INSTRUCTION TABLE OF CHANGES FORM I-817,

Application for Family Unity Benefits OMB Number 1615-0005 9/24/2012

Reason for Revision: To incorporate full page format on the instructions and 2 column format on the form to expedite processing, to incorporate standard language in the instructions, and to clarify areas of the instructions.

LOCATION	CURRENT VERSION	PROPOSED VERSION
Page 1, Instructions	Read these instructions carefully to properly complete this form. If you need more space to complete an answer, use a separate sheet of paper. Write your name and Alien Registration Number (A-Number), if you have one, at the top of each sheet and indicate the number of the item to which the answer refers.	Deleted. This information has been integrated into "How to Fill Out Form I-817" on page 2.
Page 1, What Is the Purpose of This Form?	For requesting initial benefits under the Family Unity Program, or to request an extension of such benefits.	Page 1, What Is the Purpose of This Form? Form I-817 is used to request initial benefits under the Family Unity Program, or to request an extension of such benefits.
Page 1, When Should I Use Form I-817?	You should use Form I-817 to request initial benefits under the Family Unity Program as well as to request an extension of such benefits. 1. Form I-817 should be used if you are applying for Family Unity Program benefits under section 301 of the Immigration Act of 1990 (IMMACT 90), or if you are applying under section 1504 of the Legal Immigration Family Equity Act (LIFE Act) Amendments. 2. If you are granted family unity benefits under IMMACT 90, you are authorized to remain in the United States for two years and you will receive an Employment Authorization Document (EAD) valid for the same period. 3. If you are granted family unity benefits under the LIFE Act Amendments, you are authorized to remain in the United States for two years (or one year if your spouse or parent has not adjusted to lawful permanent	Page 1, When Should I Use Form I-817? 1. You should only file Form I-817 with supporting documents to request an initial or an extension of authorization to remain in the United States under the Family Unity Program and to receive an initial or an extension of Form I-766, Employment Authorization Document (EAD). 2. Use this form if you are applying for Family Unity Program benefits under section 301 of the Immigration Act of 1990 (IMMACT 90), or if you are applying under section 1504 of the Legal Immigration Family Equity Act (LIFE Act Amendments). a. If you are granted Family Unity benefits under IMMACT 90, you are authorized to remain in the United States for 2 years and you will receive an EAD valid for the same period. b. If you are granted Family Unity benefits under the LIFE Act, you are authorized to

resident status). You will receive an EAD valid for the same period. You should file only this Form I-817 application with supporting documents to request authorization to remain in the United States and an EAD.

4. If after being granted family unity benefits under either IMMACT 90 or the LIFE Act Amendments you intend to travel outside the United States temporarily, you must apply for advance authorization by completing Form I-131, Application for Travel Document. Upon approval of Form I-131, you will be issued Form I-512, Authorization of Parole Into the United States. Advance parole allows you to leave the United States and be paroled back into the United States when you return.

remain in the United States for 2 years (only 1 year if your spouse or parent has not adjusted to lawful permanent resident status). You will receive an EAD valid for the same period.

- **c.** If you are granted Family Unity benefits under either IMMACT 90 or the LIFE Act and you intend to travel outside the United States temporarily, you must apply for advance authorization by completing Form I-131, Application for Travel Document. Advance parole allows you to be paroled back into the United States when you return.
- **d.** For purposes of this application, a legalized alien is someone who obtained temporary or permanent residence in the United States through Legalization under section 210 or 245A of the Immigration and Nationality Act (INA), or under section 1504(b) of Public Law 106-553 (the LIFE Act). For the purposes of this form, a legalized alien is also someone who obtained permanent residence through a Cuban/Haitian Adjustment under section 202 of the Immigration Reform and Control Act of 1986.

Page 1, General Instructions

You must fill out a separate Form I-817 for each person who needs to apply for family unity benefits. Follow the steps to complete the application process:

Step 1 – Read the Reasons for Filing Form I-817

Step 2 – Fill Out Form I-817

Step 1 Reasons for Filing Form I-817.

Under IMMACT 90

To prove eligibility for Family Unity Program benefits under **IMMACT 90**, you must meet the following conditions:

A. You must have entered the United States prior to May 5, 1988, or December 1, 1988, as appropriate to the section of law that applies to you, and have been continuously residing in the United States since that date.

Page 1, General Instructions

Each application or petition must be properly signed and filed. A photocopy of a signed application or a typewritten name in place of a signature is not acceptable.

You must fill out a separate Form I-817 for each person who needs to apply for Family Unity benefits.

