 3 is completed by a private physician or private health facility, have the appropriate local/state health official complete Section 4.

A7-64

DRAFT

A7-

SUPPLEMENT A - To Form I-724 (Instructions on reverse)

To be completed for applicants with communicable diseases of public health significance

Applicant's family name	Given Name	Middle Initial	Date of Birth (Month/Day/Year)
-------------------------	------------	----------------	--------------------------------

Section 1. Information about the communicable disease.

Write the name and briefly describe the communicable disease:

Section 2. Applicant Certification.

Upon admission to the U.S., I will:

1. Go directly to the physician or health facility named in Section 3;
2. Present all X-rays and other tests used in the visa medical examination to substantiate the diagnosis;
3. Submit to such examinations, treatment and medical follow up as may be required; and
4. Remain under the prescribed treatment or observation, whether on inpatient or outpatient basis, until discharged.

Signature of Applicant: _____ Date: _____

Address where I plan to live:

Street Number and Name	City	State	Apt #	Zip Code
------------------------	------	-------	-------	----------

Section 3. To be completed by physician or health facility. (May be executed by a private physician, health department, other public or private health facility, or military hospital).

I agree to supply any treatment or observation necessary for the proper management of the alien's communicable disease of public health significance. I agree to submit the appropriate CDC Form indicating presumptive diagnosis, test results, and plans for future care of the alien, to the health officer named in Section 4 within:

- 30 days after receipt of this form (if the alien has not reported), or
- 90 days after the alien has reported for care.

Note: For communicable diseases of public health significance, other than tuberculosis, I also agree to submit a copy of my evaluation of the alien's condition to the Division of Quarantine (DQ) Centers for Disease Control, Atlanta, Georgia 30333. Sanitary financial arrangements have been made. (This statement does not relieve the alien from submitting evidence to establish that he or she is not likely to become a public charge).

Name of Facility (Please type or print) (Indicate "X" whether local health department, other public or private facility, private practice, or military hospital)

- Local Health Department
- Other Public or Private Facility
- Private Practice
- Military Hospital

Signature of Physician _____ Date: _____

Name of Physician (printed or typed)

Address: Street Number	Street Name	Apt #
City	State	Zip Code

DRAFT

Purpose Of This Form.

This form is for a permanent resident to apply for a Declaration of Intention to become a citizen of the United States. A Declaration of Intention is not required for naturalization, but may be required by some States if you wish to engage in certain occupations or professions, or obtain various licenses.

Who May File.

If you are a lawful permanent resident over the age of 18, you may apply for a Declaration of Intention. You must be in the United States when you file this application.

Initial Evidence.

You must file your application with:

- A copy of your alien registration receipt card (I-151 or I-651) or other evidence that you are a permanent resident;
- Photos. You must submit 2 identical natural color photographs of yourself taken within 30 days of this application. The photos must have a white background, be unmounted, printed on thin paper and be glossy and unretouched. They should show a three-quarter frontal profile showing the right side of your face, with your right ear visible and with your head bare (unless you are wearing a headdress as required by a religious order of which you are a member). The photos should be no larger than 2 X 2 inches, with the distance from the top of the head to just below the chin about 1 and 1/4 inches. Lightly print your AF on the back of each photo with a pencil. Sign your full name in English on the front of each photograph in pen in such a manner as to not obscure your features.

Where To File.

File this application at the local Service office having jurisdiction over your place of residence.

Fee.

The fee for this petition is \$70.00. The fee must be submitted in the exact amount.

It cannot be refunded. **DO NOT MAIL CASH.** All checks and money orders must be drawn on a bank or other institution located in the United States and must be payable in United States currency. The check or money order should be made payable to the Immigration and Naturalization Service, except that:

- If you live in Guam, and are filing this application in Guam, make your check or money order payable to the "Treasurer, Guam."
- If you live in the Virgin Islands, and are filing this application in the Virgin Islands, make your check or money order payable to the "Commissioner of Finance of the Virgin Islands."

Checks are accepted subject to collection. An uncollected check will render the application and any document issued void. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

Processing Information.

Acceptance. Any application that is not signed or is not accompanied by the correct fee will be rejected with a notice that the application is deficient. You may correct the deficiency and resubmit the application. However, an application is not considered properly filed until accepted by the Service.

Initial processing. Once the application has been accepted, it will be checked for completeness, including submission of the required initial evidence. If you do not completely fill out the form, or file it without required initial evidence, you will not establish a basis for eligibility and we may deny your application.

Requests for more information. We may request more information or evidence, or we may request that you appear at an INS office for an interview. We may also request that you submit the originals of any copy. We will return these originals when they are no longer needed.

Decision. You will be notified in writing of the decision on your application. If your application is approved, the Declaration of Intention will be issued.

Penalties.

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are filing for, and may deny any other Immigration benefit. In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

Privacy Act Notice.

We ask for the information on this form, and associated evidence, to determine if you have established eligibility for the immigration benefit you are filing for. Our legal right to ask for this information is in 8 USC 1446. We may provide this information to other government agencies. Failure to provide this information, and any requested evidence, may delay a final decision or result in denial of your request.

Paperwork Reduction Act Notice.

We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this petition is as follows: (1) 5 minutes to learn about the law and form; (2) 5 minutes to complete the form; and (3) 35 minutes to assemble and file the petition; for an total estimated average of 45 minutes per petition. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to both the Immigration and Naturalization Service, 425 I Street, N.W., Room 5304, Washington, D.C. 20536; and the Office of Management and Budget, Paperwork Reduction Project OMB No. 1115-0008, Washington, D.C. 20503.

Form N-300

A7-66
A7-

START HERE - Please Type or Print

Part 1. Information about you.

Family Name		Given Name	Middle Initial
Address - in care of			
Street Number and Name		Apt. #	
City		State or Province	
Country		ZIP/Postal Code	
Date of Birth (Month/Day/Year)		Country of Birth	
Social Security #		A P	

Part 2. Processing Information.

Date you became a permanent resident (Month/Day/Year)

If you were admitted to the United States for Permanent Residence have you been absent for a period of six months or longer? No Yes - Attach a list of departure/arrival dates of all absences

Part 3. Signature. Read the information on penalties in the instructions before completing this section. You must be in the United States when you file this application. (Also sign the second page).

I declare to declare any intention to become a citizen of the United States. I certify under penalty of perjury under the laws of the United States of America that this application, and the evidence submitted with it, is all true and correct. I authorize release of any information from my records which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking.

Signature _____ Date _____

Part 4. Signature of person preparing form if other than above. (sign below)

I declare that I prepared this application at the request of the above person and it is based on all information of which I have any knowledge.

