## Form I-687, Application for Status as a Temporary Resident Under Section 245A of the INA

Do not	write in this block. For USCIS Use	Only.			
Action Block	Fee Stamp				
	With a control of the last of	1			
	Waiver of Inadmissibility Under Section 212(a)	Applicant's A#			
	Approved Denied				
Class of Admission	Place of Admission Date of Adjustment				
START HERE - Type or print in capital letter	rs in black ink. (If you need more space	e, use a separate sheet of paper.)			
1. I hereby apply for status as indicated by the bl	ock checked below:				
☐ <b>A.</b> Temporary Resident Status as an alie	n who illegally entered the U.S. prior to	January 1, 1982.			
B. Temporary Resident Status as an alies		ant prior to January 1, 1982, and whose n to the Government as of January 1, 1982.			
2. Name	ate of whose unlawful status was know.	3. Date of Birth			
Family Name (Last Name) Given Na	ame (First Name) Middle Name	e (mm/dd/yyyy)			
4. Other A#s and Names Used or Known By (inc	Judina maidan nama if mamiad)   5	Talambana Numbana (including area andes)			
4. Other A#s and Names Used of Known By (inc	5.	Telephone Numbers (including area codes) Home			
		Work			
<b>6.</b> Home Address in the U.S.		U.S. Social Security #			
In care of		e.g. goein geenity "			
Number and Street		Apt. #			
City	State	Zip Code			
7. Mailing Address in the U.S. (if different from	address in <b>Number 6</b> )				
In care of					
Number and Street		Apt. #			
City	State	Zip Code			
8. Country of Citizenship					
9. Place of Birth					
City or Town	Country, Province, or State	Country			
10. Marital Status					
Now Married Never Married	Separated Divorced	Widowed			
<b>11.</b> Gender <b>12.</b> Race					
☐ Male ☐ Asian or Pacific Is☐ Female ☐ Hispanic	slander Black, not of Hispanic or White, not of Hispanic or				

13.	13. Have you previously applied for temporary residence as a Legalization applicant?  No Yes					
	If Yes, give date, place of filing, and	final disposition, if knowr	1.			
14.	Do you have other records with USC.  No Yes	IS (or the former INS)?				
	If Yes, give file numbers. A #	Ot	ther			
15.	When did you first come to the U.S.: (mm/dd/yyyy)	16. Manner of Entry  Without a visa		isitor, stude	nt, etc.) specify:	
<u>17.</u>	Place of first entry into U.S. to reside	: Port of Entry (Ci	ty and State):			
	Borde	r - Not through a Port of I	Entry (State):			
18.	. Mother's Name	Maiden Name, Last Name	First Name)		Living A#	
	Immigration Status	2000 1100000	, 1 0.00 1.00		Deceased (year)	
19.	. Father's Name				Living A#	
		(Last Name, First N	Vame)			
	Immigration Status				Deceased (year)	
20.	List your present and past husbands/		s and daughters (if ad		ace is needed, use separate paper).	
	Family Name	Given Name		A #		
	Country of Birth		Relationship			
	Family Name	Given Name		A #		
	Country of Birth		Relationship	<b>,</b>		
	Family Name	Given Name		A #		
	Country of Birth		Relationship	<b>'</b>		
	Family Name	Given Name	•	A #		
	Country of Birth		Relationship			
	Family Name	Given Name		A #		
Country of Birth Relationship						
	Family Name	Given Name	<u>'</u>	A #		
	Country of Birth	1	Relationship	l		

f you were admitted as o to Number 30.	a nonimm	igrant prior to Janı	ıary 1, 1982	, complete N	Numbe	ers 21 through 29. If	not, leave blank and
1. Passport Number	<b>22.</b> Cou	untry that Issued Pass	sport		<b>23.</b> L	ocation Where Visa Iss	sued (City and Country)
<b>4.</b> Type of Visa Issued (B-2, F-1, etc.)		te Visa Issued n/dd/yyyy)		orized Stay in ed (mm/dd/yy		27. Class of Admissi Visitor, etc.)	ion (Student,
8. Did you violate your status prior to January		29. Was your status Government pr					
□ No □ Yes		□ No □ Y			n		
	nces in the arate sheet icate on the	United States since y of paper. Write you	r name and A	Alien Registr	ation 1		If you need more space f any, at the top of each
City			State	Zip Code	e	From (mm/yyyy)	To (mm/yyyy)
Number and Street Na	ıme						Apt. #
City			State	Zip Code	e	From (mm/yyyy)	To (mm/yyyy)
Number and Street Na	ıme						Apt. #
City			State	Zip Code	e	From (mm/yyyy)	To (mm/yyyy)
Number and Street Na	ıme						Apt. #
City			State	Zip Code	e	From (mm/yyyy)	To (mm/yyyy)
Number and Street Na	ıme					J [	Apt. #
City			State	Zip Code	e	From (mm/yyyy)	To (mm/yyyy)
Number and Street Na	ime					J [	Apt. #
City			State	Zip Code	e	From (mm/yyyy)	To ( <i>mm/yyyy</i> )
Number and Street Na	ıme					<u> </u>	Apt. #
City			State	Zip Code	e	From (mm/yyyy)	

Name of Organiza	ition	Location	on (City and State)		From (mm	/yyyy)	To (mm/yyyy)
absences dating bac Alien Registration l	ck to your firs Number (A-N	st entry.	TATES SINCE FIRST ENTI If you need more space to con, if any, at the top of each shee	nplete, use a sep	arate sheet of	paper.	Write your name
absences dating bac Alien Registration l refers to <b>Number 3</b>	ck to your firs Number (A-N 32.	st entry. Number)	If you need more space to con, if any, at the top of each shee	mplete, use a sep	arate sheet of dicate on the	paper. sheet the	Write your name at the information of Reentry
absences dating bac Alien Registration lateriers to <b>Number 3</b>	ck to your firs Number (A-N	st entry. Number)	If you need more space to con	nplete, use a sep	arate sheet of dicate on the	paper. sheet the	Write your name at the information
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31. AFFILIATIONS OR ASSOCIATIONS: List all affiliations or associations, clubs, organizations, churches, unions, businesses,

EMPLOYMENT IN THE UN previous employment dating bac sheet of paper. Write your name indicate on the sheet that the inf	ck to your first entry. If n e and Alien Registration N	one, writ Number (	e "None." If yo	u need more space to c	omplete, use a separate
Full Name of Employer					
Number and Street Name					Suite #
City		State	Zip Code	Occupation	
Annual Wage	Hourly Wage			From (mm/yy)	To (mm/yy)
Full Name of Employer					
Number and Street Name					Suite #
City		State	Zip Code	Occupation	
Annual Wage	Hourly Wage			From (mm/yy)	To (mm/yy)
Full Name of Employer					
Number and Street Name					Suite #
City		State	Zip Code	Occupation	
Annual Wage	Hourly Wage			From ( <i>mm/yy</i> )	To (mm/yy)
Full Name of Employer					
Number and Street Name					Suite #
City		State	Zip Code	Occupation	
Annual Wage	Hourly Wage			From (mm/yy)	To (mm/yy)
Full Name of Employer					
Number and Street Name					Suite #
City		State	Zip Code	Occupation	
Annual Wage	Hourly Wage		J [	From ( <i>mm</i> /yy)	To (mm/yy)

## 33. EMPLOYMENT IN THE UNITED STATES SINCE FIRST ENTRY (continued) Full Name of Employer Number and Street Name Suite # Occupation City State Zip Code Annual Wage Hourly Wage From (mm/yy) To (mm/yy) Full Name of Employer Number and Street Name Suite # City State Zip Code Occupation Hourly Wage From (mm/yy) To (mm/yy)Annual Wage Full Name of Employer Number and Street Name Suite # City State Zip Code Occupation Annual Wage Hourly Wage To (mm/yy) From (mm/yy) Full Name of Employer Number and Street Name Suite # City Zip Code Occupation State Hourly Wage From (mm/yy) To (mm/yy) Annual Wage Full Name of Employer Number and Street Name Suite # Zip Code Occupation City State Hourly Wage To (mm/yy)Annual Wage From (mm/yy) **34.** I have registered under the Military Selective Service Act. My Selective Service Number is:

	I am a male over the age of 17 and under the age of 26 required to register under the Military Selective Service Act and have not done so. I wish to register at this time. My SSS Form 1 is attached.						
	I am a male born after 1959 and over the age of 26 and cannot now register.						
	I am exempt from Selective Service Registration either because I am a female or I was born before 1960.						
_							
35.	Have you ever assisted in the persecution opinion, nationality, or membership in a	• -		gion, political	Yes	☐ No	
36.	Have you ever been treated for a mental	disorder, drug addicti	on, or alcoholism?		Yes	☐ No	
37.	Have you <b>ever</b> committed a crime or off	ense for which you w	ere <b>not</b> arrested?		Yes	☐ No	
	Have you <b>eve</b> r been arrested, cited, or de officer (including USCIS or former INS				Yes	☐ No	
	Have you <b>ever</b> been charged with comm	nitting any crime or of	fense?		Yes	☐ No	
	Have you <b>ever</b> been convicted of a crim	e or offense?			Yes	☐ No	
	Have you <b>ever</b> been in jail or prison?				Yes	☐ No	
	Have you <b>ever</b> been placed in an alterna (for example: diversion, deferred prosec			n)?	Yes	☐ No	
	Have you <b>ever</b> received a suspended sentence, been placed on probation, or been paroled?						
	If you answered "Yes" to any of <b>Number 37</b> , complete the following table. If you need more space to complete, use a separate sheet of paper. Write your name and Alien Registration Number (A-Number), if any, at the top of each sheet of paper and indicate on the sheet that the information refers to <b>Number 37</b> .						
	Why were you arrested, cited, detained, or charged?  Date arrested, cited, detained, or charged (mm/dd/yyyy)  Where were you arrested, cited, detained, or charged? (cited, detained, or charged? (City, State, Country)  Outcome or disposition of the arrest, cited, detained, or charged?						
	Attach all certified police reports, indictments, and certified court dispositions for any arrests, citations, detentions, charges, or imprisonment.					ions,	
38.	Have you, or a dependent member of yo any source, including, but not limited to municipality?	_	-		Yes	☐ No	
39.	Have you ever:						
	Within the past 10 years been a prostitut such activities in the future?	e or procured anyone	for prostitution, or intend to	engage in	Yes	☐ No	
	Engaged in any unlawful commercialize	ed vice, including, but	not limited to, illegal gambl	ing?	Yes	☐ No	
	Knowingly encouraged, induced, assiste illegally?	d, abetted, or aided ar	ny alien to try to enter the U	nited States	Yes	☐ No	

	Illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or colluded in the illicit trafficking of any controlled substance?	Yes	☐ No
	Engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to any person or organization that has ever engaged or conspired to engage in sabotage, kidnapping, political assassination, hijacking, or any other form of terrorist activity?	Yes	No
	Been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?	Yes	☐ No
	Engaged in genocide, or otherwise ordered, incited, assisted, or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin, or political opinion?	Yes	☐ No
	Been deported, excluded, or removed from the United States at government expense, or have you ever been or are you now in exclusion, deportation, removal, or rescission proceedings?	Yes	☐ No
	Left the United States to avoid being drafted into the United States Armed Forces?	Yes	☐ No
	Been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and have not yet complied with that requirement or obtained a waiver?	Yes	☐ No
40.	Do you intend to engage in the United States in:		
	A. Espionage?	Yes	☐ No
	<b>B.</b> Any activity a purpose of which is opposition to, or the control or overthrow of, the government of the United States, by force, violence, or other unlawful means?	Yes	☐ No
	<b>C.</b> Any activity to violate or evade any law prohibiting the export from the United States of goods, technology, or sensitive information?	Yes	□ No
41.	Did you, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion?	Yes	☐ No
42.	Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States, or any immigration benefit?	Yes	□ No
43.	Are you now withholding custody of a United States citizen child outside the United States from a person granted custody of the child?	Yes	☐ No
44.	Do you plan to practice polygamy in the United States?	Yes	☐ No
45.	If your native alphabet is in other than Roman letters, write your name in your native alphabet.		
46.	Language of your native alphabet.		

47. Signature and Certification of Applicant I CERTIFY, under penalty of perjury under hereby consent and authorize U.S. Citizensh welfare, and other record checks pertinent to	the laws of the United States of Americanip and Immigration Services to verify t		Č Č
Signature		Date (mn	n/dd/yyyy)
48. Signature of Person Preparing Form if C	Other Than Above (Sign below)		
I declare that I prepared this application at the r person(s). I have not knowingly withheld any r			
Attorney or Representative Only: In the even	nt of a Request for Evidence (RFE), may	y USCIS	contact you by fax or e-mail?
Preparer's Signature		Date (mn	n/dd/yyyy)
Print Preparer's Family Name (Last Name)	Print Preparer's Given Name (First	Name)	Print Preparer's Middle Name
Preparer's Firm Name (if applicable)			
Preparer's Address			
Daytime Phone Number (with area code)	Fax Number (with area code)	]	USCIS Account # (if any)
E-mail Address (if any)			