Each application or petition must be accompanied by the appropriate filing fee.

An application is not considered properly filed until accepted by USCIS.

If you are under 14 years of age, your parent or legal guardian may sign the application on your behalf.

Evidence. You must submit all required initial evidence along with all the supporting documentation with your application at the time

B. You were the spouse or unmarried child under 21 years of age as of May 5, 1988, or December1, 1988, as appropriate, and you have been continuously eligible since that date for family-sponsored status based on your relationship to that person.

NOTE: If you were an unmarried child under 21 years of age as of May 5, 1988, or December 1, 1988, as appropriate who has since been married, you will be regarded as continuously eligible for family-sponsored immigration benefits only if you were married after the legalized alien, through whom your eligibility was gained, naturalized as a U.S. citizen.

NOTE: For information on the two dates, May 5, 1988, or December 1, 1988, go to **Page 2** of these instructions and read "Relationship to a legalized alien."

of filing.

Biometrics Services Appointment. After accepting your application and ensuring completeness, USCIS will inform you in writing when to go to your local USCIS Application Support Center (ASC) for your biometrics services appointment. Failure to attend the biometrics services appointment may result in denial of your application.

Copies. Unless specifically required that an original document be filed with an application or petition, a legible photocopy may be submitted. Original documents submitted when not required may remain a part of the record, and will not be automatically returned to you.

Translations. Any document containing foreign language submitted to USCIS must be accompanied by a full English language translation which the translator has certified as complete and accurate, and by the translator's certification that he or she is competent to translate from the foreign language into English.

How to Fill Out Form I-817

- 1. Type or print legibly in black ink.
- 2. If extra space is needed to complete any item, attach a continuation sheet, write your name and Alien Registration Number (A-Number) (if any), at the top of each sheet of paper, indicate the **Part** and **item number** to which your answer refers, and date and sign each sheet.
- 3. Answer all questions fully and accurately. If an item is not applicable or the answer is "none," leave the space blank.

Reasons for Filing Form I-817

1. Under IMMACT 90

To prove eligibility for Family Unity Program benefits under **IMMACT 90**, you must establish that you meet the following conditions:

- a. You must have entered the United States prior to May 5, 1988, or December 1, 1988, as appropriate to the section of law that applies to you, and have been continuously residing in the United States since that date.
- b. You must be able to prove that on May 5, 1988 or December 1, 1988 (as appropriate); you were either the spouse or the unmarried child under 21 years of age of a person who became a legalized alien.

NOTE: If you were an unmarried child under 21 years of age of a legalized alien as of May 5, 1988, or December 1, 1988, as appropriate, and you have since married, you will be regarded as continuously eligible for Family Unity Program benefits if you satisfy the other eligibility requirements.

- c. If you are in one of the categories of aliens defined in 8 CFR Section 236.13, you are ineligible for benefits under the Family Unity Program.
 - d. Your qualifying relative (spouse or parent), on whom you base your application for Family Unity Program benefits has maintained his or her status as a legalized alien or as a U.S. citizen if he or she naturalized. If deceased, your spouse or parent maintained his or her status until his or her death.

NOTE: For information on the two dates, May 5, 1988, or December 1, 1988, see item **number 3, Family Unity Benefits Eligibility,** and read items (1) a.-g. regarding relationship to a legalized alien.

e. If you are in one of the categories of aliens defined in 8 CFR Section 236.13, you are **ineligible** for Family Unity benefits under the IMMACT 90.

Page 2 "General	
Instructions," # 2,	
Under LIFE Act	
Amendments	

To prove eligibility for Family Unity Program benefits under the LIFE Act Amendments, you must be the spouse or unmarried child under 21 years of age of an alien who is eligible for adjustment under section 1504(b) of the LIFE Act and:

- **A.** Your spouse or parent has applied for or been granted adjustment if status; and
- **B.** You entered the United States before December 1, 1988, and resided in the United States on that date.

A legalized alien is someone who obtained temporary or permanent residence in the United States as a Special Agricultural Worker under section 210 of the Immigration and Nationality Act (INA) through Legalization under section 245A of the INA, or under section 1504(b) of Public Law 106-553 (the LIFE Act). For the purposes of this form, a legalized alien is also someone who obtained permanent residence through a Cuban/Haitian Adjustment under section 202 of the Immigration Reform and Control Act of 1986.