Signature _____ Date _____

Print your Name _____

Firm Name _____

Postal Address _____

FOR INS USE ONLY

Received	Receipt
Resubmitted	
Retco Sent	
Retco Rec'd	
<input type="checkbox"/> Applicant interviewed	
Action Block	
<p>To Be Completed by Attorney or Representative, if any</p> <p><input type="checkbox"/> Fill in box if 0-08 is attached to represent the applicant</p> <p>VOLAGE</p> <p>ATTY State License #</p>	

A7-67

A7-

Original to be retained by the Service -

Duplicate to be given to :

Family Name		Given Name	Middle Initial
Address - C/O			
Street Number and Name		Apt. #	
City		State or Province	
Country		ZIP/Postal Code	
Date of Birth (Month/Day/Year)		Country of Birth	
Social Security #		A B	

Affix
Photograph
Here

Not valid unless INS
Seal applied below

I am over the age of 18 years, have been lawfully admitted to the United States for permanent residence and am now residing in the United States pursuant to such admission.

I hereby declare my intention in good faith to become a citizen of the United States and I certify that the photographs affixed to the original and duplicate hereof are a likeness of me and were signed by me.

I do swear (affirm) that the statements I have made and the intentions I have expressed in this declaration of intention subscribed by me are true to the best of my knowledge and belief.

Signature of Applicant

Signature of Authorizing official

Form N-300

A7-68

A7-

**U.S. Department of Justice
Immigration and Naturalization Service**

**Request for Hearing on a Decision in Naturalization Proceedings
Under Section 336 of the Act**

INSTRUCTIONS

1. **Filing.** You must file your request for a hearing within 30 calendar days after service of the decision (33 days if your decision was mailed) with the Immigration and Naturalization Service (INS) office which made the unfavorable decision. The date of service is normally the date of the decision. Submit an original request only. Additional copies are not required.
 - A. if you live in Guam, make the check or money order payable to "Treasurer, Guam," or
 - B. if you live in the United States Virgin Islands, make the check or money order payable to the "Commissioner of Finance of the Virgin Islands."
2. **Fee.** You must pay \$110.00 to file this form. This form is to be used to appeal an unfavorable decision for an individual applicant. The fee will not be refunded, regardless of the action taken in your case. **DO NOT MAIL CASH.** All checks or money orders, whether United States or foreign, must be payable in U.S. currency at a financial institution in the United States. When a check is drawn on the account of a person other than yourself, write your name on the face of the check. If the check is not honored, INS will charge you \$5.00.

Pay by check or money order in the exact amount. Make the check or money order payable to "Immigration and Naturalization Service." However,
3. **Attorney or Representative.** You may, if you wish, be represented, at no expense to the government, by an attorney or other duly authorized representative. Notice of Entry of Appearance (Form G-28), that your attorney or representative must submit with a request for hearing, is available at INS offices.
4. **Brief.** You do not need to submit a brief in support of your request, but you may submit one. You may submit a simple written statement instead of a brief. You may also submit evidence. You must send your request and accompanying fee and documentation to the INS office which made the unfavorable decision. If you need more than 30 days, you must within the initial 30 day period, explain why in a separate letter attached to this form. INS may grant more time for good cause.

Form N-336

A7-69

A7

U.S. Department of Justice
Immigration and Naturalization Service

Request for Hearing on a Decision Naturalization Proceedings
Under Section 336 of the Act

Decision: <input type="checkbox"/> Grant <input checked="" type="checkbox"/> Denial	Fee:
--	------

1. In the Matter of: (Name of Naturalization Applicant)	File Number: A -
---	---------------------

2. I am filing a request for hearing on the decision dated:

3. Please check the one block which applies:
- I am not submitting a separate brief, statement or evidence.
 - I am submitting a separate brief, statement and/or evidence with this form.
 - I need _____ days to submit a brief, statement and/or evidence to INS. (May be granted only for good cause shown. Explain in a separate letter.)

4. Person Filing Request:

Name (Please type or print) _____

Address (Street Number and Name) _____ (Apt. Number) _____

(City) _____ (State) _____ (ZIP Code) _____

Signature _____ Date (Month/Day/Year) _____

I am an attorney or representative and I represent: You must attach a Notice of Entry or Appearance (Form G-28) if you are an attorney or representative and did not previously submit such a form.
(Person for whom you are appearing)

5. Briefly, state the reason(s) for this request for a hearing:

A7-70

Form N-336

A7-

INSTRUCTIONS

(Tear off this page and keep for your information before submitting this application.)

The evidence submitted in support of this application should be in the form of an official communication from the appropriate officer of the department or agency of the United States Government, or the public international organization, or affidavit or affidavits executed by the appropriate administrative official of the American institution or religious denomination or interdenominational mission by whom alien is, was, or will be employed or with whom he entered into the contract; or by the appropriate administrative official of the American firm or corporation, or subsidiary thereof, by whom the alien is, or will be employed. Where affidavit with respect to employment by such firm or corporation or subsidiary is made it should state:

- (a) the title of the official making the affidavit, the name of the firm or corporation in which he holds office and whether he has access to the records of the same.
- (b) whether the employing organization is an American firm or corporation engaged in the development of foreign trade and commerce of the United States, or subsidiary thereof.
- (c) the nature of the business which is conducted by the employing organization, church, religious denomination, or interdenominational mission.
- (d) if it is a corporation, the name of the State under laws of which it was organized, the date of incorporation, and that it is existent.
- (e) if it is a subsidiary (whether American or foreign) of an American firm or corporation, engaged in the development of foreign trade and commerce of the United States, the affidavit should be executed by an appropriate administrative official of the parent organization and should state the facts of ownership and or control of the subsidiary and the exact percentage of stock owned by the parent organization.
- (f) the facts of the applicant's employment, including the nature of the service to be performed by him, during the period or periods of absence to be considered.
- (g) whether the applicant will be engaged in the development of foreign trade and commerce of the United States, or the applicant's absence from the United States was or will be necessary to the protection of the property rights abroad of the employing firm or corporation or subsidiary during the period or periods of absence to be considered, or solely in his or her capacity as a regularly ordained clergyman, missionary, brother, nun, or sister; and in case of one employed by a public international organization the date when and place where applicant was first employed.

FEE. A fee of ninety dollars (\$90.00) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam". If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". All other applicants must make the check or money order payable to the "Immigration and Naturalization Service". When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which is drawn.

An alien admitted for permanent residence, who claimed or claims nonresident alien status under the income tax laws, may be regarded as having abandoned his/her residence in the United States and as having lost

47-11

IMPORTANT INFORMATION

his/her immigrant status under the immigration and naturalization laws. As a consequence he/she may be or become ineligible for naturalization or for preservation of residence. If you have claimed nonresident alien status, submit full explanation on a separate sheet.

