

Department of Homeland Security  
U.S. Citizenship and Immigration Services

**I-694, Notice of Appeal of  
Decision Under Section 210 or 245A**

**For USCIS use Only**

<b>Action Block</b>	<b>Fee Stamp</b>
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**APPELLANT - START HERE: Please type or print in black ink.**

<b>In the Matter of:</b>	<b>File Number: A-</b> _____ <b>Application for one of the following:</b> <input type="checkbox"/> Permanent Residence (I-698) <input type="checkbox"/> Temporary Residence (I-687) <input type="checkbox"/> Waiver of Grounds of Inadmissibility
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I hereby appeal to the USCIS Director from the decision, dated \_\_\_\_\_ in the above entitled case.

- My written brief or statement is attached.
- I waive the right to submit a written brief or statement.
- I will submit a brief within 30 calendar days.

**Summarize the reasons for this appeal.**

The appeal must include a statement explaining any error or conclusion of law in the decision being appealed or any erroneous statement of fact stated in the decision.

**Appellant (or Attorney or Representative): Please complete the following.**

Name ( <i>Last Name, First Name, Full Middle Name</i> )		
Address ( <i>Street Name and Number</i> )	Telephone Number With Area Code	
<i>(City or Town)</i>	<i>(State)</i>	<i>(Zip Code)</i>
Title or Relationship to Appellant, If Other Than Appellant		
Signature	Date ( <i>mm/dd/yyyy</i> )	