Page 2 - 3, A. Relationship to a legalized alien:

- **3.** The classes of individuals eligible to apply for family unity benefits are listed below. Check the box in **Part 2** of Form I-817 that matches your request.
- **A.** Relationship to a legalized alien:
- 1. I am the spouse of an alien who was legalized under section 245A of the INA, and we have been married since at least May 5, 1988. **Check box A** if your relationship was established on or before May 5, 1988 and you currently meet the residence and continuous eligibility requirements.
- **2.** I am the spouse of an alien who was legalized as a Special Agricultural Worker under section 210 of the INA, and we have been married since at least December 1, 1988. **Check box B** if your relationship was

Page 2, Reasons for Filing Form I-817 2. Under LIFE Act

To prove eligibility for Family Unity benefits under the LIFE Act, you must establish that you meet the following conditions:

- a. You entered the United States before December 1, 1988, and resided in the United States on that date.
- b. You are the spouse or unmarried child under 21 years of age of an alien who is eligible for adjustment under section 1504(b) of the LIFE Act Amendments.
- c. Your spouse or parent has applied for or has been granted adjustment of status under the LIFE Act.
- d. If you are in one of the categories of aliens defined in 8 CFR Section 245a.32, you are <u>ineligible</u> for benefits under the LIFE Act Family Unity Program.
- e. The qualifying relationship between you and your spouse or parent continues to exist.

Page 3,

Reasons for Filing Form I-817

3. Family Unity Benefits Eligibility

The classes of individuals eligible to apply for Family Unity benefits are listed below. Select the box in **Part 2, Basis for Application,** of Form I-817 that matches your request.

- **1.** I am applying for Family Unity Benefits because (Select only one box):
 - **a.. On May 5, 1988,** I was the spouse of an alien who was legalized under section 245A of the INA **and** I currently meet all of the necessary residence and other continuous eligibility requirements.

established on or before December 1, 1988 and you currently meet the residence and continuous eligibility requirements.

- 3. As of May 5, 1988, I was the unmarried child under 21 years of age of an alien who was legalized under section 245A of the INA. I am currently the child, son, or daughter of the same parent. That parent is either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before May 5, 1988 and maintained such status until his or her naturalization. **Check box C** if your relationship was established on or before May 5, 1988, and you currently meet the residence and continuous eligibility requirements.
- **4.** As of December 1, 1988, I was the unmarried child under 21 years of age of an alien who was legalized as a Special Agricultural Worker under section 210 of the INA. I am currently the child, son, or daughter of the same parent. That parent is either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before December 1, 1988, and maintained such status until his or her naturalization. **Check box D** if your relationship was established on or before December 1, 1988, and you currently meet the residence and continuous eligibility requirements.
- 5. I am the spouse of a legalized alien who adjusted under section 202 of the Immigration Reform and Control Act of 1986 (Cuban/Haitian Adjustment), and we have been married since at least May 5, 1988.

 Check box E if your relationship was established on or before May 5, 1988, and you currently meet the residence and continuous eligibility requirements.
- **6.** As of May 5, 1988, I was the unmarried child under 21 years of age of an alien who adjusted under section 202 of the Immigration Reform and Control Act of 1986 (Cuban/Haitian Adjustment), and we have been married since at least May 5,1988. I am currently the child, son, or daughter of the same parent. That parent is either a legalized alien or a naturalized U.S. citizen who was a

If $\underline{\mathbf{all}}$ of the above are applicable, **check box** \mathbf{a} .

b. On December 1, 1988, I was the spouse of an alien who was legalized as a Special Agricultural Worker under section 210 of the INA and I currently meet all of the necessary residence and other continuous eligibility requirements.

If <u>all</u> of the above are applicable, **check box b**

c. On May 5, 1988, I was the unmarried child under 21 years of age, of a person who was legalized under section 245A of the INA, and I currently meet all of the necessary residence and other continuous eligibility requirements.

If <u>all</u> of the above are applicable, **check box c.**

d. On December 1, 1988, I was the unmarried child under 21 years of age, of a person who was legalized as a Special Agricultural Worker under section 210 of the INA, **and** I currently meet all of the necessary residence and other continuous eligibility requirements.

If <u>all</u> of the above are applicable, **check box d**.

e. On May 5, 1988, I was the spouse of a legalized alien who adjusted under section 202 of the Immigration Reform and Control Act of 1986 (Cuban/Haitian Adjustment) **and** I currently meet all of the necessary residence and other continuous eligibility requirements.