An applicant is not eligible unless (1) he or she has been physically present and residing in the United States for an uninterrupted period (that is, without any absence whatever) of a least 1 year after lawful admission for permanent residence, and (2) the application is submitted to the Immigration and Naturalization Service before the applicant has been absent from the United States for a continuous period of 1 year. When furnishing information regarding absences in Item 3 the applicant **MUST SHOW EACH DEPARTURE AND RETURN** to the United States, including absences to foreign contiguous countries no matter how short. However, an applicant who has been absent or is to be absent from the United States solely in his or her capacity of clergyman, missionary, brother, nun, or sister, may complete the 1 year of uninterrupted physical presence after the period of absence and may submit the application even after an absence of more than 1 year.

The Immigration and Nationality Act also requires an applicant for naturalization to have been physically present within the United States for at least one-half of the period of 5 years (or 3 years, if the applicant qualifies under the citizen-spouse section) immediately preceding the date of filing a petition for naturalization. The granting of this application does not relieve the applicant for naturalization from this physical presence requirement during the 5- or 3-year period. However, persons who are employed by, or under contract with, the Government of the United States, and persons absent in their capacities as clergymen, missionaries, brothers, nuns, or sisters, are considered as physically present in the United States during the period of approved absence for the purpose of the 50% requirement (but not for the 1 year of physical presence referred to in the paragraph immediately above). The granting of this application also does not relieve the applicant from the necessity of proving to the satisfaction of the court in which he/she files his/her petition for naturalization that his/her absence from the United States has been for the purpose stated in the application.

Approval of this application will be only for the employment and conditions stated. Any changes of employment must be approved by a new application.

Approval of this application will not relieve you of the requirement to present a valid document for reentry into the United States.

Authority for collection of the information requested on this form is contained in Sections 316, 317 and 332 of the Immigration and Nationality Act (8 U.S.C. 1427, 1428 and 1443). Submission of the information is voluntary. The principal purpose for requesting the information is to determine whether an alien, who intends to be absent from the United States for a continuous period of a year or more, is eligible to preserve for naturalization purposes. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof, the Selective Service System, the Department of State, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of any application or petition for naturalization, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information collected which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in denial of the application to preserve residence for naturalization purposes.

Reporting Burden. Public reporting burden for this collection of information is estimated to average 16 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U. S. Department of Justice, Immigration and Naturalization Service, Room 5304, Washington, D.C. 20536; and to the Office of Management and Budget, Paperwork Reduction Project: OMB No. 1115-0014, Washington, D. C. 20503.

Form N-470

U.S. GOVERNMENT PRINTING OFFICE : 1993 O - 151-682

A7-72
A7-72

**APPLICATION TO PRESERVE RESIDENCE
FOR NATURALIZATION PURPOSES**

(Under Section 310(a) or 317, Immigration and Nationality Act)
(Please read instructions.)

Take or mail to:
Immigration and Naturalization Service

Fee Stamp	
Alien Registration No.	
Date of Birth	Place of Birth

1. My full true name is _____
2. My home address in the United States is _____
(Number and street) (City or town) (State) (Zip code)

My foreign address is will be _____
(Number and street) (City or town) (State) (Zip code)

3. I am an alien. I was lawfully admitted to the United States for permanent residence at _____
(Date) (Port of entry) under the name of _____
ON _____ (Date) (City) (State) (Year) ON the vessel _____
(Name of vessel that vessel ship number of arrival)

I have resided in and have been physically present in the United States for an uninterrupted period of at least _____ year(s) since such lawful entry. Since the date of my lawful entry, I have been absent from the United States as follows (include date of last departure if now abroad, and if necessary attach an additional sheet to show all absences):

Date of departure	Date and port of return	Name of vessel	Purpose of trip

4. Since becoming a permanent resident, have you ever filed an income tax return as a nonresident alien or otherwise claimed or received benefits as a nonresident alien under the income tax laws? Yes No

5. I am, will be, was employed as, or under contract as, _____
by _____ (Name of employer)
address _____ (Number and street) (City or town) (State) (Zip code)
Such employment of contract necessary will necessitate my presence in _____ (State) (Country or community)
from _____ (Date) (Year) to _____ (Date) (Year)

6. My absence from the United States for such periods is, will be, was:
 on behalf of the United States Government.
 for the purpose of carrying on scientific research on behalf of an American institution of research.
 for the purpose of engaging in the development of foreign trade and commerce of the United States on behalf of an American firm or corporation or a subsidiary thereof engaged in the development of such trade and commerce.
 necessary to the protection of the property rights abroad of an American firm or corporation engaged in the development of foreign trade and commerce of the United States.
 on behalf of a public international organization of which the United States is a member, by which I was first employed on _____ IP
 solely in my capacity as a clergyman, missionary, brother, son, or sister.

7. In support of the foregoing statement of facts I submit the following documents _____
(Description)

8. I respectfully request that you find my absence under the above-stated conditions to be in compliance with the provisions of Sec 316(b) or 317 of the Immigration and Nationality Act.

9. The following lawful permanent resident members of my immediate family (spouse and/or child(ren) only) will be residing abroad as dependent members of my household, whom I also desire to receive the benefits hereunder:

Name	"X" Number	Relationship	Marital Status

Signature of Person Preparing Form, if Other Than Applicant
I declare that this document was prepared by me or at the request of the applicant and is based on all information of which I have any knowledge.
SIGNATURE _____
ADDRESS _____
Form No. 970

Signature of Applicant
I hereby declare that the above statements are true and correct to the best of my knowledge and belief.
COMPLETE SIGNATURE OF APPLICANT _____
MAILING ADDRESS (Number, Street, City, State, and Zip Code) DATE _____

AT-73

EXAMINER'S REPORT

I have investigated this application for benefits under Section [(316)(a) (317)] of the Immigration and Nationality Act and find that:

1. The applicant (was) (was not) lawfully admitted for permanent residence, his status (having) (not having) changed.
2. Applicant for benefits of Section 316(b):
 - (a) (Has) (Has not) resided in and been physically present in the United States for an uninterrupted period of at least one year after lawful admission for permanent residence.
 - (b) (Has) (Has not) filed the application before being absent from the United States for a continuous period of one year.
 - (c) [(Is) (Is not) (Will be) (Will not be)] employed or under contract as alleged in this application; and the employer or contractor named in this application (is) (is not) engaged in the type of business described in Section 316(b).
3. Applicant for the benefits of Section 317:
 - (a) (Has) (Has not) been physically present and residing in the United States for an uninterrupted period of at least one year after lawful admission for permanent residence.
 - (b) [(Is) (Is not) (Will be) (Will not be)] absent solely for the purpose alleged in this application; and the denomination or organization named in this application (is) (is not) of the class described in Section 317.
4. Supplemental report or order (is) (is not) attached.
5. I recommend that the application be (granted) (denied).

