## I-600, Petition to Classify Orphan as an Immediate Relative

| Do not write in this b  | lock.  | (For USC          | CIS Use Only)  |  |
|---|--|-------------------|--|--|
| TO THE U.S. SECRETARY The petition was filed by: Married petitioner   | Y OF STATE:  Unmarried petitio                           | ner               | Fee Stamp  |  |
| The petition is approved fo   | or orphan:  Coming to U.S. for Preadoption requirer met. |                   | AFT  |  |
| Remarks:  |  |                   | File number  |  |
|   |  | D                 | DATE OF ACTION DD DISTRICT   |  |
| Type or print legibly in black ink. Complete a separate petition for each child.  Petition is being made to classify the named orphan as an immediate relative. |  |                   |  |  |
| Block I - Information   |  |                   | 8. If you are now married, give the following information:   |  |
| 1. My name is: (Last)   | (First)  | (Middle)          | Date and place of present marriage (mm/dd/yyyy)  |  |
| 2. Other names used (including maiden name if appropriate):   |  |                   | Name of present spouse (include maiden name of wife)   |  |
| 3. I reside in the U.S. at:   | (c/o if appropriate)                                     | (Apt. No.)        | Date of birth of spouse (mm/dd/yyyy) Place of birth of spouse  |  |
| (Number and Street)   | (Town or City) (   | State) (Zip Code) | Number of prior marriages of spouse  |  |
| <b>4.</b> Address Abroad (if any):  | (Number and Street)                                      | (Apt. No.)        | My spouse resides With me Apart from me (provide address below)  |  |
| (Town or city)  | (Province)   | (Country)         | (Apt. No.) (No. and Street) (City) (State) (Country)   |  |
| 5. I was born on: (mm/dd/yyyy)  |  |                   | 9. I am a citizen of the United States through:  |  |
| In: (Town or City)  | (State or Province)                                      | (Country)         | Birth Parents Naturalization  If acquired through naturalization, give name under which naturalized, number of naturalization certificate, and date and place of naturalization: |  |
| 6. My telephone number is: (include area code)  |  |                   |  |  |
| 7. My marital status is:  |  |                   | If not, submit evidence of citizenship. See Page 1 of the instructions.  |  |
| ☐ Married ☐ Widowed ☐ Divorced  |  |                   | If acquired through parentage, have you obtained a certificate in your own name based on that acquisition?  No Yes   |  |
| ☐ Single ☐ I have never been married. ☐ I have been previously married time(s).   |  |                   | Have you or any person through whom you claimed citizenship ever lost your U.S. citizenship?  No Yes (If "Yes," attach detailed explanation.)                                    |  |
| Received Trans. In  | Ret'd Trans. Out   | Completed         |  |  |

| Block II - Information About Orphan Beneficiary   |  |  |  |  |
|---|--|--|--|--|
| <b>10.</b> Name at Birth (First) (Middle) (Last)  | 20. To petitioner's knowledge, does the orphan have any physical or mental affliction? Yes No  |  |  |  |
| 11. Name at Present (First) (Middle) (Last)   | If "Yes," name the affliction.   |  |  |  |
| 12. Any other names by which orphan is or was known.  | 21. Who has legal custody of the child?  |  |  |  |
| 13. Gender Male 14. Date of birth (mm/dd/yyyy)  Female  | 22. Name of child welfare agency, if any, assisting in this case.  |  |  |  |
| <b>15.</b> Place of Birth (City) (State or Province) (Country)  | <b>23.</b> Name of attorney abroad, if any, representing petitioner in this case.  |  |  |  |
| <ul><li>16. The beneficiary is an orphan because (check one):</li><li>He or she has no parents.</li><li>He or she has only one parent who is the sole or surviving</li></ul>                                  | Address of above.  |  |  |  |
| <ul><li>17. If the orphan has only one parent, answer the following:</li><li>a. State what has become of the other parent:</li></ul>  | 24. Address in the Officer States where orphan win reside.   |  |  |  |
| <b>b.</b> Is the remaining parent capable of providing for the orpha  | <b>25.</b> Present address of orphan.  |  |  |  |
|   | 25. If orphan is residing in an institution, give full name of institution.  |  |  |  |
| 18. Has the orphan been adopted abroad by the petitioner and spot   | 26. If orphan is not residing in an institution, give full name of person with with whom residing.   |  |  |  |
| If "Yes," did the petitioner and spouse or unmarried petit personally see and observe the child prior to or during th adoption proceedings?  Yes  Yes   | ioner 27. Give any additional information necessary to locate orphan, such as  |  |  |  |
| Date of adoption (mm/dd/yyyy)   |  |  |  |  |
| Place of adoption   |  |  |  |  |
| <ul> <li>b. Have the preadoption requirements, if any, of the orphoproposed State of residence been met? Yes Yes</li> <li>c. If b is answered "No," will they be met later?</li> </ul>                        | 28. Location of U.S. Embassy or consulate where application for visa   |  |  |  |
| Certification of Petitioner   | Certification of Married Prospective Petitioner's Spouse   |  |  |  |
| I certify, under penalty of perjury under the laws of the United Sta<br>America, that the foregoing is true and correct, and that I will care<br>orphan or orphans properly if admitted to the United States. |  |  |  |  |
| (Signature of Petitioner)   | (Signature of Petitioner)  |  |  |  |
| Executed on (Date)  | 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 petitioner and is based entirely on information of which I have knowledge. |  |  |  |
|   | (Signature)  |  |  |  |
|   | Street Address and Room or Suite No./City/State/Zip Code   |  |  |  |
|   | Executed on (Date)   |  |  |  |