**Table of Changes – FORM**

**FORM G-28I, Notice of Entry of Appearance as Attorney or Accredited Representative In Matters Outside the Geographical Confines of the United States**

**OMB Number: 1615-0105**

**02/25/2015**

**Reason for Revision:** USCIS ELIS Account Number inclusion; re-format to two columns and add numbering to data collections

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| **Current Section and Page Number** | **Current Text** | **Proposed Text** |
| **Page 1, Part 3. Name and Signature of Attorney** | Name of AttorneyComplete Address of Attorney(Street Number and Street Name, Suite No., City, Country, Mailing Code)Phone Number *(Include country code)*Fax Number, if any *(Include country code)*E-Mail Address, if any | **Part 1. Information About Attorney****1.** USCIS ELIS Account Number (*if any*)***Name and Address of Attorney*** *[new sub-header]***2.a.** Family Name *(Last Name)***2.b.** Given Name *(First Name)***2.c.** Middle Name**3.** Name of Law Firm **4.a.** Street Number and Name**4.b.** Apt.Ste.Flr.**4.c.**  City or Town**4.d.** Province**4.e.** Postal Code**4.f.** Country**5.** Telephone Number**6.** Fax Number**7.** E-Mail Address *(if any)***8.** Mobile Telephone Number *(if any)* |
| **Page 1, Part 1. Notice of Appearance as Attorney Admitted to Practice Outside the United States** | **A. Notice of Appearance as Attorney Admitted to Practice Outside the United States**USCIS – List the form number(s):ICE – List the specific matter in which appearance is entered:CBP – List the specific matter in which appearance is entered:**B. I hereby enter my appearance as attorney at the request of:**List petitioner, Applicant, or Respondent. NOTE: Provide the mailing address of the Petitioner, Applicant, or Respondent, and **not** the address of the attorney PetitionerApplicantRespondentPrincipal Petitioner, Applicant, or RespondentName: Last First MiddleA Number or Receipt NumberAddress: Street Number and Street NameApt. No.CityCountryMailing Code | **[Page 1]****Part 2. Notice of Appearance as Attorney Admitted to Practice Outside the United States**This appearance relates to immigration matters before *(select* ***only one*** *box)*: **1.a.** USCIS**1.b.** List the form numbers**2.a.** ICE**2.b.** List the specific matter in which appearance is entered**3.a.** CBP**3.b.** List the specific matter in which appearance is entered**4.** I enter my appearance as attorney at the request of *(select* ***applicable*** *box)*:[Deleted]ApplicantPetitionerRespondent (ICE, CBP)**[Page 2]*****Information About Applicant, Petitioner, or Respondent*** [new sub-header]**5.a.**Family Name *(Last Name)***5.b.**Given Name *(First Name)***5.c.**Middle Name**6.**Name of Company or Organization *(if applicable)***7.**USCIS ELIS Account Number (*if any*)**8.** Alien Registration Number (A-Number) or Receipt Number (*if any*)**9.** Daytime Telephone Number**10.** E-Mail Address *(if any)****[Page 2]******Mailing Address*** *[new sub-header]***NOTE:** Provide the mailing address of the applicant, petitioner, or respondent. If the applicant, petitioner, or respondent has used a safe mailing address on the application or petition being filed with this Form G-28I, provide it in these spaces.**11.a.** Street Number and Name**11.b.** Apt.Ste.Flr.**11.c.**  City or Town**11.f.** Province**11.g.** Postal Code**11.h.** Country |
| **Page 1, Part 2. Information about Attorney** *(Check applicable item(s) below)* | **A.** I am licensed to practice law in(name of country(ies) authorized to practice law), and I amin good standing in a court of general jurisdiction of(name of country(ies)) where I reside and am engaged in the practice of law.**I am not** or **am subject to any order of any court or administrative agency disbarring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law (If you are subject to any order(s), explain fully on reverse side).****B.** I am associated with[Attorney].The attorney of record previously filed Form G-28I in this case, and my appearance as an attorney is at his or her request. *(If you check this item, also complete item* ***A*** *above in* ***Part 2****)****.*** | **[Page 2]****Part 3. Eligibility Information For Attorney**Select **all applicable** items.**1.a.** I am licensed and authorized to practice law in the following countries. (If you need additional space, use **Part 6.**) Licensing Authority[ ]**1.b.** Bar Number *(if applicable)***1.c.** I am in good standing in a court of general jurisdiction in the following countries where I reside and am engaged in the practice of law. *(If you need additional space, use* ***Part 6.****)***1.d. I** *(choose one)* ***am not*/*am*** subject to any order of any court or administrative agency disbarring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law. If you are subject to any orders, explain in the space below. (If you need additional space, use **Part 6.**)**2.** I am associated with[Attorney]**,** the attorney of record who previously filed Form G-28I in this case, and my appearance as an attorney is at his or her request. **NOTE:**  If you select this item, also complete **Item Numbers 1.a. - 1.c.** |
| **Page 1, Part 1. Notice of Appearance as Attorney Admitted to Practice Outside the United States** | Pursuant to the Privacy Act of 1974 and DHS policy, I hereby consent to the disclosure to the named attorney of any record pertaining to me that appears in a any system of records of USCIS, USCBP, or USICE.Signature of Petitioner, Applicant, or RespondentDate | **[Page 2]****Part 4. Applicant, Petitioner, or Respondent Consent to Representation, Contact Information and Signature** [section header]Consent to Representation and Release of Information [sub header]**1.** I have requested the representation of and consented to being represented by the attorney named in **Part 1.** of this form. According to the Privacy Act of 1974 and DHS policy, I also consent to the disclosure to the named attorney of any record pertaining to me that appears in any system of records of USCIS, ICE, or CBP. When you (the applicant, petitioner, requestor, or respondent) are represented, DHS will send notices to both you and your attorney either through mail or electronic delivery.DHS will also send the Form I-94, Arrival Departure Record, to you **unless** you select **Item Number 2.a.** in **Part 4.** All secure identity documents and Travel Documents will be sent to you (the applicant, petitioner, requestor, or respondent) unless you ask us to send those documents to your attorney of record.If you do not want to receive original notices or secure identity documents directly, but would rather have such notices and documents sent to your attorney of record, please select **all applicable** boxes below:**2.a. \_\_**I request that DHS send any notice (including Form I-94) on an application, petition, or request that I have filed with DHS to the business address of my attorney of record as listed in this form. I understand that I may change this election at any future date through written notice to DHS.**2.b. \_\_**I request that DHS send any secure identity document, such as a Permanent Resident Card, Employment Authorization Document, or Travel Document, that I am approved to receive and authorized to possess, to the business address of my attorney of record as listed in this form. I consent to having my secure identity document sent to my attorney of record and understand that I may request, at any future date and through written notice to DHS, that DHS send any secure identity document to me directly.**3.a.** Signature of Applicant, Petitioner, or Respondent**3.b.** Date of Signature *(mm/dd/yyyy)* |
| **Page 1, Part 3. Name and Signature of Attorney** | I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before the Department of Homeland Security. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.Attorney Bar Number(s), if anySignature of AttorneyDate | **[Page 3]****Part 5. Signature of Attorney**I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before the Department of Homeland Security.I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.**[Deleted]****1.a.** Signature of Attorney**1.b.** Date of Signature *(mm/dd/yyyy)* |
| **New** |  | **[Page 3]****Part 6. Additional Information**Use the space provided below to provide additional information pertaining to **Part 3., Item Numbers 1.a. – 1.c.** |