.....
(Signature of Examiner)
.....
(Date)
.....
(Date)

ORDER

It is Ordered that the within named applicant be granted the benefits applied for in this application to cover absence from the United States from the date stated therein to an indefinite date thereafter so long as (s)he remains in the employment and is absent for the purpose alleged therein.

.....
(Printed Name)
.....
(Date)

Form N-470

A7-74
A7-

INSTRUCTIONS

Purpose of This Form.

This form is used to apply for a replacement Declaration of Intention, Naturalization Certificate, Certificate of Citizenship, or Repatriation Certificate, or to apply for a special certificate of naturalization as a U.S. citizen to be recognized by a foreign country.

Who May File.

If you have been issued a Declaration of Intention, Naturalization Certificate, Certificate of Citizenship, or Repatriation Certificate which has been lost, mutilated, or destroyed, or if your name has been changed by marriage or by court order after the document was issued and you wish a document in the new name, you may apply for a replacement.

If you are a naturalized citizen who desires to obtain recognition as a citizen of the United States by a foreign country, you may apply for a special certificate for that purpose.

General Filing Instructions.

Please answer all questions by typing or clearly printing in black ink. Indicate that an item is not applicable with "N/A". If an answer is "none," please so state. If you need extra space to answer any item, attach a sheet of paper with your name and your A#, if any, and indicate the number of the item.

Every application must be properly signed and filed with the correct fee. If you are under 14 years of age, your parent or guardian may sign the application in your behalf.

Initial Evidence Requirements.

- You must file your application with the following evidence:
 - You must submit two color photographs of yourself taken within 90 days of this application. These photos must be glossy, unretouched and unmounted, and have a white background. Dimension of the face should be about 1 inch from chin to top of hair. Face should be 3/4 frontal view of right side with right ear visible. Using pencil or ball pen, lightly print name and A#, if any, on the back of each photo. This requirement may be waived by the Service if you can establish that you are confined because of age or physical infirmity.
- If you are applying for replacement of a mutilated document, you must attach the mutilated document.
- If you are applying for a new document because your name has been changed, you must submit the original Service document and a copy of the marriage certificate or court order showing the name change.
- If you are applying for a special certificate of naturalization, you must attach a copy of your naturalization certificate.

Copies.

If these instructions state that a copy of a document may be filed with this application, and you choose to send us the original, we may keep that original for our records.

Where to File.

File this application at the local Service office having jurisdiction over your place of residence.

Fee.

The fee for this application is \$50.00, except there is no fee if you check block 2(a) of Part E. The fee must be submitted in the exact amount. It cannot be refunded. **DO NOT MAIL CASH.**

Checks and money orders must be drawn on a bank or other institution located in the United States and must be payable in United States currency. The check or money order should be made payable to the Immigration and Naturalization Service, except that:

- If you live in Guam, and are filing this application in Guam, make your check or money order payable to the "Treasurer, Guam."
- If you live in the Virgin Islands, and are filing this application in the Virgin Islands, make your check or money order payable to the "Commissioner of Finance of the Virgin Islands."

Checks are accepted subject to collection. An uncollected check will render the application and any document issued invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

Processing Information.

Rejection. Any application that is not signed or is not accompanied by the correct fee will be rejected with a notice that the application is deficient. You may correct the deficiency and resubmit the application. However, an application is not considered properly filed until accepted by the Service.

Initial processing. Once the application has been accepted, it will be checked for completeness, including submission of the required initial evidence. If you do not completely fill out the form, or file it without required initial evidence, you will not establish a basis for eligibility and we may deny your application.

Requests for more information or interview. We may request more information or evidence or we may request that you appear at an INS office for an interview. We may also request that you submit the originals of any copy. We will return these originals when they are no longer required.

Decision. If you establish eligibility for the document, your application will be approved and the document issued. A special certificate of naturalization will be forwarded to the Department of State for delivery to a foreign government official. If your application is denied, you will be notified in writing of the reasons for the denial.

Penalties.

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are filing for, and may deny any other immigration benefit. In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

Privacy Act Notice.

We ask for the information on this form, and associated evidence, to determine if you have established eligibility for the immigration benefit you are filing for. Our legal right to ask for this information is in 5 USC 5426, 1440, 1442, 1445, 1446, and 1448. We may provide this information to other government agencies. Failure to provide this information, and any requested evidence, may delay a final decision or result in denial of your request.

Paperwork Reduction Act Notice.

We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. Accordingly, the reporting burden for this collection of information is computed as follows: (1) reviewing about the law and form, 10 minutes; (2) completing the form, 14 minutes; and (3) assembling and filing the application, 25 minutes, for an estimated average of 55 minutes per response. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to both the Immigration and Naturalization Service, 425 I Street, N.W., Room 5204, Washington, D.C. 20526; and the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1118-0018, Washington, D.C. 20503.

Form N-535

77-75
A7

WRITE HERE - Please Type or Print

Part 1. Information about you.

Family Name		Given Name	Middle Name
Address - in care of			
Street # and Name		Apt #	
City or town		State or Province	
Country		Zip or Postal Code	
Date of Birth (Month/Day/Year)		Country of Birth	
Certificate #		A #	

Part 2. Type of application.

1. I hereby apply for (check one)
- a. a new Certificate of Citizenship
 - b. a new Certificate of Naturalization
 - c. a new Certificate of Repatriation
 - d. a new Declaration of Intention
 - e. a special Certificate of Naturalization to obtain recognition of my U.S. citizenship by a foreign country
2. Basis for application: (If you checked other than "a" in Part 1, check one)
- a. my certificate is/was lost, stolen or destroyed (attach a copy of the certificate if you have one). Explain when, where and how _____
 - b. my certificate is mutilated (attach the certificate)
 - c. my name has been changed (attach the certificate)
 - d. my certificate or declaration is incorrect (attach the documents)

Part 3. Processing information.

SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	Height	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced
My last certificate or declaration of intention was issued to me by _____		
INS Office or Name of court		Date (Month/Day/Year)
Name in which the document was issued: _____		
Other names I have used (if none, so indicate): _____		

Since becoming a citizen, have you lost your citizenship in any manner?
 No Yes (attach an explanation)

Part 4. Complete if applying for a new document because of name change.

- How changed to present name by: (check one)
- Marriage or Divorce on (month/day/year) _____ (attach a copy of marriage or divorce certificate)
 - Court Decree (month/day/year) _____ (attach a copy of the court decree)

FOR INS USE ONLY

Returned	Receipt
Resubmitted	
Reloc Sent	
Reloc Rec'd	
<input type="checkbox"/> Applicant interviewed	

- Declaration of Intention verified by _____
- Citizenship verified by _____

Remarks

Action Block

To Be Completed by Attorney or Representative, if any
 FE in box if G-82 is attached to represent the applicant

VOLUNTARY
 ATTY State License #

Part 5. Complete if applying to correct your document.

