

For USCIS use Only

Action Block	Fee Stamp
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APPELLANT - START HERE: Please type or print in black ink.

In the Matter of:	File Number: A- Application for one of the following: <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>(Type or Print in Black Ink.)</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: