## U.S. Citizenship and Immigration Services

Do not write in this block - For USCIS use only.						
Action Block	Fee Stamp					
	Remarks					
START HERE - Type or print in black ink. If y	ou need more space, see Page	3 of the instructions.				
1. Name						
Family Name (in capital letters) Give	n Name	Middle Name	A-Number			
Danidant Cand	on Form I-688, Temporary	-	per (include area code)			
Wate		Home	Work			
Female						
<b>5.</b> Reason for difference in name, if any. (marriag	ge, divorce, etc.)					
6. Home Address in the United States						
In care of						
Street Number and Name			Apt. #			
City		State	p Code			
7. Mailing Address in the United States (if differe	nt from address in <b>Number 6</b> a	above)				
In care of						
Street Number and Name			Apt. #			
City		State Zi	p Code			
8. Place of Birth (City or Town) County, Province, or State Country Country of Citizenship/Nationality						
9. Date of Birth (mm/dd/yyyy) 10. Your Mother's First Name 11. Your Father's First Name 12. Your U.S. Social Security #						
13. Marital Status Married Nev	rer Married Separated	Divorced [	Widowed			

	Country	Purpose of Trip	From	To	<b>Total Days</b>			
	Country	1 ut pose of 111p	(mm/dd/yyyy)	(mm/dd/yyyy)	Absent			
		•						
15.	When applying for temporary resident status, I did did not submit a Form I-693, Medical Examination of Aliens Seeking Adjustment of Status, with my application that included a serologic (blood) test for human immunodeficiency virus (HIV) infection. (If you did not, submit Form I-693 that includes a serologic test for HIV.)							
6.	Concerning the requireme Government of the United		derstanding of the	e history and				
	<b>A</b> . I will satisfy these req	uirements by:						
Examination at the time of interview for permanent residence.								
	<ul> <li>☐ Satisfactorily pursuing a course of study recognized by the Secretary of Homeland Security.</li> <li>B. I have satisfied these requirements by:</li> <li>☐ Having satisfactorily pursued a course of study recognized by the Secretary of Homeland Security. (Attach appropriate documentation.)</li> </ul>							
	-	se I am 65 years of age or older, under 16 years of to comply, explain and attach relevant documents		unable to comply	. (If you are			
f y	ou answer "Yes" to any	of the questions numbered 17 through 37, expl	ain your answer on a se	eparate sheet of	paper.			
l <b>7.</b>		the persecution of any person or persons on accordembership in a particular social group?	unt of race, religion, poli	tical Yes [	No [			
<b>8.</b>	Have you ever been treate	ed for a mental disorder, drug addiction, or alcoho	lism?	Yes [	No [			
9.	Have you <b>ever</b> committed	a crime or offense for which you were <b>not</b> arrest	ed?	Yes [	No [			
		ted, cited, or detained by any law enforcement off t (ICE), Customs and Border Protection (CBP), for		tion Yes [	No [			

	Have you <b>ever</b> been charged with committing any crime or offense?		Yes	No 🗌
	Have you <b>ever</b> been convicted of a crime 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 alternative sentencing or a rehabilitative program (for diversion, deferred prosecution, withheld adjudication, deferred adjudication)?	Yes	No 🗌	
	Have you <b>ever</b> received a suspended sentence, been placed on probation, or been parole	ed?	Yes	No 🗌
20.	Have you, or a dependent member of your immediate family, ever received public assis source, including, but not limited to, the U.S. Government, any State, county, city, or m"Yes" provide the names(s) of the recipients(s) and U.S. Social Security Number(s).		Yes	No
	Name of Recipient (Family Name, Given Name, Middle Name)	U.S. Social Security	y Number	
21	Have you <b>ever</b> :			
21,	<ul><li>a. Within the past 10 years been a prostitute or procured anyone for prostitution, or into such activities in the future?</li></ul>	Yes	No 🗌	
	<b>b.</b> Engaged in any unlawful commercialized vice, including, but not limited to, illegal	Yes	No 🗌	
	<b>c.</b> Knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter illegally?	Yes	No 🗌	
	<b>d.</b> Illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or col trafficking of any controlled substance?	Yes	No	
22.	Have you <b>ever</b> engaged in, conspired to engage in, or do you intend to engage in, or have solicited membership or funds for, or have you through any means ever assisted or proving material support to any person or organization that has ever engaged or conspired to enkidnapping, political assassination, hijacking, or any other form of terrorist activity?	rided any type of	Yes	No
23.	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 the United States, by force, violence, or other unlawful means?	Government of	Yes	No 🗌
	<b>c.</b> Any activity to violate or evade any law prohibiting the export from the United State technology, or sensitive information?	es of goods,	Yes	No
<b>24.</b> Have you <b>ever</b> been a member of, or in any way affiliated with, a Communist Party or any other totalitarian party?				No 🗌