If you are applying for a new certificate or declaration of intention because your current one is incorrect, explain why it is incorrect and attach copies of the documents supporting your request.

Part 6. Complete if applying for a special certificate of recognition as a citizen of the U.S. by the Government of the foreign country.

Name of Foreign Country _____
Information about official of the country who has requested this certificate (if known)
Name _____ Official title _____
Government Agency _____
Address: Street # _____ Room # _____
Name _____
City _____ State or Province _____
Country _____ Zip or Postal Code _____

Part 7. Signature. Read the information on penalties in the instructions before completing this part. If you are going to file this application at an INS office in the U.S., sign below. If you are going to file it at a U.S. INS office overseas, sign in front of a U.S. INS or consular official.

I certify, or, if outside the United States, I swear or affirm, under penalty of perjury under the laws of the United States of America that this application, and the evidence submitted with it, is all true and correct. I authorize the release of any information from my records with the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking.

Signature _____ Date _____
Signature of INS or Consular Official _____ Print Name _____ Date _____

Please Note: If you do not completely fill out this form, or fail to submit required documents listed in the instructions, you may not be found eligible for a certificate and this application may be denied.

Part 8. Signature of person preparing form if other than above. (sign below)

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature _____ Print Your Name _____ Date _____

Name _____ Address _____

A7-77

Form N-565

★ U.S. GPO: 1994-301-154/32718

A7

APPLICATION FOR CERTIFICATE OF

(Use only this form when applying for citizenship.)

This form is not for children adopted by United States Citizens. It may be used for children adopted by alien parents who were later naturalized. It must be properly filled in. Print the answers in ink or use typewriter. If you do not have enough space for any answer or if the instructions tell you to use a separate sheet of paper, use another sheet of paper, giving the answer the same number as the number of this question, and attach it to the application. You will later be required to appear for examination before an officer of the Immigration and Naturalization Service. You may be requested to bring a relative or other witness to provide additional testimony.

AGE OF APPLICANT - Applicants 14 years of age or over must sign their full names, but only in the space provided on page 3 of this application. If under 14 years, only the parent or guardian must sign his or her name and only in the space provided on page 3.

FEES - A fee of ninety dollars (\$90) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

PHOTOGRAPHS - You are required to send with this application three identical unglazed photographs of yourself taken within 30 days of the date of this application. These photographs must be 2 x 2 inches in size and the distance from top of head to point of chin should be approximately 1 1/4 inches; must not be pasted on a card or mounted in any other way; must be on thin paper, have a light background, and clearly show a front view of your face without hat, spectacles, glasses, or full-length portraits or machine-made photographs will not be accepted. **YOUR PHOTOGRAPHS MUST NOT BE SIGNED**, but you should print your name and alien registration number, if any, in the center of the back of each photograph lightly with a soft lead pencil, taking care not to smudge the photograph. They may be in natural color or in black and white, but black and white photographs which have been tinted or otherwise colored are not acceptable.

FACTS CONCERNING ARRIVAL IN THE UNITED STATES - Detailed information should be given in Statement 3 regarding your first arrival in the United States for permanent residence in this country. The information regarding the number of the passport and date and place of issuance does not need to be given unless you traveled on a United States passport at that time. If you do not know the exact date of arrival or name of the vessel or port and cannot obtain this information, give the facts of your arrival to the best of your ability. If you have an alien registration receipt card, immigrant identification card, ship's card, or baggage labels, they will help you to give this information.

NAME TO BE SHOWN ON CERTIFICATE - The certificate will be issued only in a name that you have a legal right to use.

DOCUMENTS - If your birth abroad, or the birth abroad of any person through whom citizenship is claimed, was registered with an American Consul there, submit with this application any registration form that was issued. If any required documents were submitted to and **RETAINED** by the American Consul in connection with such registration, or in connection with the issuance of a United States passport or in any other official matter, and you wish to use such documents in connection with this application instead of submitting duplicate copies, merely list the documents in Statement 14 of the application and give the location of the Consulate. If you wish to make similar use of required documents contained in any Immigration and Naturalization Service file, list them in Statement 14 and identify the file by name, number, and location. Otherwise, the documents as mentioned in the box on page 6 applicable to your case (see over) must accompany your application and, for any required document not furnished, you must explain why; what efforts you have made to get it; and, if possible, enclose a statement from the official custodian of such records showing that the document is not available. You should also forward for consideration, in lieu of that document, a record or the affidavits described under **SECONDARY EVIDENCE**, on the reverse of this page.

If any person through whom citizenship is claimed became a citizen through his or her parent(s), but does not have a certificate of citizenship (with a number preceded by an A or AA) in his or her own name, communicate with the Immigration and Naturalization Service for information as to additional documents which must be submitted.

Form N - 609 (Rev. 64/11/91) Y

A7-78
A7-

REQUIRED DOCUMENTS (Continued)

IF CLAIMING CITIZENSHIP THROUGH FATHER (OR BOTH PARENTS)

1. Applicant's birth certificate.
2. Marriage certificate(s) of applicant's parents.
3. If applicant's parents were married before their marriage to each other, death certificate or divorce decree showing the termination of any previous marriage of each parent.
4. If applicant is a woman and has ever been married, her marriage certificate(s).
5. If applicant's parent(s) became citizen(s) at birth, birth certificate(s) of parent(s).
6. Death certificate(s) of applicant's parent(s), if deceased.
7. If applicant is an adopted child, applicant's adoption decree.

IF CLAIMING CITIZENSHIP THROUGH MOTHER

1. Applicant's birth certificate.
2. Marriage certificate(s) of applicant's mother.
3. If applicant is a woman and has ever been married, her marriage certificate(s).
4. If applicant's mother became a citizen of the United States at birth, mother's birth certificate.
5. If applicant is claiming citizenship through mother's marriage before September 22, 1922, to applicant's stepfather, death certificate or divorce decree showing termination of any previous marriage(s) of mother and stepfather.
6. If applicant is claiming citizenship through mother's marriage before September 22, 1922, to applicant's stepfather and stepfather became a citizen of the United States at birth, stepfather's birth certificate.
7. Death certificate of applicant's mother, if deceased.

IF CLAIMING CITIZENSHIP THROUGH HUSBAND

(NOTE: APPLICABLE ONLY IF MARRIAGE OCCURRED PRIOR TO SEPTEMBER 22, 1922.)

1. If husband through whom citizenship is claimed became a citizen of the United States at birth, husband's birth certificate.
2. Applicant's marriage certificate(s).
3. If either applicant or the husband through whom she is claiming citizenship was married before their marriage to each other, death certificate or divorce decree showing the termination of each such prior marriage(s).
4. If applicant's marriage to the husband through whom she is claiming citizenship has terminated, death certificate or divorce decree showing such a termination.

