Department of Homeland Security

U.S. Citizenship and Immigration Services

START HERE - Type or Print (Use black i	For USCIS Use Only		
Part 1. Information About You	Returned Receipt		
Family Name (Last Name) Given Name (
Address - Street Number and Name	Resubmitted		
C/O (in care of)			
City Sta	te Zip Code	Reloc Sent	
Date of Birth (mm/dd/yyyy)	Country of Birth		
Country of Citizenship/Nationality U.S. So	cial Security # (if any) A # (if any)	Reloc Rec'd	
Date of Last Arrival (mm/dd/yyyy)	I-94 #		
Current USCIS Status	Expires on (mm/dd/yyyy)	Applicant Interviewed	
Part 2. Application Type (Check one)		Section of Law	
 I am applying for an adjustment to perma a. An immigrant petition giving me an in that has been approved. (Attach a copy immigrant juvenile, or special immigra application that will give you an imme b. My spouse or parent applied for adjust permanent residence in an immigrant of for spouses and children. c. I entered as a K-1 fiancé(e) of a U.S. centry, or I am the K-2 child of such a fentry, or I am the K-2 child of such a fentry, or I am the grant and the marriated. I was granted asylum or derivative asy granted asylum and am eligible for adjusted asylum and am eligible for adjusted and the grant of Cuba admitt January 1, 1959, and thereafter have befor at least 1 year. f. I am the husband, wife, or minor unmantal contents. 	Sec. 209(a), INA Sec. 209(b), INA Sec. 209(b), INA Sec. 245, INA Sec. 245, INA Sec. 249, INA Sec. 1 Act of 11/2/66 Other Country Chargeable Eligibility Under Sec. 245 Approved Visa Petition Dependent of Principal Alien Special Immigrant Other Preference Action Block		
States after January 1, 1959, and therea United States for at least 1 year.	and was admitted or paroled into the United after have been physically present in the ted States since before January 1, 1972.		
h. Other basis of eligibility. Explain (for example, I was admitted as a refugee, my status has not been terminated, and I have been physically present in the United States for 1 year after admission). If additional space is needed, see Page 2 of the instructions.			
I am already a permanent resident and am applying to have the date I was granted permanent residence adjusted to the date I originally arrived in the United States as a nonimmigrant or parolee, or as of May 2, 1964, whichever date is later, and: (Check one)		To be Completed by Attorney or Representative, if any Fill in box if Form G-28 is attached to represent the applicant.	
i. I am a native or citizen of Cuba and meet the description in (e) above.		VOLAG #	
j. I am the husband, wife, or minor unma description in (f) above.	rried child of a Cuban and meet the	ATTY State License #	

art 3. Processing Information						
City/Town/Village of Birth		Current O	Current Occupation			
W. M. d. J. E'. (N		W F 4	l E	N		
Your Mother's First Name		Your Fath	Your Father's First Name			
Give your name exactly as it appears	Departure Record					
Place of Last Entry Into the United St (City/State)	In what status did you last enter? (Visitor, student, exchange visitor, crewman, temporary worker, without inspection, etc.)					
Were you inspected by a U.S. Immigration Officer? Yes No			No			
Nonimmigrant Visa Number		Consulate	Consulate Where Visa Was Issued			
Date Visa Issued (mm/dd/yyyy) Gender Marital Status Marital Status Married Single Divorced Wide						
			Divorced Widowed			
Have you ever applied for permanent	resident status in the U.S.?			give date and plo disposition.)	ace of No	
List your present spouse and all of you space is needed, see Page 2 of the inst		ns and daugh	nters). (I	f you have none	, write "None." If additional	
Family Name (Last Name)	Given Name (First N	lame)		Middle Initial	Date of Birth (mm/dd/yyyy	
Country of Birth	Relationship		A # (if	(any)	Applying with you?	
	r		(9		Yes No	
Family Name (Last Name)	Given Name (First N	lame)	1	Middle Initial	Date of Birth (mm/dd/yyyy)	
Country of Birth	Relationship		A # (if	(any)	Applying with you?	
Country of Birth	relationship		11 11 (1)	<i>(111)</i>	Yes No	
Family Name (Last Name)	Given Name (First N	lame)	- I	Middle Initial	Date of Birth (mm/dd/yyyy)	
G. C. C. C. C.	B.1.: 1:		1			
Country of Birth	Relationship		A # (if	any)	Applying with you? Yes No	
Family Name (Last Name)	Given Name (First N	lame)		Middle Initial		
		lame)			Date of Birth (mm/dd/yyyy)	
Family Name (Last Name) Country of Birth	Given Name (First N Relationship	Iame)	A # (if		Date of Birth (mm/dd/yyyy, Applying with you?	
			A # (if		Date of Birth (mm/dd/yyyy)	
Country of Birth	Relationship		A # (if	any) Middle Initial	Date of Birth (mm/dd/yyyyy Applying with you? Yes No	

