#### **Instructions**

# What Is the Purpose of This Form?

An attorney appearing before the Department of Homeland Security (DHS) in matters outside the geographical confines of the United States must file Form G-28I in each case. Form G-28I must be properly completed and signed by the petitioner, applicant, or respondent to authorize representation for the appearance to be recognized by U.S. Citizenship and Immigration Services (USCIS), U.S. Customs and Border Protection (CBP), and U.S. Immigration and Customs Enforcement (ICE). Under 8 CFR 103.2(a)(3), a beneficiary of a petition is not a recognized party in a proceeding before USCIS. Form G-28I will be recognized by USCIS, CBP, or ICE until the conclusion of the matter for which it was entered.

# Who May Use This Form?

#### **Appearances for Immigration Matters**

This form is used only in matters filed outside the geographical confines of the United States by an attorney, other than one described in 8 CFR 1.1(f), who is licensed to practice law and is in good standing in a court of general jurisdiction of the country in which he or she resides and who is engaged in such practice of law, and with the permission of the DHS official before whom he or she seeks to appear. Acceptance by a DHS entity of a completed G-28I does not itself constitute permission by the DHS entity for the attorney to represent an applicant or petitioner in the matter for which the G-28I was filed.

This form may **not** be filed with matters in offices within the United States.

An attorney who seeks to withdraw his or her appearance in a proceeding before DHS must file a written request with the DHS office with jurisdiction over the pending matter. An attorney who seeks to be recognized by the DHS office as the new representative for an applicant, petitioner, or respondent must file a properly completed Form G-28I with the DHS office with jurisdiction over the pending matter. An attorney who is appearing for a limited purpose at the request of the attorney of record must file a properly completed Form G-28I as noted on the form.

When a person acts in a representative capacity, his or her personal appearance or signature shall constitute a

representation that under the provisions of 8 CFR sections 103.2(a)(3) and 292.1(a)(6), he or she is authorized and qualified to represent the individual. Further proof of authority to act in a representative capacity may be required.

The DHS official has the discretion to determine whether to allow the attorney filing Form G-28I to appear.

## **General Instructions**

## Part 1. Notice of Appearance as Attorney Admitted to Practice Outside the United States

- **A.** Check one block to indicate the DHS agency where the matter is filed. If it is USCIS, then fill in the form number(s) filed with Form G-28I. If it is CBP or ICE, then state specific matter in which appearance is entered.
- **B.** Fill in all information. The mailing address of the applicant, petitioner, or respondent is required in this part of the form. The applicant, petitioner, or respondent must sign the form, preferably in dark blue or black ink.

#### Part 2. Information About Attorney

**A.** Attorneys admitted to practice in a foreign country as defined in 8 CFR 292.1(a)(6):

Check the box and provide the required information regarding the country(ies) of admission. If you are subject to any order of any court suspending, enjoining, restraining, disbarring, or otherwise restricting you in the practice of law, you must disclose this information on Form G-28I.

**B.** Attorneys associated with the attorney with a Form G-28I previously filed in this matter:

Check the box and fill in the name of the attorney who has previously filed a Form G-28I in this matter. A new Form G-28I must be filed by each attorney associated with the attorney.

You must also check Box A and provide the required information.

## Part 3. Name and Signature of Attorney

Fill in all information and sign the form, preferably in dark blue or black ink.

# Warning

Individuals appearing as attorneys are subject to the rules of Professional Conduct for Practitioners in 8 CFR 292.3.

## Freedom of Information/Privacy Act

This form may not be used to request records under the Freedom of Information Act or the Privacy Act. The procedures for requesting such records are contained in 6 CFR Part 5.

## **Paperwork Reduction Act**

An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 20 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, NW, 3rd Floor, Suite 3008, Washington, DC 20529, OMB No. XXXXX-XXXX. Do not mail your application to this address.

# G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States

| Part 1. Notice of Appearance as Attorney Admitted to Practice Outside the United States   |  |                   |   |   |              |  |
|---|--|-------------------|---|---|--------------|--|
| A. This appearance is in regard t   | o immigration matte                                  | rs before:        |   |   |              |  |
| USCIS - Form(s):  |  |                   | CBP (State specific matter in which appearance is entered): |   |              |  |
| ☐ ICE (State specific matter in whi   | ch appearance is entered                             | ):                |   |   |              |  |
| B. I hereby enter my appearance List principal Petitioner, Applicant, NOTE: Provide the mailing address   | or Respondent first. Add                             | d additional shee |   |   |              |  |
| Principal Petitioner, Applicant, or Respondent  |  |                   |   | A Number or   |              |  |
| Name: Last  | First  | Mi                | ddle  | Receipt Number, if any  Petitioner  Applicant  Respondent       |              |  |
| Address: Street Number and Street Na  | me Apt. N  | o. City           |   | Country   | Mailing Code |  |
| Pursuant to the Privacy Act of 1974 and DHS policy, I hereby consent to the disclosure to the named Attorney of any record pertaining to me that appears in any system of records of USCIS, USCBP, or USICE.  Signature of Petitioner, Applicant, or Respondent  Date |  |                   |   |   |              |  |
| Part 2. Information about   | Attorney (Check a                                    | pplicable iten    | as(s) below)  |   |              |  |
| I am licensed to practice law in  |  |                   | (name of country(ies) authorized to practice law), and I am |   |              |  |
| in good standing in a court of general jurisdiction of  |  |                   | (name of country(ies)) where I reside                       |   |              |  |
|   | ubject to any order of a                             | -                 | _   | y disbarring, suspending, enj<br>any order(s), explain fully or | _            |  |
| I am associated with  The attorney of record previously filed Form G-28I in this case, and my appearance as an attorney is at his or her request. (If you check   |  |                   |   |   |              |  |
| this item, also complete item A above in Part 2).   |  |                   |   |   |              |  |
| Part 3. Name and Signatur Thave read and understand the regulation before the Department of Homeland Shave provided on this form is true and  | ations and conditions co<br>Security. I declare unde |                   |   |   |              |  |
| Name of Attorney  |  |                   |   | Attorney Bar Number, if any                                     |              |  |
| Signature of Attorney   |  |                   |   | Date  |              |  |
| Complete Address of Attorney (Street  | Number and Street Name                               | e, City, Country, | Mailing Code)   |   |              |  |
| Phone Number (Include country code)  Fax Number, if any (Include Country Code)  |  |                   | ntry code)  | E-Mail Address, if any  |              |  |