SECONDARY EVIDENCE

If it is not possible to obtain any one of the required documents or records shown above, the following may be submitted for consideration:

1. *Baptismal certificate*. - A certificate under the seal of the church where the baptism occurred, showing date and place of the child's birth, date of baptism, the names of the godparents, if known.
2. *School record*. - A letter from the school authorities having jurisdiction over school attended (preferably the first school), showing the date of admission to the school, child's date of birth or age at that time, place of birth, and the names and places of birth of parents, if shown in the school records.
3. *Census record*. - State or Federal census record showing the name(s) and place(s) of birth, and date(s) of birth or age(s) of the person(s) listed.
4. *Affidavits*. - Notarized affidavits of two persons who were living at the time, and who have personal knowledge, of the event you are trying to prove - for example, the date and place of a birth, marriage, or death. The persons making the affidavits may be relatives and need not be citizens of the United States. Each affidavit should contain the following information regarding the person making the affidavit: His (Her) full name and address; date and place of birth; relationship to you, if any; full information concerning the event; and complete details concerning how he (she) acquired knowledge of the event.

Form N-600

47-79

17

Reporting Burden

The reporting burden for this collection of information is estimated to average one (1) hour per response, including the time for reviewing instructions, gathering the data needed, reviewing the data collected, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Management and Administration Service (Room 2011), Washington, D.C. 20536; and to the Office of Management and Budget, Paperwork Reduction Project: OMB No. 1115-0018, Washington, D.C. 20503.

Form N-600

A7-80

A7-

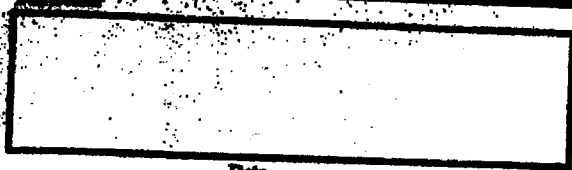
Authority for collection of information requested on this form is contained in Section 332 and 341 of the Immigration and Nationality Act (U.S.C. 8 and 1432). The principal purpose for requesting the information is for use by an assigned officer of the Immigration and Naturalization Service in the applicant's claim in Federal Court proceedings. The information requested may be a matter of routine and information is available from the State, state, local or foreign consular and reporting agencies, the Department of Defense, including any other Federal agency, the Department of State, the Department of Treasury, and the Department of Commerce. Certain information is requested from private organizations in the processing of an application or petition for naturalization, or during the course of an investigation. Information requested from the Immigration and Naturalization Service to carry out its functions, information obtained which indicates a violation of the laws of the United States, civil, criminal, or regulatory in nature, may be referred, as it relates to, to the appropriate agency, whether Federal, state, local or foreign, charged with responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in a denial of the application.

Form N-600

A7-81

APPLICATION FOR CERTIFICATE OF CITIZENSHIP

DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE



(Print or type) _____ Date _____
 (Full, True Name, without Abbreviations) (Middle name, if any)

 (Apartment number, Street address, and if appropriate, "in care of")

 (City) (Country) (State) (ZIP Code)

 (Telephone Number) _____

ALIEN REGISTRATION
No. _____

(SEE INSTRUCTIONS. BE SURE YOU UNDERSTAND EACH QUESTION BEFORE YOU ANSWER IT.)

I hereby apply to the Commissioner of Immigration and Naturalization for a certificate showing that I am a citizen of the United States of America.

(1) I was born in _____ on _____
 (City) (State or Country) (Month) (Day) (Year)

(2) My personal description is: Sex _____; complexion _____; color of eyes _____; color of hair _____; height _____ feet _____ inches;
 weight _____ pounds; visible distinctive marks _____

Marital status: Single; Married; Divorced; Widow(er).

(3) I arrived in the United States at _____ on _____
 (City and State) (Month) (Day) (Year)
 under the name _____ by means of _____
 (Name of ship or other means of arrival)

on U. S. Passport No. _____ issued to me at _____ on _____
 (Place of issue)
 on an Immigrant Visa. Other (specify) _____

(4) FILL IN THIS BLOCK ONLY IF YOU ARRIVED IN THE UNITED STATES BEFORE JULY 1, 1924.

(a) My last permanent foreign residence was _____
 (City) (Country)

(b) I took the ship or other conveyance to the United States at _____
 (City) (Country)

(c) I was coming to _____ at _____
 (Name of person in the United States) (City and State where this person was living)

(d) I traveled to the United States with _____
 (Name of passenger or relatives with whom you traveled, and their relationship to you, if any)

(5) Have you been out of the United States since you first arrived? Yes No; If "Yes" fill in the following information for every absence.

DATE DEPARTED	DATE RETURNED	Name Of Airlines Or Other Means Used To Return To The United States	Port Of Return To The United States

(6) I _____ filed a petition for naturalization. (If "have" attach full explanation.)
 (have) (have not)

TO THE APPLICANT. - Do not write between the double lines below. Continue on next page.

ARRIVAL RECORDS EXAMINED

Card index _____
 Index books _____
 Manifests _____

ARRIVAL RECORD FOUND

Place _____ Date _____
 Name _____
 Manner _____
 Marital status _____ Age _____

(Signature of person making search) _____

(1) AT-82
AT-

(CONTINUED FROM PAGE 1)

(7) I claim United States citizenship through my (check whichever applicable) father; mother; both parents;

my mother; husband

(8) My father's name is _____; he was born on _____
at _____; and resides at _____
(City) (State or County) (Month) (Day) (Year) (Street address, city and State or country, if dead, write "dead" and date of death.)

He became a citizen of the United States by birth; naturalization on _____
in the _____ Certificate of Naturalization No. _____
(Name of court, city and State) (Month) (Day) (Year)

through his parent(s), and _____ issued Certificate of Citizenship No. A or AA _____
(was) (was not)

(If known) His former Alien Registration No. was _____

He _____ lost United States citizenship. (If citizenship lost, attach full explanation.)
(was) (was not)

He resided in the United States from _____ to _____; from _____ to _____; from _____ to _____;
from _____ to _____; from _____ to _____; I am the child of his _____ marriage.
(Year) (Year) (Year) (Year) (Year) (Year) (Year) (Year) (1st, 2d, 3d, etc.)