Par	t 3. Processing Informa	tion (Continued)				
;	List your present and past membership in or affiliation with every organization, association, fund, foundation, party, club, society or similar group in the United States or in other places since your 16th birthday. Include any military service in this part. If none write "None." Include the name of each organization, location, nature, and dates of membership. If additional space is needed, attach a separate sheet of paper. Continuation pages must be submitted according to the guidelines provided on Page 2 of the instructions under "What Are the General Filing Instructions?" Name of Organization Location and Nature Date of Membership Date of M					t. If none, eded,
-						ate of Membership To
-				From	Te)
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_						
-						
-						
-						
_						
"Ye	 does not necessarily mean Have you EVER, in or outsiden. Knowingly committed any arrested? Been arrested, cited, charge 	crime of moral turpitude or a drug-r	atus or register for prelated offense for v	permanent residence.		No No No
	or ordinance, excluding tr				. .	.
		pardon, amnesty, rehabilitation decreationity to avoid prosecution for a crim		•	Yes Yes	No No
2. I	Iave you received public assi	stance in the United States from any nicipality (other than emergency med	source, including the	ne U.S. Government or	Yes [No [
3. I	Have you EVER:					
•	• Within the past 10 years b activities in the future?	een a prostitute or procured anyone f	or prostitution, or in	ntend to engage in such	Yes	No 🗌
]	. Engaged in any unlawful of	commercialized vice, including, but r	not limited to, illega	ıl gambling?	Yes	No 🗌
(c. Knowingly encouraged, in illegally?	duced, assisted, abetted, or aided any	alien to try to ente	r the United States	Yes	No 🗌
(1. Illicitly trafficked in any c trafficking of any controll	ontrolled substance, or knowingly as ed substance?	sisted, abetted, or c	olluded in the illicit	Yes	No 🗌
n s	nembership or funds for, or h upport to any person or organ	conspired to engage in, or do you int ave you through any means ever assi- nization that has ever engaged or con-	sted or provided an spired to engage in	y type of material	d Yes 🗌	No 🗌

Pa	rt 3. Processing Information (Continued)		
5.	Do you intend to engage in the United States in:		
	a. Espionage?	Yes	No 🗌
	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 🗌
	c. Any activity to violate or evade any law prohibiting the export from the United States of goods, technology, or sensitive information?	Yes	No 🗌
6.	Have you EVER been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?	Yes	No 🗌
7.	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 🗌
8.	Have you EVER been deported from the United States, or removed from the United States at government expense, excluded within the past year, or are you now in exclusion, deportation, removal, or rescission proceedings?	Yes	No 🗌
9.	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 🗌
10.	Have you EVER left the United States to avoid being drafted into the U.S. Armed Forces?	Yes	No 🗌
11.	Have you EVER 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 🗌
12.	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 🗌
13.	Do you plan to practice polygamy in the United States?	Yes	No 🗌
14.	Have you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:		
	a. Acts involving torture or genocide?	Yes	No 🗌
	b. Killing any person?	Yes	No 🗌
	c. Intentionally and severely injuring any person?	Yes	No 🗌
	d. 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 🗌
15.	Have you EVER :		
	a. 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. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?	Yes	No 🗌
16.	Have you EVER 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 🗌

