


Case Problem Submission Worksheet (CIS Ombudsman DHS Form 7001) - Windows Internet Explorer

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 **Homeland Security**

CIS OMBUDSMAN - DHS Form 7001

OMB 1601-0004; Exp. 01-09-2012

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Do I Have to Do Anything Before I Can Submit a Case Problem to CIS Ombudsman?

It is best if you contact our office for assistance after utilizing other resources for case problems with USCIS, such as:

1. USCIS Case Status Service Online at <http://www.uscis.gov>.
2. Made an InfoPass appointment at the local office;
3. Contacted the National Customer Service Center (NCSC) for assistance at (800) 375-5283.
4. To better assist you in completing this form, it is recommended that you have all receipts, alien numbers, names and dates of birth readily available.

While we do not require that you take these steps before you contact our office, the above listed resources can resolve many frequently asked questions such as (1) what forms to file; (2) where to file a particular form; (3) how to notify USCIS of a change of address; (4) how to inquire about processing times at the various service centers or field offices or (5) how to receive case status updates. Additionally, certain information can be obtained from USCIS directly, such as information about individual immigration benefits. NOTICE: Please be aware that CIS Ombudsman cannot provide legal advice. Our office does not have the statutory authority to tell you what type of immigration benefit you may be eligible for or how to remedy your particular immigration situation.

Paperwork Reduction Act

The public reporting burden to complete this information collection is estimated at 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and the completing and reviewing the collected information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to DHS Office of the Citizenship & Immigration Services Ombudsman, [E-mail: cisombudsman@dhs.gov; Mailing Address: Citizenship and Immigration Services Ombudsman, United States Department of Homeland Security, Mail Stop 1225, Washington, D.C. 20528-1225], ATTN: PRA OMB 1601-0004.



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1. Name of subject. The person this case problem is about who is seeking the immigration benefit.	Prefix: <input type="text"/>	First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>	(Jr., Sr., III, etc.): <input type="text"/>
2. Contact information. The contact information of the person the case problem is about. If you are submitting this form for someone else, complete Section 14.	Street Address: <input type="text"/>		Apartment/Suite: <input type="text"/>	City: <input type="text"/>	
	State/Province: <input type="text"/>	ZIP/Postal Code: <input type="text"/>	Country: USA <input type="text"/>		
	E-Mail Address: <input type="text"/>		Phone Number (with area code): <input type="text"/>	Fax Number (with area code): <input type="text"/>	
	<input type="checkbox"/> Please send any future correspondence to me via US Mail, not e-mail.				
3. Subject's date of birth. The person this case problem is about who is seeking the immigration benefit.	Birth Month: <input type="text"/>		Birth Day: <input type="text"/>	Birth Year: <input type="text"/>	
4. Subject's country of citizenship and birth.	Country of Citizenship: <input type="text"/>			Country of Birth: <input type="text"/>	
5. Alien or "A" number. The "A" number appears in the following format: A123-456-789.	Alien Number: A <input type="text"/>				
Tip 1: Your "A" number can be found on many USCIS documents including your work permit. Do not include the "A" when entering the "A" Number on the VOS Web Form. Tip 2: Not every person is assigned an "A" number by USCIS. If you do not have an "A" number, you can use 000-000-000.					



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1. Name of subject.

The person this case problem is about who is seeking the immigration benefit.

Prefix: <input type="text"/>	First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>	(Jr., Sr., III, etc.): <input type="text"/>
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2. Contact information.

The contact information of the person the case problem is about. If you are submitting this form for someone else, complete Section 14.

Street Address: <input type="text"/>	Apartment/Suite: <input type="text"/>	City: <input type="text"/>
State/Province: <input type="text"/>	ZIP/Postal Code: <input type="text"/>	Country: <input type="text"/>
E-Mail Address: <input type="text"/>	Phone Number: <input type="text"/>	(with area code): <input type="text"/>
<input type="checkbox"/> Please send any future correspondence to me via US Mail, not e-mail.		

3. Subject's date of birth.

The person this case problem is about who is seeking the immigration benefit.

Birth Month: <input type="text"/>	Birth Date: <input type="text"/>
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4. Subject's country of citizenship and birth.

Country of Citizenship: <input type="text"/>	Country of Birth: <input type="text"/>
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5. Alien or "A" number.

The "A" number appears in the following format: A123-456-789.

Alien Number: A <input type="text"/>

Tip 1: Your "A" number can be found on many USCIS documents. Do not include the "A" when entering the "A" Number on the form.
Tip 2: Not every person is assigned an "A" number by USCIS. If you do not have an "A" number, enter 000-000-000.