If <u>all</u> of the above are applicable, **check box e**.

f. On May 5, 1988, I was the unmarried child of a legalized alien who adjusted under section 202 of the Immigration Reform and Control Act of 1986 (Cuban/Haitian Adjustment), **and** I currently meet all of the necessary residence and other continuous

	legalized alien on or before May 5, 1988 and	eligibility requirements.
	maintained such status until his or her	engionity requirements.
	naturalization. Check box F if your	If all of the above are applicable, check box
	relationship was established on or before May	f.
	5, 1988, and you currently meet the residence	
Page 2 - 3, B.	and continuous eligibility requirements. B. Relationship to an alien eligible for	Page 3,
Relationship to a	adjustment of status under the provisions	Relationship to an alien eligible for
legalized alien:	of section 1104(b) of Public Law 106-553	adjustment of status under the provisions of
	(the LIFE Act):	section 1104(b) of Public Law 106-554 (the
		LIFE Act):
	1. I am the spouse of an alien who is eligible	
	for and has filed for adjustment under section 1504 of Public Law 106-554, the LIFE Act. I	g. I am the spouse of an alien who is eligible for and has filed for or has been granted
	entered the United States before December 1,	adjustment pursuant to section 1504 of Public
	1988, and was in the United States on that	Law 106-554, the LIFE Act Amendments; I
	date. Check box G if your spouse entered the	entered the United States before December
	United States before December 1, 1988, and	1, 1988 , and resided in the United States on
	you were in the United States on that date.	that date.
	2. I am the unmarried child of an alien who is	If <u>all</u> of the above are applicable, check box
	eligible for and has filed for adjustment under	g.
	section 1504 of Public Law 106-554, the	
	LIFE Act. I entered the United States before December 1, 1988, and was in the United	
	States on that date. Check box H if you	
	entered the United States before December 1,	
	1988, and were in the United States on that	NOTE: When a legalized alien becomes a U.S.
	date.	citizen
	NOTE: When a legalized alien becomes a	
	U.S. citizen	
Pages 3 - 4	4. I am requesting:	Page 3,
	***	3. Family Unity Benefits Eligibility,(2.) I am requesting:
		(2.) I am requesting.
	B. An extension of family unity benefits	***
	under section 301 of IMMACT 90. Check	h An automaion of Family Unity bonefits
	box B if you already have benefits under the Family Unity Program and are requesting an	b. An extension of Family Unity benefits under section 301 of IMMACT 90. Select
	extension. You must submit proof that Form	box b if you already have benefits under the
	I-130, Petition for Alien Relative, has been	Family Unity Program and are requesting an
	filed on your behalf if the legalized alien	extension. You must submit the following:
	through whom family unity benefits were	4 F.1 J.F 1400 P.11
	obtained is a lawful permanent resident or naturalized U.S. citizen.	1. a. Evidence that Form I-130, Petition for Alien Relative, has been filed on
	naturalized O.S. Chizell.	your behalf, if applicable; and
		b., that the legalized alien through
		whom Family Unity benefits were
		obtained is a lawful permanent resident
		or naturalized U.S. citizen; or

Page 3 – Step 2. Fill Out Form I-817	Use black ink only This form is divided into Parts 1 through 8. The following information will help you fill out the form. Part 1. Information About You 1. Family Name 2. Alien Registration Number (A-Number) 3. U.S. Social Security Number 4. Date of Birth 5. Country of Birth – Give the name of the country 6. Country of Citizenship - Give the name of the country 7. Home Address Give 8. Mailing Address Give 9. Daytime Telephone Number Give	c. proof that you no longer have a relationship with your spouse or the legalized alien; 2. A copy of your prior Form I-817 approval notice. c. *** d. An extension of Family Unity benefits under section 1504 of P.L. 106-554, the LIFE Act Amendments. Select box d if you already have benefits under section 1504 of P.L. 106-554 and are requesting an extension. Note: If you previously qualified for Family Unity benefit under section 1504, you may be eligible to apply for benefits under Section 301 of IMMACT 90. 3. I am claiming relationship to: Select one box that explains your relationship to the legalized alien. Page 4, Fill Out Form I-817 This form is divided into Parts 1 through 8. The following information will help you fill out the form. Part 1. Information About You 1. Alien Registration Number (A-Number(s)
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		Provide the name of the country
		10.a10.e. Physical Address Provide
		11.a11.f. Mailing Address Provide
		12. Daytime Telephone Number Provide
		13. E-Mail Address Provide an E-Mail address where you can be reached.
Page 3, Part 2	Basis for Application	Page 5, Part 2. Basis for Application
	 Number 1 - Check one box that applies to your particular circumstance. Number 2 - Check one box that relates to what you are requesting. 	(1.) I am applying for Family Unity benefits because – Select one box that applies to your particular circumstance.
	what you are requesting.	(2.) I am requesting- Select one box that relates to what you are requesting.
		(3.) I am claiming relationship to – Select one box that relates to your relationship to the legalized alien.
Page 3, Part 3.	Additional Information The information requested is about you. You must provide all the requested information in numbers 1 through 5. You must answer all the questions numbered 6 through 36.	Page 5, Part 4. Additional Information The information requested is about you. You must provide all the requested information in numbers 1-24.f. You must answer all the questions numbered 25.a38.
Page 3, Part 4	Part 4. Information About Your Spouse or Parent	Page 5, Part 3. Information About Relationship
	The information requested is about the legalized alien through whom you are claiming eligibility or an applicant qualifying for Legalization under the LIFE Act.	A. Information About Your Spouse or Parent The information requested is about the legalized
	Tot Legalization under the LIPE Act.	alien through whom you are claiming eligibility or an applicant qualifying for Legalization under the LIFE Act. You must provide all the requested information in numbers 1a6.c.
Page 3, Part 5	Complete Only If You Are Applying Based on a Marital Relationship Provide the requested information about your	Page 5, Part 3, B. Complete IF You Are Applying Based on a Marital Relationship Or You Were
	qualifying marriage.	Previously Married