Part 3. Processing Information (Continued)	
17. Have you EVER 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 No
18. Have you EVER received any type of military, paramilitary, or weapons training?	Yes No No
Part 4. Accommodations for Individuals With Disabilities and/or Impairments (See Page 10 of before completing this section.)	f the instructions
Are you requesting an accommodation because of your disability(ies) and/or impairment(s)? If you answered "Yes," check any applicable box:	Yes No No
a. I am deaf or hard of hearing and request the following accommodation(s) (if requesting a sign-lang indicate which language (e.g., American Sign Language)):	guage interpreter,
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):	/or impairment(s) and

Part 5. Signature (Read the information on penalties on **Page 10** of the instructions before completing this section. You must file this application while in the United States.)

Your Registration With U.S. Citizenship and Immigration Services

"I understand and acknowledge that, under section 262 of the Immigration and Nationality Act (INA), as an alien who has been or will be in the United States for more than 30 days, I am required to register with U.S. Citizenship and Immigration Services (USCIS). I understand and acknowledge that, under section 265 of the INA, I am required to provide USCIS with my current address and written notice of any change of address within 10 days of the change. I understand and acknowledge that USCIS will use the most recent address that I provide to USCIS, on any form containing these acknowledgements, for all purposes, including the service of a Notice to Appear should it be necessary for USCIS to initiate removal proceedings against me. I understand and acknowledge that if I change my address without providing written notice to USCIS, I will be held responsible for any communications sent to me at the most recent address that I provided to USCIS. I further understand and acknowledge that, if removal proceedings are initiated against me and I fail to attend any hearing, including an initial hearing based on service of the Notice to Appear at the most recent address that I provided to USCIS or as otherwise provided by law, I may be ordered removed in my absence, arrested, and removed from the United States."

Selective Service Registration

The following applies to you if you are a male at least 18 years of age, but not yet 26 years of age, who is required to register with the Selective Service System: "I understand that my filing Form I-485 with U.S. Citizenship and Immigration Services (USCIS) authorizes USCIS to provide certain registration information to the Selective Service System in accordance with the Military Selective Service Act. Upon USCIS acceptance of my application, I authorize USCIS to transmit to the Selective Service System my name, current address, Social Security Number, date of birth, and the date I filed the application for the purpose of recording my Selective Service registration as of the filing date. If, however, USCIS does not accept my application, I further understand that, if so required, I am responsible for registering with the Selective Service by other means, provided I have not yet reached 26 years of age."

Part 5. Signature (Continued)	Applicantle Statement (Charles)		
	Applicant's Statement (Check one)		
I can read and understand English, and as my answer to each question.	I have read and understand each and every quest	ion and instruction	on on this form, as well
language, a la	n on this form, as well as my answer to each quen nguage in which I am fluent, by the person name ry question and instruction on this form, as well a	d in Interpreter	's Statement and
	e laws of the United States of America, that the ire not withheld any information that would affect	-	
I authorize the release of any information to determine eligibility for the benefit I am se	From my records that U.S. Citizenship and Immig teking.	ration Services (USCIS) needs to
		Date	Daytime Phone Number
Signature (Applicant)	Print Your Full Name	(mm/dd/yyyy)	(include area code)
NOTE : If you do not completely fill out the eligible for the requested benefit, and this contact that the second	is form or fail to submit required documents liste application may be denied.	d in the instructi	ons, you may not be found
	Interpreter's Statement and Signature		
I certify that I am fluent in English and the	below-mentioned language.		
Language Used (language in which applied	cant is fluent)		
•	very question and instruction on this form, as well, and the applicant has understood each and every		-
		Date	Phone Number
Signature (Interpreter)	Print Your Full Name	(mm/dd/yyyy)	(include area code)
D 4 (C' 4 CD D	E ICOA EL AL		
Part 6. Signature of Person Prepari	ng Form, If Other Than Above		
I declare that I prepared this application at t	he request of the above applicant, and it is based or	all information o	of which I have knowledge.
		Date	Phone Number
Signature	Print Your Full Name	(mm/dd/yyyy)	(include area code)
Firm Name and Address	E-Mail A	ddress (if any)	