(9) My mother's present name is _____; her maiden name was _____;
she was born on _____; at _____; she resides
(Month) (Day) (Year) (City) (State or country)

at _____ She became a citizen of the
(Street address, city, and State or country, if dead write "dead" and date of death.) United States by birth; naturalization under the name of _____

on _____ in the _____
(Month) (Day) (Year) (Name of court, city, and State)

Certificate of Naturalization No. _____; through her parent(s), and _____ issued Certificate of
Citizenship No. A or AA _____ (If known) Her former Alien Registration No. was _____
(was) (was not)

She _____ lost United States citizenship. (If citizenship lost, attach full explanation.)
(was) (was not)

She resided in the United States from _____ to _____; from _____ to _____; from _____ to _____;
from _____ to _____; from _____ to _____; I am the child of her _____ marriage.
(Year) (Year) (Year) (Year) (Year) (Year) (Year) (Year) (1st, 2d, 3d, etc.)

(10) My mother and my father were married to each other on _____ at _____
(Month) (Day) (Year) (City) (State or country)

(11) If claim is through adoptive parent(s):
I was adopted on _____ in the _____
(Month) (Day) (Year) (Name of Court)

at _____ by my _____ who were not United States citizens at that time.
(City or town) (State) (County) (mother, father, parents)

(12) My _____ served in the Armed Forces of the United States from _____ to _____ and _____
(father) (mother) (Date) (Date) (was) (was not)

honorably discharged.

(13) I _____ lost my United States citizenship. (If citizenship lost, attach full explanation.)
(was) (was not)

(14) I submit the following documents with this application:

Nature of Document	Names of Persons Concerned
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Form N-600

A7-83
(2)

Form N-600 (Rev. 1-22-64)

Department of Justice, Immigration and Naturalization Service

NAME	ADDRESS	CITY	STATE	ZIP

(16) Fill in this block only if you are now or ever have been a married woman. I have been married _____ time(s), as follows:

DATE MARRIED	NAME OF HUSBAND	CITIZENSHIP OF HUSBAND	IF MARRIAGE HAS BEEN TERMINATED:	
			Date Marriage Ended	How Marriage Ended (Divorced or Annulled)

(17) Fill in this block only if you claim citizenship through a husband. (Marriage must have occurred prior to September 22, 1922.)

Name of citizen husband _____; he was born on _____ at _____; and resides at _____ He became a citizen of the United States by birth; naturalization on _____ in the _____ Certificate of Naturalization No. _____; through his parent(s), and _____ issued Certificate of Citizenship No. A or AA _____ He _____ since lost United States citizenship. (If citizenship lost, attach full explanation.) I am of the _____ race. Before my marriage to him, he was married _____ time(s), as follows:

DATE MARRIED	NAME OF WIFE	IF MARRIAGE HAS BEEN TERMINATED:	
		Date Marriage Ended	How Marriage Ended (Divorced or Annulled)

(18) Fill in this block only if you claim citizenship through your stepfather. (Applicable only if mother married U.S. Citizen prior to September 22, 1922.)

The full name of my stepfather is _____; he was born on _____ at _____ and resides at _____ He became a citizen of the United States by birth; naturalization on _____ in the _____ Certificate of Naturalization No. _____; through his parent(s), and _____ issued Certificate of Citizenship No. A or AA _____ He _____ since lost United States citizenship. (If citizenship lost, attach full explanation.) He and my mother were married to each other on _____ My mother is of the _____ race. She _____ issued Certificate of Citizenship No. A _____ Before marrying my mother, my stepfather was married _____ time(s), as follows:

DATE MARRIED	NAME OF WIFE	IF MARRIAGE HAS BEEN TERMINATED:	
		Date Marriage Ended	How Marriage Ended (Divorced or Annulled)

(19) I _____ previously applied for a certificate of citizenship on _____ at _____

(20) Signature of person preparing form. If other than applicant, I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

SIGNATURE: _____

ADDRESS: _____

DATE: _____

(Sign Here) _____
Signature of applicant or parent or guardian

Form N-600

(7) A7-84

Do not fill in or sign anything on this page

AFFIDAVIT

(Signature of applicant, parent, guardian)	(Officer's Signature and Title)
--	---------------------------------

REPORT AND RECOMMENDATION ON APPLICATION

On the basis of the documents, records, and persons examined, and the identification upon personal appearance of the underage beneficiary, I find that all the facts and conclusions set forth under oath in this application are true and correct; that the applicant did derive or acquire United States citizenship on _____ (Month) (Day) (Year) through _____

and that (s)he _____ been expatriated since that time. I recommend that this application be _____ and that _____ Certificate of citizenship be _____ issued in the name of _____

In addition to the documents listed in Item 14, the following documents and records have been examined:

Person Examined	Address	Relationship to Applicant	Date Testimony Heard

Supplementary Report(s) No.(s) _____ Attached.
Date _____, 19 _____

I do _____ concur in the recommendation

Date _____, 19 _____

(Signature of District Director or Officer in Charge)

Form 81-600

(9)
A7-95

START HERE - Please Type or Print

Part A. Information about adopted child.

Last Name		First	Middle
Address:			
Street Number and Name			Apt. #
City		State or Province	
Country		ZIP/Postal Code	
Date of Birth (Mo/Day/Yr)		Place of Birth (City, Country)	
Social Security #		AP	
Personal Description:			
Sex	<input type="checkbox"/> M <input type="checkbox"/> F	Height Ft. _____ In. _____	
Mental Status		Visible Marks or Scars	
Information about Entry:			
Name of Entry (if different from Item A)			
Date of Entry		Place of Entry	
Date of Adoption (Mo/Day/Yr)		Place of Adoption (City, Country)	

Part B. Information about the Adoptive Parents (If there is only one parent write "None" in place of the name of the parent which does not apply.)

Last Name of Adoptive Father		First	Middle
U.S. Citizen by:			
<input type="checkbox"/> Birth in the U.S.			
<input type="checkbox"/> Birth abroad to USC parents (List certificate of citizenship number or passport number)			
<input type="checkbox"/> Naturalized or derived after birth (List naturalization certificate number)			
Last Name of Adoptive Mother		First	Middle and Maiden
U.S. Citizen by:			
<input type="checkbox"/> Birth in the U.S.			
<input type="checkbox"/> Birth abroad to USC parents (List certificate of citizenship number or passport number)			
<input type="checkbox"/> Naturalized or derived after birth (List naturalization certificate number)			

FOR INS USE ONLY

Retained	Receipt
Reexamined	
Place Sent	
Place Rec'd	
<input type="checkbox"/> Applicant Interviewed	
Action Sheet:	
Recommendation of Officer:	
Approval <input type="checkbox"/>	Denial <input type="checkbox"/>
Consentance of District Director or Officer in Charge:	
I do <input type="checkbox"/> do not <input type="checkbox"/> concur	
Signature _____	
Certificate # _____	
To Be Completed by Attorney or Representative, if any	
<input type="checkbox"/> Fill in box if G-88 is attached to represent the applicant	
VOLAGE	
ATTY State License #	

Part B. Continued.