Page 3, Part 6	Part 6. Complete Only If You Are Applying Based on a Child/Parent Relationship 1. Provide the requested information about your relationship to the alien. 2. If you are married, divorced, or widowed, provide the requested information.	Complete this Part if you are applying based on a qualifying marital relationship or you were previously married. You must provide all the requested information in item numbers 1 -7.k. If not, go on to Part 3, "C. Complete Only if You Are Applying Based on a Child/Parent Relationship." 1. Check the box that reflects your marital status. 2. If you are married, divorced, or widowed, provide the requested information about your marriage(s). Page 5, Part 3, C. Complete Only If You Are Applying Based on a Child/Parent Relationship 1. Provide the requested information about your relationship to the alien. If you select the box of Parent based on circumstances not described above (e.g., legal custody), you need to explain in detail on a separate sheet of paper and submit supporting
Page 4, Part 7. Signature	 You must sign and date your application. If you do not sign the form, the application will be returned as incomplete. A parent or legal guardian may sign the application on behalf of a child under 14 years of age. 	of paper and submit supporting documentation required in accordance to the Foreign Affairs Manual. 2. If you were previously married, you must complete Part 3 section entitled B., "Complete If You Are Applying Based on a Marital Relationship Or You Were Previously Married," item numbers 17.k., then check item number 4 to indicate that you have done so. Page 6, Part 5. Signature of Applicant You must sign and date your application. If you do not sign the form, the application will be returned to you as incomplete. A parent or legal guardian may sign the application on behalf of a child under 14 years of age.
Page 4, Part 8. Signature of	1. If you do not fill out Form I-817, the preparer must also sign and date the	Page 6, Part 6. Signature of Person Preparing This

Person Preparing Form, If Other than	form and give his or her address.	Application, If Other Than the Applicant
Above	If the preparer is a business or organization, its name must be included on the application.	If you do not fill out Form I-817, the preparer must also sign and date the form and give his or her address.
	3. Signature for placement on Employment Authorization Document.	2. If the preparer is a business or organization, its name must be included on the application.
	4. Make sure that your signature fits in the box provided. No part of your signature should be outside the box.	D. C
		Page 6, New Part 7:
		Part 7. Interpreter's Statement and Signature
		If you are an interpreter for the applicant, you must provide all the requested information in number $1-7$.
		Page 6, Part 8. Signature for Placement on Employment Authorization Card
		Make sure that your signature fits into the box provided. No part of your signature should be outside the box.
Page 4, Evidence Requirements	Attach copies showing the front and back of the documents you need to support your application. Do not send original	Page 6, Evidence Requirements
	documents unless instructed to do so. NOTE: If you send us a document in a foreign language, it must have a full English translation that the translator has certified as complete and correct. The translator must also certify that he or she is competent to translate the foreign language into English.	(Deleted 1 st paragraph, and moved info in NOTE on translations to be under General Instructions, page 1 . Section letters have been made lower case alpha)
	1. If you are requesting initial family unity benefits under section 301 of IMMACT 90.	1. If you are requesting initial Family Unity Benefits under section 301 of IMMACT 90.
	Copies of	Copies of
	A ***	a. ***
	B***	b. *** c. If the legalized alien is your parent-Provide