- USA
- USA
- Afghanistan
- Albania
- Algeria
- American Samoa
- Amsterdam Island (Indian Ocean)
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua and Barbuda
- Antilles
- Arabian Peninsula
- Argentina
- Armenia
- Aruba
- Ascension Island
- Australia
- Austria
- Austria-Hungary
- Azerbaijan
- Azores
- Bahrain
- Bangladesh
- Barbados
- Belarus
- Belgium
- Belize
- Bengal
- Benin



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6. Type of case problem.
Check all that apply.

I am an: Individual
 Employer

7. Person preparing this form:
Please indicate who is filing this case problem.

I am: The person this case problem is about who is seeking this immigration benefit;
 An organization on behalf of an individual;
 An attorney/representative
 Other... (explain fully)

Important: If you are the beneficiary of an immigration application and the one submitting the case problem, you will need the consent of the individual who submitted the petition on your behalf ("the Petitioner"). In this case, you are (although the beneficiary) simply a representative of the Petitioner, and will need the consent of the Petitioner to submit this case problem (please see also Section 15).

8. Applications/Petitions filed:
List all applications or petitions currently filed with USCIS that pertain to your case problem.

8. Date received by USCIS:	8. USCIS Form (Enter part of the form name or number to search):	9. Receipt Number:
<input type="text"/>	<input type="text"/>	<input type="text"/> Remove
<input type="text"/>	<input type="text"/>	<input type="text"/> Remove
<input type="text"/>	<input type="text"/>	<input type="text"/> Remove

[Add More ...](#)

9. Receipt Number:
Do not include dashes between the characters

Tip: Your receipt number is located in the top left-hand corner of your Notice of Action (USCIS Form I-797)



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10. Immigration status or interim benefit applied or petitioned for:
The subject of the case problem is applying for immigration status:

As a Nonimmigrant (e.g. extension of a stay for a visitor for pleasure-business, change of status to student, fiance/e, temporary worker, Temporary Protected Status (TPS), etc.)

As an Immigrant (often called "Green Card" application) based on:

For Citizenship or Naturalization;

For Refugee/Asylum;

For Interim Benefits (Work Permit/Travel Document, etc.)

Other... (Application for Waiver, Replacement Document, etc.)

11. Source of case problem:
Check all that apply. Provide a description in Number 12 below. Description of Your case problem.

I am facing or am about to face an immediate adverse action or impact, an emergency or any other type of significant hardship, caused by an action/inaction/delay in processing by USCIS, or a problem that could not be resolved through the normal processes provided for by the USCIS;

I am experiencing processing delays with a case that are beyond anticipated processing times;

I am incurring or am about to incur significant and unusual costs (including fees for professional representation that are not normally incurred);

I have brought this case problem to the attention of USCIS and have not received a response or resolution within the anticipated time frames;

Other... (specify):



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12. Description of your case problem:
Describe the case problem you are experiencing with USCIS.

13. Prior actions taken to remedy the problem:
Check all that apply:

Contacted my attorney/representative who is representing me regarding this issue for assistance (if represented);

Visited USCIS Case Status Service Online at <http://www.uscis.gov>.

Contacted the National Customer Service Center (NCSC) for information and/or assistance regarding this case at their toll-free telephone number 1-800-375-5283.

Contacted the following government department/agency for assistance:

Contacted the following congressional representative for assistance:

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14. Designated Attorney/ Representative:
Please complete this section if you are an attorney, organization or designated representative who is submitting this case problem.

If you are the beneficiary of a pending petition and have obtained consent from the petitioner (see Number 15), check box 3, sign and date.

First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>
Street Address: <input type="text"/>	Apartment/Suite: <input type="text"/>	City: <input type="text"/>
State/Province: <input type="text" value=""/>	ZIP/Postal Code: <input type="text"/>	Country: <input type="text" value="USA"/>
Email Address: <input type="text"/>	Phone Number (with area code): <input type="text"/>	Fax Number (with area code): <input type="text"/>

1. I am an attorney and a member in good standing of the bar of the Supreme Court of the United States or the highest court of the following State, territory, insular possession, or District of Columbia and am not under a court or administrative agency order suspending, enjoining, restraining, disbaring, or otherwise restricting me in practicing law.
2. I am an accredited representative of the following named religious, charitable, social service or similar organization established in the United States and recognized by the Board of Immigration Appeals pursuant to 8 CFR 292.1.
3. I am the beneficiary of a pending petition and the petitioner is consenting to the release of information about a pending case to me.
4. Other... (Explain Fully):
5. I have submitted a USCIS Form G-28 as the attorney/representative for the application/petition for which case problem is being submitted.



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14. Designated Attorney/ Representative:
Please complete this section if you are an attorney, organization or designated representative who is submitting this case problem.