25.	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 🗌
26.	Have you <b>ever</b> 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
27.	Have you <b>ever</b> been deported from the United States or removed from the United States at Government expense, excluded within the past year, or are you now, or have you ever been in exclusion, deportation, removal, or rescission proceedings?	Yes	No 🗌
28.	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 🗌
29.	Have you <b>ever</b> left the United States to avoid being drafted into the U.S. Armed Forces?	Yes	No 🗌
30.	Have you <b>ever</b> been a J nonimmigrant exchange visitor who was subject to the 2-year foreign residence requirement and have not yet complied with that requirement or obtained a waiver?	Yes	No 🗌
31.	Are you now withholding custody of a U.S. citizen child outside the United States from a person granted custody of the child?	Yes	No 🗌
32.	Do you plan to practice polygamy in the United States?	Yes	No
33.	Have you <b>ever</b> ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any	y of the follow	ving:
	a. Acts involving torture or genocide?	Yes	No 🗌
	<b>b.</b> Killing any person?	Yes	No 🗌
	<b>c.</b> Intentionally and severely injuring any person?	Yes	No 🗌
	<b>d.</b> Engaging in any kind of sexual contact or relations with any person who was being forced or threatened?	Yes	No
	e. Limiting or denying any person's ability to exercise religious beliefs?	Yes	No 🗌
34.	Have you ever:		
	<b>a.</b> Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?	Yes	No
	<b>b.</b> Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?	Yes	No 🗌

35.	Have you <b>ever</b> been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?	Yes	No 🗌						
36.	Have you <b>ever</b> assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?	Yes	No						
37. Have you ever received any type of military, paramilitary, or weapons training?  Yes									
38.	3. If your native alphabet is in other than Roman letters, write your name in your native alphabet.								
39.	Language of your native alphabet.								
40.	Accommodations for Individuals With Disabilities and/or Impairments (Read the information on Pabefore completing this section.)	<b>ige 4</b> of the instr	uctions						
	Are you requesting an accommodation because of your disability(ies) and/or impairment(s)?	Yes	No 🗌						
	If "Yes" check any applicable box:								
	<b>a.</b> I am deaf or hard of hearing and request the following accommodation(s) (if requesting a sign-la indicate which language (e.g., American Sign Language)):	nguage interpret	er,						
	<b>b.</b> I am blind or sight-impaired and request the following accommodation(s):								
	c. I have another type of disability and/or impairment (describe the nature of your disability(ies) and accommodation(s) you are requesting):	nd/or impairmen	t(s) and						
41.	Signature and Certification of Applicant  Applicant's Statement and Signature (Check one)								
	I can read and understand English, and I have read and understand each and every question and instrument well as my answer to each question.	uction on this for	rm, as						
	Each and every question and instruction on this form, as well as my answer to each question, has bee language, a language in which I am fluent, by the person named in <b>Inter</b> and <b>Signature</b> . I understand each and every question and instruction on this form, as well as my answer	rpreter's Staten	nent						

	I certify, under penalty of perjury under the lapplication is all true and correct. I certify a application.							
	I hereby consent and authorize U.S. Citizens police, welfare, and other record checks pert			rify the inf	ormati	on provided and	d to c	conduct
	Applicant's Signature			Date (n	nm/dd/y	vyyy)		
12.	Interpreter's Statement and Signatur	e						
	I certify that I am fluent in English and the b	elow-mentioned lang	guage.					
	Language used (language in which applicated)	nt is fluent)						
	I further certify that I have read each and even this applicant in the above-mentioned languatorm, as well as the answer to each question.	age, and the applicant						
	Interpreter's Signature			Date (mr	n/dd/yy	yy)		
	Print Your Full Name			Telepho	ne Nun	nber (include a	rea/c	country code)
	Signature of Person Preparing Form,  I declare under penalty of perjury that I prep  The answers provided are based on informat named person in response to the exact questi	ared this application a	at the request of the reconstruction at the request of the reconstruction at the reconst	ledge and/o	or were	provided to me	by t	he above
	Signature		1	Date (mm/dd/yyyy)				
	Print Your Full Name			Telephone Number (include area/country code)				
	Address							
	For U.S. Citiz	enship and Imm	igration Se	rvices Us	se On	ly		
44	. Final Action: Temporary Residence	Approved	Denied					
45	. Final Action: Waiver of Inadmissibility un	der Section 212(a)				Approved		Denied
46	. Class of Admission	<b>47.</b> Place of Adjust	ment		<b>48.</b> D	ate of Adjustm	ent	
49	. Final Action By (Print Name and Title)	<b>50.</b> ID Number			<b>51.</b> D	Pate		