	C***	evidence
Page 5, 2. If you are requesting initial Family Unity Benefits under section 1504 of Pub. L. 106-554, LIFE Act, as amended.	2. If you were born in wedlock and the legalized alien is your natural father, submit a copy of your birth certificate	c.(2) If you were born in wedlock and the legalized alien is your natural father, submit a copy (front and back) of your birth certificate (3) If you are the legitimated child of a legalized father, submit a copy, front and back, of your birth certificate (4) If you were born out of wedlock and the legalized alien is your natural father, submit a copy of the front and back of your birth certificate showing your father's name. Evidence showing that a bona fide parent-child relationship exists *** (6) If you are a copy of the legal custody decree (including any official stamps or seals on the document) if your custody was obtained have lived together. NOTE: Page 7. 2. If you are requesting initial Family Unity Benefits under section 1504 of P. L. 106-554, LIFE Act Amendments. Copies of *** b.(2) If you were born your birth certificate showing your father's name, your parents' marriage certificate *** b.(4) If you were born Evidence showing that a bona fide parent-child relationship exists must also be submitted. (5)
		(6)
Page 5, 3. Secondary	Official	Page 8, 3. Secondary evidence (for applicants of both
evidence (for	***	section 301 of IMMACT 90 and section 1504
applicants of both		of P.L. 106-554, the LIFE Act Amendments).
section 301 of	As noted above, at least two affidavits	, ,
IMMACT 90 and	sworn to or affirmed by	Official

section 1504 of Public Law 106-554, the LIFE Act, as amended).		*** As noted above, at least 2 affidavits sworn to or affirmed by
Page 6, 4. Evidence of continuous residence requirements for family unity applicants under section 301 of IMMACT 90	You must submit at least three documents	Page 8, 4. Evidence of continuous residence requirements for Family Unity applicants under section 301 of IMMACT 90 You must submit at least 3 documents
Page 6,	You must submit documents	g Page 9,
5.Evidence	Tod must submit documents	5. Evidence requirements for Family Unity
requirements for	A. At least three documents	applicants under section 1504 of P.L. 106-
Family Unity		554, the LIFE Act Amendments.
applicants under section 1504 of		You must submit documents
Public Law 106-554,		Tou must submit documents
the LIFE Act, as amended.		a. At least 3 documents d

Page 7, 6. Request for extension of family		Page 9, 6. Request for extension of Family Unity Benefits.
unity benefits.	Copies of the following documents are evidence that the required relationship exists and that you may be eligible to file an application for extension of family unity benefits:	The following documents are evidence that the required relationship existed on May 5, 1988 or December 1, 1988, and that you may be eligible to file an application for extension of Family Unity benefits:
	***	***
	B. If the legalized alien through whom family unity benefits were	b. If the legalized alien through whom Family Unity benefits were
	C. Evidence that you have been granted family unity benefits in the past.	c. Evidence that you have been granted Family Unity benefits in the past.
	D. A list of all trips you have made outside the United States since you were last granted family unity benefits	d. A list of all trips you have made outside the United States since you were last granted Family Unity benefits
	***	***
Page 7, Biometrics Requirement	When required, biometric services,	Page 9, Deleted; this information has been moved to be under General Instructions.
Page 7, Photographs	You must submit two identical color photographs of yourself taken within 30 days of the filing of this application. The photographs must have a white background, be printed on thin paper with a glossy finish, and be un-mounted and un-retouched. *** Passport-style photos must be 2"x 2." The photos must be in color with full face, frontal view on white or off white background. Head height should measure 1" to 1 3/8" from top of hair to bottom of chin, and eye height is between 1 1/8" to 1 3/8" from bottom of photo. Your head must be bare unless you are wearing a headdress as required by a religious order of which you are a member. Using a pencil or felt pen, lightly print your name and Alien Receipt Number on the back of the	Page 10, Photographs You must submit 2 identical color photographs of yourself taken within 30 days of the filing of this application. The photographs must have a white background, be printed on thin paper with a glossy finish, and be un-mounted and unretouched. *** Passport-style photographs must be 2"x 2." The photographs must be in color with full face, frontal view on plain white or off white background. Head height should measure 1" to 1 3/8" from top of hair to bottom of chin, and eye height is between 1 1/8" to 1 3/8" from bottom of photograph. Your head must be bare unless you are wearing a headdress as required by a religious order of which you are a member. Using a pencil or felt pen, lightly print your