Date and Place of Marriage of the Adoptive Parents

Number of Prior Marriages of Adoptive Father

Number of Prior Marriages of Adoptive Mother

Is residence of parents the same as the child's? YES NO (If no, explain on a separate sheet of paper.)

If the residence address is different from Item A, list actual residence address.

Daytime Telephone #
()

Part C. Signature. (Read the information on penalties in the instructions before completing this section.)

I certify that this application, and the evidence submitted with it, is true and correct. I authorize the release of any information from my records, or that of my child, which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking.

Signature

Print Name

Date

Part D. Signature of person preparing form if other than above. (Sign below.)

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature

Print Name

Date

First Name
and Address

DO NOT COMPLETE THE FOLLOWING UNTIL INSTRUCTED TO DO SO AT THE INTERVIEW.

AFFIDAVIT. I, the (parent, guardian) _____ do swear or affirm, under penalty of the perjury laws of the United States, that I know and understand the contents of this application signed by me, and the attached supplementary page number () to () inclusive; that the same are true and correct to the best of my knowledge, and that corrections numbered () to () were made by me or at my request.

Signature of parent or guardian

Date

Person Examined

Address

Relationship to Applicant

Sworn or affirmed before me on

at

Signature of interviewing officer

Title

209C

IMMIGRANT VISA AND ALIEN REGISTRATION

IV- [REDACTED]

OF: *[REDACTED]* (Family Name) *[REDACTED]* (First Name) *[REDACTED]* (Middle Name)

THE IMMIGRANT HAS BEEN PREVIOUSLY IN THE UNITED STATES

ACTION BY IMMIGRATION INSPECTOR
 U.S. IMMIGRATION
 050 BAL-24
 MAR 26 1990
 ADMITTED *P.23*
 JNTV *[REDACTED]*

THE IMMIGRANT NAMED ABOVE ARRIVED IN THE UNITED STATES VIA (Name of vessel or flight no. of arrival)
AJ # 043

INS FILE #, IF KNOWN

INELIGIBILITY FOR VISA WAIVED UNDER SECTION
 212(a) 212(b)
 212(c) 212(d)

CITY AND COUNTRY OF BIRTH
 KINGSTON, JAMAICA

CITY AND COUNTRY OF LAST RESIDENCE
 KINGSTON, JAM

MO-DAY-YR OF BIRTH
[REDACTED]

NATIONALITY
 JAMAICAN

FINAL ADDRESS IN THE UNITED STATES

STREET ADDRESS, INCLUDE - IN CARE OF & APTS IF APPLICABLE
[REDACTED]

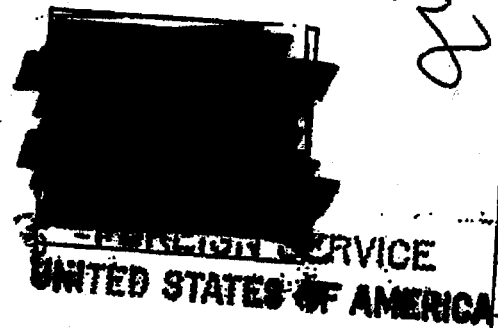
CITY, STATE, AND ZIP CODE, IF AVAILABLE
[REDACTED]

SEC. 212(e)(14) LABOR CERTIFICATION NOT APPLICABLE NOT REQUIRED ATTACHED

OCCUPATION
 STC STUDENT

This visa is issued under Section 221 of the Immigration and Nationality Act, and upon the basis of the facts stated in the application. Possession of a visa does not entitle the bearer to enter the United States if at the time he seeks to enter he is found to be inadmissible. Upon arrival in the United States, it must be surrendered to a United States Immigration Officer.

AMERICAN EMBASSY
 AT KINGSTON, JAMAICA
[Signature]
 Consular Officer of the United States of America



IMMIGRANT CLASSIFICATION

CLASSIFICATION SYMBOL
 P2-3

FOREIGN STATE/OTHER AREA LIMITATION
 JAMAICA

IMMIGRANT VISA NO.
[REDACTED]

ISSUED ON (Day) (Month) (Year)
 19 MAR 90

THE VALIDITY OF THIS VISA EXPIRES MIDNIGHT AT THE END OF (Day) (Month) (Year)
 16 JUL 90

PASSPORT NO.
[REDACTED]

OR OTHER TRAVEL DOCUMENTS (Describe)

ISSUED TO

BY

ON

EXPIRES

Form No. 21
 Fee Paid \$75
 Local Cy. Equiv.

ACTION OF I.I.

ACTION ON APPEAL

U.S.P.H.S.
 LAWFUL ADMISSION FOR PERMANENT RESIDENCE VALID UNTIL *June 25, 1990*
 EMPLOYMENT AUTHORIZED.

Form OF-155A

A7-88

OFFICIAL FORM 155B (REV. 11-68)

UNITED STATES OF AMERICA

IMMIGRATION

IV-00000000

APPROVED BY IMMIGRATION INSPECTOR		DATE OF ISSUE	
COUNTRY OF BIRTH		DATE OF BIRTH	
CITY AND COUNTRY OF LAST RESIDENCE		PASSPORT NO.	
MARRIAGE STATUS	MOTHER'S FIRST NAME	FATHER'S FIRST NAME	
ISSUE CATEGORY	ISSUE REASON	CITY AND STATE ZIP CODE	
APPROVED BY CONSUL			

This Visa is issued under Section 221 of the Immigration and Nationality Act, and upon the bearer's arrival in the United States, possession of a visa does not entitle the bearer to enter the United States. The visa is subject to inspection and to the determination of the Immigration Officer. Upon arrival in the United States, it must be returned to the United States Immigration Officer.

CLASSIFICATION		CLASSIFICATION SYMBOL	
FOREIGN STATUS		ISSUED ON	
ISSUED AT		TERMINATION DATE	
ISSUED TO		ISSUED BY	

IV-00000000

Form OF-155B

(A7-89)

ATTACHMENT 8. CONTRACT DISCREPANCY REPORT

Contract Discrepancy Report		
1. Contract Number		2. Report No. for this discrepancy
3. To: (Contractor and Manager Name)		4. From (Name of QAE)
5. DATES		
Prepared	Returned by Contractor	Action Complete
6. Discrepancy or Problem (Describe in detail; include references to SOW/PRS)		
7. Signature of Contracting Officer		
8. To: (Contracting Officer)		From: (Contractor)
9. Contractor Response as to Cause, Corrective Action and Actions to Prevent Recurrence. Attach continuation sheet, if necessary. (Cite applicable QA program procedure or new QA procedures)		
10. Signature of Contractor Representative		Date
11. Government Evaluation (Acceptance, partial acceptance, rejection. Attach continuation sheet, if necessary).		
12. Government Actions (Payment deduction, cure notice, show cause, other)		
CLOSE OUT		
Contractor Notified QAE	Name/Title	Signature/Date