I-590, Registration for Classification as Refugee

Type or print the following information in black ink. (Read instructions on Page 2.)							
		A-Number:					
1. Name: (First)	(Middle)		(Last)				
2. Present Address: (Street Numb	per and Name/Town or City/Sta	te or Pro	ovince/Coun	try)			
3. Date of Birth: (mm/dd/yyyy)	Place of Birth (City or Town)	Province		Country		Present Citizenship/Nationality	
4. Country from which I fled or was displaced:							On or about (mm/dd/yyyy):
5. Reasons (State in detail):							
6. My present immigration status in (<i>Country in which residing</i>)							
is:							
Evidence of my immigration s (Describe):	status 1s:						
7. Name of Spouse:	Q Dragant	Addrag	s of Spouse	(if dif	farant): Q	Citize	enship/Nationality of Spouse:
7. Ivanie of Spouse.	6. Tresem	Addres	s of Spouse	(ij aijj	ereni).	· CITIZE	hisinp/reationancy of Spouse.
10. My Spouse: will	will not accompany me to	the Unit	ted States:				
Place a mark (X) in front of name of each child who will accompany you to the United States.							
11. Name of Child(ren)	Date of Birth (mm/e	ld/yyyy)	Place of Birth			P	resent Address (if different):
12. Schooling or Education							
Name and Location of School		Туре			Dates Attended		Title of Degree or Diploma
13. Military Service		•				·	
Country Branch and Organizati		ion Dates			Serial No.		Rank Attained

14. Political, professional, or soc my 16th birthday. (If you have	ial organizations of which I am now or lee never been a member of any organiza	nave been a member or with which I am now or have been affiliated since iton, state "None.")
_	been charged with a violation of law. (If each charge and the final result.)	you have ever been charged with a violation of law, give date, place, and
	peen in the United States. (If you have every fixed your entry (visitor, permanent resident	ver been in the United States, provide the dates of entry and departure and the , student, seaman, etc.).)
		Alien Registration Number:
17. I have the following close rel	latives in the United States:	
Name	Relationship	Present Address
	me and address of sponsor in United Sta	
	Do not write below this line	. For Government Use Only.
including the attached docume		r (affirm) that I know the contents of this registration subscribed by me, my knowledge, and that corrections numbered () to () y me with my full, true name:
		(Complete and true signature of registrant)
Subscribed and sworn to before n	ne by the above-named registrant at	on on
	_	(Signature and Title of Officer)
Interview	Approved	Action Block
Date	Date	
At		
Immigration Officer	Officer in Charge	
	Inctr	actions

Submission of Form -This form should be filled out, signed, and submitted to the District Director or Officer in Charge of the nearest overseas office of U.S. Citizenship and Immigration Services. When USCIS begins processing your form, you will be receive additional instructions.

Registration - A separate Form I-590 is required for each registrant. Form I-590 on behalf of a child under 14 years of age shall be submitted by the parent or guardian.

Public Reporting Burden - A person is not required to respond to a collection of information unless it displays a currently valid OMB control number. This collection of information is estimated to average 35 minutes per response. If you have comments regarding the accuracy of this estimate or suggestions for simplifying this form, write to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., 3rd Floor, Suite 3008, Washington, DC 20529-2210: OMB No. 1615-0068. **Do not mail your completed application to this address.**