		back of the photograph.
Page 7 and 8, Where to File?	*** Please read the filing instructions below carefully, to assure you file your application at the correct location. ***	Page 10, Filing instructions have been moved to come after the "What Is the Filing Fee?" section. See below.
	1. If filing under section 1504 of Public Law 106-554, Life Act, as amended to request initial benefits, or to request an extension of previously acquired Family Unity Program benefits(Part 2, box "G" or "H" on the form), mail you application package to the USCIS Chicago Lockbox facility:	
	For U.S. Postal Service (USPS) deliveries: USCIS P.O. Box 805887 Chicago, IL 60680-4120	
	For Express mail or courier deliveries: USCIS Attn.: AOS 131 South Dearborn-3 rd Floor Chicago, IL 60603-5517	
	2. If you are filing under section 301 of IMMACT 90, and currently live or intend to live anywhere in the United States, Puerto Rico, the U.S. Virgin Islands, Guam, or the Commonwealth of Northern Mariana Island (Part 2, box "A" or "B" or "C" or "D" or "E" or "F" on the form) you must mail your application package to the USCIS Dallas Lockbox facility.	
	For U.S. Postal Service: USCIS P.O. Box 660162 Dallas, TX 75266 For Express mail or courier deliveries:	

USCIS Attn.: I-817 2501 S. State Highway, 121 Business Suite 400 Louisville, TX 75067 *** Page 8, What Is the Page 10, Filing Fee? (This section now precedes the Where To File An additional biometric fee of . . . for section.) What Is the Filing Fee? biometric services *** If you are under 14 years of age, no biometrics fee is required. An additional biometrics services fee of . . . for biometrics services. You may submit one check or money order for both the application and biometric fees, If you are under 14 years of age, no biometrics for a total of \$520. services fee is required. Use the following guidelines when you Use the following guidelines when you prepare prepare your check or money order for the your check or money order for the Form I-817 Form I-817 and biometrics services fees: fee: **1.** The check or money order must be drawn on **1.** The check or money order must be drawn on a bank or other financial institution located a bank or other financial institution located in the Unites States and must be payable in U.S. in the Unites States and must be payable in U.S. currency; and currency; and 2. Make the check or money order payable to **2.** Make the check or money order payable to **U.S.** Department of Homeland Security, U.S. Department of Homeland Security. unless: **NOTE:** Spell out U.S. Department of Homeland Security; do not use the initials "USDHS" or **A.** If you live in Guam, make it payable to Treasurer, Guam, "DHS." *** **B.** If you live in the U.S. Virgin Islands, make it payable to **Commissioner of Finance** of the Virgin Islands. Notice to Those Making Payment by Check... **How To Check If the Fees Are Correct?** How To Check If the Fees Are Correct? The form and biometric services fees on this The form fees on this form are current as of the edition date appearing in the lower right form are current as of the edition date appearing corner of this page. However, because USCIS in the lower left corner of this page. However, fees change periodically, you can verify if the because USCIS fees change periodically, you fees are correct by following one of the steps can verify if the fees are correct by following below: one of the steps below: 1. Visit USCIS' Web site at ww.uscis.gov, **1.** Visit our Web site at **ww.uscis.gov**, select select "FORMS," and check the appropriate fee; "FORMS," and check the appropriate fee; or

2. Review the Fee Schedule included in your

	form package if you called us to request the	7 Talaphana aug National Customar Carries
	form package if you called us to request the form; or 3. Telephone our National Customer Service Center at 1-800-375-5283 and ask for the fee information. Notice to Those Making Payment by Check	2. Telephone our National Customer Service Center at 1-800-375-5283 and ask for the fee information. For TDD (hearing impaired) call: 1-800-767-1833.
Page 7, Where To	Updated Filing Address Information	Page 10,
File?	The filing addresses provided on this form reflect the most current information as of the date this form was last revisedwww.uscis.gov "FORMS."	The filing instructions have been deleted from the form instructions and can be accessed on the USCIS web site. This is part of the initiative to standardize/streamline our forms. Where To File?
		Improperly filed forms will be rejected, and the fee returned, with instructions to resubmit the entire filing using the current form instructions.
		Please see the USCIS Web site at www.uscis.gov/i-817 or call our National Customer Service Center at 1-800-375-5283 for the most current information about where to file this benefit request. For TDD (hearing impaired) call: 1-800-767-1833.
Page 9, Address	If you have changed your address, you must	Page 11,
Change	inform USCIS of your new address. For	Address Changes
	information on filing a change of address go to the USCIS Web site at www.uscis.gov/addresschange or contact the National Customer Service Center at 1-800-375-5283. NOTE: Do not submit a change of address request to the USCIS Lockbox facilities because the USCIS Lockbox facilities do not process change of address requests.	If you have changed your address, you must inform USCIS of your new address. For information on filing a change of address go to the USCIS Web site at www.uscis.gov/addresschange or contact the National Customer Service Center at 1-800-375-5283. For TDD (hearing impaired) call: 1-800-767-1833. NOTE: Do not submit a change of address request to the USCIS Lockbox facilities because the USCIS Lockbox facilities do not process change of address requests.
		3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3

