OMB No. 1615-0022;Exp. 12/31/2014

Form I-363, Request to Enforce Affidavit of Financial Support and Intent to Petition for Legal Custody for P. L. 97-359 Amerasian

Department of Homeland Security
U.S. Citizenship and Immigration Services

Type or print in black ink. - See instructions on reverse side.

1. Beneficiary's Family Name (Capital Letters) First Name Middle Name

2. Alien Registration Number
A -

3. Mailing Address in U.S. (Number, Street, Apt.) (City) (State) (Zip Code)
C/O:

4. Employer or School (Name and Address

5. Country of Citizenship

6. Date of Birth *(mm/dd/yyyy)*

7. Place of Birth (City or Town) (Province or State) (Country)

8. Applicant's Phone Number
(Include Area Code)

9. Initially Admitted to U.S. at (City and State)

10. Beneficiary's Relationship to Sponsor

11. Destination in U.S. at Time of Initial Admission

12. Beneficiary's file is at USCIS office in (City and State)

13. Sponsor's Family Name (Capital Letters) First Name Middle Name

☐ U.S. Citizen
☐ Lawful Permanent Resident

14. Sponsor's Present Address

15. Sponsor's Employer

Sponsor's Phone Number
(Include Area Code)

16. Does the beneficiary live with the sponsor? ☐ Yes ☐ No

17. If not, with whom does the beneficiary live?

18. How is the beneficiary supported? (Sponsor? Other Sources?)

How long has the beneficiary been supported by the sponsor?

19. Is the beneficiary in the legal custody of the sponsor? ☐ Yes ☐ No (Explain)

20. Has the sponsor stopped all support? ☐ Yes ☐ No

Since when? *(mm/dd/yyyy)*

21. Has the sponsor give any reason for withdrawal of support? ☐ Yes ☐ No

If "Yes," describe the circumstances under which the sponsor ceased his or her support.

NOTE: *Attach a copy of Form I-361, Affidavit of Financial Support and Intent to Petition for Legal Custody for P. L. 97-359 Amerasian, if available.*

22. Relationship of Applicant

☐ Self
☐ Individual Having Legal Custody of the Beneficiary
☐ Representative of the Agency Having Legal Custody of the Beneficiary
☐ Guardian Ad Litem

23. Signature and Date of Person Preparing Form, If Other Than Applicant

24. Signature of Applicant and Date

Do Not Write Below This Line.

ACTION BLOCK (For use by USCIS officer) This applicant was interviewed by me ☐ in person ☐ by phone

on _____ *(Date)* at _____ *(Place)*

Remarks: ☐ Investigation Completed on _____ *(Date)* _____ *(Signature and Title)*
☐ Investigation Not Necessary

☐ Enforcement Recommended
☐ No Action Recommended _____ *(Regional Counsel and Region)*

Recommendation Forwarded to U.S. Attorney
Date:

Received	Trans In	Ret'd Trans Out	Completed