If you are the beneficiary of a pending petition and have obtained consent from the petitioner (see Number 15), check box 3, sign and date.

First Name:	Middle Name:	Last Name:
Street Address:	Apartment/Suite:	City:
State/Province:	ZIP/Postal Code:	Country:
Email Address:	Phone Number (with area code):	

1. I am an attorney and a member in good standing of the bar of the Supreme Court of the following State, territory, insular possession, or District of Columbia and agency order suspending, enjoining, restraining, disbaring, or otherwise restricting me.

2. I am an accredited representative of the following named religious, charitable, scientific, or fraternal organization established in the United States and recognized by the Board of Immigration Appeals.

3. I am the beneficiary of a pending petition and the petitioner is consenting to the case to me.

4. Other... (Explain Fully):

5. I have submitted a USCIS Form G-28 as the attorney/representative for the applicant being submitted.

USA
 USA
 Afghanistan
 Albania
 Algeria
 American Samoa
 Amsterdam Island (Indian Ocean)
 Andorra
 Angola
 Anguilla
 Antarctica
 Antigua and Barbuda
 Antilles
 Arabian Peninsula
 Argentina
 Armenia
 Aruba
 Ascension Island
 Australia
 Austria
 Austria-Hungary
 Azerbaijan
 Azores
 Bahrain
 Bangladesh
 Barbados
 Belarus
 Belgium
 Belize
 Bengal
 Benin



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Supporting Documentation.

Include up to 10 attachments (scanned images, PDF files, TXT files, and Word documents.)

No more than 5 megabytes of data may be uploaded.

If digital copies of the documents are not available or there are additional documents, they may be faxed to 202-357-0042 or mailed to

Citizenship and Immigration Services Ombudsman
 Department of Homeland Security
 Attention: Case Problems
 Mail Stop 1225
 Washington, D.C. 20528-1225

Add Attachments	<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Attach Another"/>
Attachments:	No attachments		
Fax Attachments	<input type="checkbox"/> Check this if supporting documentation is going to be Faxed	<input type="button" value="Print Fax Cover Sheet"/>	
Mail Attachments	<input type="checkbox"/> Check this if supporting documentation is going to be Mailed	<input type="button" value="Print Mail Cover Sheet"/>	



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There are 24 errors. You must resolve the errors before you can submit this information. [Go to First Error](#)
 There are 7 warnings. [Go to First Warning](#)

[Print This Page](#)

Status	Form Section Number	Form Section Name	Form Section Content	Required
OK	1.	Submission #	2010190144431	
STOP	1.	Prefix		Required Field
STOP	1.	First Name		Required Field
OK	1.	Middle Name		
STOP	1.	Last Name		Required Field
OK	1.	Suffix		
STOP	2.	Address		Required Field
OK	2.	Apartment		
STOP	2.	City		Required Field
STOP	2.	State		Required Field
STOP	2.	ZIP Code		Required Field
OK	2.	Country	USA	
STOP	2.	E-mail		Required Field
Warning	2.	Phone		Recommended Field
Warning	2.	FAX		Recommended Field
STOP	3.	Birthdate	//	Incomplete or invalid date
STOP	4.	Country of Birth		Required Field
STOP	4.	Country of Citizenship		Required Field
STOP	5.	Alien Number		Required Field - If you do not have an Alien Number then enter all zeros (000-000-000)
Warning	6.	Type of Case		Recommended Field
STOP	7.	Preparer		Required Field
STOP	8.	Applications and Petitions Filed		Required Field
Warning	10.	Immigration Status		Recommended Field
STOP	11.	Source of Case Problem		Required Field
STOP	12.	Case Description		Required Field
STOP	13.	Prior Action Taken		Required Field
STOP	14.	Attorney/Representative First Name		Required Field
OK	14.	Attorney/Representative Middle Name		
STOP	14.	Attorney/Representative Last Name		Required Field
STOP	14.	Attorney/Representative Address		Required Field
OK	14.	Attorney/Representative Apartment		
STOP	14.	Attorney/Representative City		Required Field
OK	14.	Attorney/Representative Country	USA	
STOP	14.	Attorney/Representative State		Required Field
STOP	14.	Attorney/Representative ZIP Code		Required Field
Warning	14.	Attorney/Representative E-mail		Recommended Field
Warning	14.	Attorney/Representative Phone		Recommended Field
Warning	14.	Attorney/Representative FAX		Recommended Field
STOP	14.	Attorney/Representative Details		Required Field
OK	Attachments.	Supporting Documents	None	
OK	Attachments.	FAX	None	
OK	Attachments.	Mail	None	

County has been changed to Country in Section 2 (Subject Information) and Section 14 (Representative Information).