Page 9, Processing Information	Any Form I-817 that is not signed or accompanied by the correct fee, will be rejected with a notice the Form I-817 is deficient. You may correct the deficiency and resubmit Form I-817. An application or petition is not considered properly filed until accepted by USCIS. Initial Processing Once Form I-817 has been acceptedwe may deny your Form I-817. *** Decision. The decision on Form I-817 involves a determination of whether you have established eligibility for the requested benefit. You will be notified of the decision in writing.	Page 11, Processing Information Initial Processing. Once the application has been acceptedwe may deny your application. *** Decision. The decision on Form I-817 involves a determination of whether you have established eligibility for the requested benefit. You will be notified of the decision in writing. If your application is approved, an Employment Authorization Document (EAD) will be mailed to you. If your application is denied, we will mail you a notice explaining the reasons for the denial.
Page 9, USCIS Forms and Information	To order USCIS forms, call our toll-free number at 1-800-870-3676 . You can also get USCIS forms and information on immigration laws, regulations, and procedures by telephoning our National Customer Service Center at 1-800-375-5283 or visiting our Internet Web site at www.uscis.gov . As an alternative to waiting in line for assistance at your local USCIS office, you can now schedule an appointment through our Internet-based system, InfoPass . To access the system, visit our Web site	Page 11, USCIS Forms and Information You can get USCIS forms and immigration- related information on the USCIS Web site at www.uscis.gov. You may order USCIS forms by calling our toll-free number at 1-800-870- 3676. You may also obtain forms and information by telephoning our USCIS National Customer Service Center at 1-800-375-5283. For TDD (hearing impaired) call: 1-800-767- 1833. As an alternative to waiting in line for assistance at your local USCIS office, you can now schedule an appointment through the USCIS Internet-based system, InfoPass. To access the system, visit the USCIS Web site
		Page 11, New section Penalties If you knowingly and willfully falsify or conceal a material fact or submit a false document with your Form I-817, we will deny your Form I-817, and may deny any other immigration benefit. In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

Page 9 and 10	Privacy Act Notice	Page 12, USCIS Privacy Act Statement
	We ask for the information on this form, and associated evidence, to determine if you have established eligibility for the immigration benefit for which you are filing. Our legal right to ask for this information can be found in the Immigration and Nationality Act, as amended. We may provide this information to other government agencies. Failure to provide this information, and any requested evidence, may delay a final decision or result in denial of your Form I-817.	AUTHORITIES: The information requested on this form, and the associated evidence, is collected under the Immigration and Nationality Act, section 101, et seq. PURPOSE: The primary purpose for providing the requested information on this form is to determine if you have established eligibility for the immigration benefit for which you are filing. The information you provide will be used to grant or deny the benefit sought.
		DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of your form.
		ROUTINE USES: The information you provide on this form may be shared with other Federal, State, local, and foreign government agencies and authorized organizations following approved routine uses described in the associated published system of records notices [DHS-USCIS-007 - Benefits Information System and DHS-USCIS-001 - Alien File, Index, and National File Tracking System of Records, which can be found at www.dhs.gov/privacy]. The information may also be made available, as appropriate, for law enforcement purposes or in the interest of national security.
Page 10, Paperwork Reduction Act	An agency Send comments regarding this burden estimate: U.S. Citizenship and Immigration Services, Regulatory Products Division, Office of the Executive Secretariat, Massachusetts Avenue, N.W., Washington, DC 20529-2020; OMB No 1615-0005. Do not mail your application to this address.	Page 12, Paperwork Reduction Act An agency Send comments regarding this burden estimate: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue, N.W., Washington, DC 20529-2020; OMB No 1615-0005. Do not mail your completed Form I-817 to this address.
Page 10, Application Check List	Did you completely fill out and sign the form?Did you attach three color photos? Did you attach a check or money order for the appropriate fee for Form I-817, plus the	Deleted.

appropriate fee if you are required to obtain
fingerprints or other biometrics services?
For your records you should keep copies of
your application and supporting documents.