

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

I-824, Application for Action on an Approved Application or Petition

START HERE - Please type or print in black ink.

For USCIS Use Only

Part 1. Information about you. *(Person filing this application)*

Family Name <i>(Last name)</i>	Given Name <i>(First Name)</i>	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Company or Organization Name

Home or Business Address - Street Number and Name **Apt./Suite #**

City State or Province

Zip/Postal Code Country

Mailing Address - Street Number and Name **Apt./Suite #**

C/O *(in care of):*

City State or Province

Zip/Postal Code Country

Daytime Phone # *(Area/Country Codes)*

Country of Birth Country of Citizenship

Date of Birth *(mm/dd/yyyy)* IRS Tax # *(if any)*

A # *(if any)* U.S. Social Security # *(if any)*

Part 2. Reason for request *(check one):*

I am requesting: *(Check one box.)*

- A. A duplicate approval notice.
- B. USCIS to notify a different U.S. Consulate or Port-of-Entry about the approval of an application or petition. Please notify the U.S. Consulate or Port-of-Entry at:
- C. USCIS to notify a U.S. Consulate that my status has been adjusted to permanent resident. Please notify the U.S. Consulate at:
- D. USCIS to send my approved immigrant visa to the National Visa Center (NVC).
- E. USCIS to notify the U.S. Department of State of my U.S. citizenship status.

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	

Remarks

Action Block

To Be Completed by
Attorney or Representative, if any.
 Fill in box if G-28 is attached to represent the applicant.

ATTY State License #

Part 3. Additional information.

1. Give the following information about the original petition or application.

Type of Petition or Application (*Form Number*)

Receipt Number (*On Form I-797, Notice of Action*)

Filing Date of Petition or Application (*mm/dd/yyyy*)

Approval Date (*mm/dd/yyyy*)

2. Give the following information about the petitioner or applicant for the original petition or application.

Current/Most Recent Immigration Status

Naturalization/Citizenship Certificate Number

3. Give the following information about the principal beneficiary of the original petition or application.

Family Name (*Last Name*)

Given Name (*First Name*)

Middle Name

Date of Birth (*mm/dd/yyyy*)

Country of Birth

A # (*if any*)

Home Address - Street Number and Name

Apt. #

City

State or Province

Zip/Postal Code

Country

Mailing Address - (if different from home address)

Street Number and Name/P.O. Box Number

C/O (*In Care Of*)

City

State or Province

Zip/Postal Code

Country

Daytime Phone (*Area/Country Code and Number*)

Part 4. Signature. *Read the information on penalties in the instructions before completing this part.*

I certify, under penalty of perjury under the laws of the United States of America, that this information and the evidence submitted with it is all true and correct. I authorize the release of any information from my records that the U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit sought.

Signature

Daytime Phone Number (*with area code*)

Date (*mm/dd/yyyy*)

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 benefit and this application may be denied.*

Part 5. Signature of person preparing form, if other than above. (*Sign below.*)

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

Signature

Print or Type Your Name

Firm Name and Address

Date (*mm/dd/yyyy*)

E-Mail Address (*if any*)

Daytime Phone Number (*with area code*)