

TABLE OF CHANGES-FORM
Form I-566, Interagency Record of Request - A, G, or NATO Dependent Employment
Authorization or Change/Adjustment To/From A, G, or NATO Status
OMB Number 1615-0027
Date: 05/09/2016

Reason for Revision: Incorporated new format into form and instructions and standard language; incorporated ELIS Account Number into form

Current Page and Section	Current Text	Proposed Text
New		<p>[Page 1]</p> <p>To be completed by an attorney or accredited representative (if any).</p> <p>Select this box if Form G-28 is attached.</p> <p>Attorney State Bar Number (if applicable)</p> <p>Attorney or Accredited Representative USCIS Online Account Number (if any)</p>
<p>Page 1, Part 1. Information About You <i>(The person seeking employment authorization or change/adjustment of status.)</i></p>	<p>1. Family Name (Last Name) Given Name (First Name) Middle Name</p> <p>2. Home Address Street Number and Name Apt. Number City State Zip Code</p> <p>3. Mailing Address Street Number and Name Apt. Number City State Zip Code</p> <p>Daytime Phone Number <i>(with area code)</i></p> <p>4. Date of Birth <i>(mm/dd/yyyy)</i></p>	<p>[Page 1]</p> <p>Part 1. Information About You <i>(The person seeking employment authorization or change/adjustment of status.)</i></p> <p>Full Name</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p>Physical Address</p> <p>2.a. Street Number and Name 2.b. Apt. Ste. Flr. [Fillable Field] 2.c. City or Town 2.d. State 2.e. ZIP Code</p> <p>Mailing Address</p> <p>3.a. In Care Of Name 3.b. Street Number and Name 3.c. Apt. Ste. Flr. [Fillable Field] 3.d. City or Town 3.e. State 3.f. ZIP Code</p> <p>[Deleted]</p> <p>Other Information</p> <p>4. Date of Birth <i>(mm/dd/yyyy)</i></p>

	<p>5. Country of Birth 6. Country of Citizenship 7. Gender Male/Female 8. Marital Status Married/Not Married</p> <p>9. A-Number (if any)</p> <p>10. U.S. Social Security Number (if any) 11. DOS Personal Identification Number (PID) 12. I-94 Number (Arrival-Departure Document) 13. Passport or Travel Document Number 14. Country of Issuance for Passport or Travel Document Number 15. Expiration Date for Passport or Travel Document (mm/dd/yyyy) 16. Date of Last Entry into United States (mm/dd/yyyy)</p> <p>17. Current Immigration Status 18. Relationship to Principal (if applicable)</p>	<p>5. Country of Birth 6. Citizenship or Nationality 7. Gender Male/Female 8. Marital Status Single/Married/Divorced/Widowed/Legally Separated/Marriage Annulled/Other 9. Alien Registration Number (A-Number) (if any) 10. U.S. Social Security Number (if any) 11. DOS Personal Identification Number (PID) 12. USCIS Online Account Number (if any) 13. Form I-94 Arrival-Departure Record Number 14. Passport or Travel Document Number 15. Country of Issuance for Passport or Travel Document Number 16. Expiration Date for Passport or Travel Document (mm/dd/yyyy) 17. Date of Last Entry into United States (mm/dd/yyyy) 18. Current Immigration Status 19. Relationship to Principal (if applicable)</p>
<p>Page 1., Part 2. Information About Principal Alien</p>	<p>1. Family Name (Last Name) Given Name (First Name) Middle Name</p> <p>2. Home Address Street Number and Name Apt. Number City State Zip Code</p> <p>3. Date Tour of Duty Expected to End (mm/dd/yyyy) 4. Country of Citizenship 5. Marital Status Married/Not Married</p> <p>6. Job Title 7. DOS Personal Identification Number (PID)</p>	<p>[Page 1] Part 2. Information About Principal Alien</p> <p>Full Name 1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p>Physical Address 2.a. Street Number and Name 2.b. Apt. Ste. Flr. 2.c. City or Town 2.d. State 2.e. ZIP Code</p> <p>Other Information 3. Date Tour of Duty Expected to End (mm/dd/yyyy) 4. Citizenship or Nationality 5. Marital Status Single/Married/Divorced/Widowed/Legally Separated/Marriage Annulled/Other 6. Job Title 7. DOS Personal Identification Number (PID) 8. USCIS Online Account Number (if</p>

	<p>8. I-94 Number (<i>Arrival-Departure Document</i>)</p> <p>9. Passport or Travel Document Number</p> <p>10. Country of Issuance for Passport or Travel Document Number</p> <p>11. Expiration Date for Passport or Travel Document (<i>mm/dd/yyyy</i>)</p>	<p>any)</p> <p>9. Form I-94 Arrival-Departure Record Number</p> <p>10. Passport or Travel Document Number</p> <p>11. Country of Issuance for Passport or Travel Document Number</p> <p>12. Expiration Date for Passport or Travel Document (<i>mm/dd/yyyy</i>)</p>
<p>Page 2, Part 3. Type of Request</p>	<p>1. I am requesting employment authorization as (select one):</p> <p>a. spouse</p> <p>b. son or daughter, age: who: is a full-time, post-secondary student is disabled</p> <p>c. other dependent recognized by the DOS: _</p> <p>2. I am requesting change/adjustment of status (select one)</p> <p>a. Change of nonimmigrant status to A, G, or NATO nonimmigrant- specifically to: _</p> <p>b. Section 247(a), immigrant to A or G nonimmigrant.</p> <p>c. Change to other nonimmigrant status from A, G, or NATO- specifically to: _</p> <p>d. Adjustment from A, G, or NATO nonimmigrant to immigrant.</p> <p>e. A-1, A-2, G-1, or G-2, nonimmigrant applying under Section 13 of the Act of September 11, 1957.</p>	<p>[Page 2]</p> <p>Part 3. Type of Request</p> <p>1. I am requesting employment authorization as (Select one):</p> <p>1.a. Spouse</p> <p>1.b. Son or daughter, age [Fillable Field], who is: A full-time, post-secondary student Disabled</p> <p>1.c. Other dependent recognized by the DOS</p> <p>2. I am requesting change/adjustment of status (Select one):</p> <p>2.a. Change of nonimmigrant status to A, G, or NATO nonimmigrant- specifically to</p> <p>2.b. Section 247(a), immigrant to A or G nonimmigrant.</p> <p>2.c. Change to other nonimmigrant status from A, G, or NATO- specifically to</p> <p>2.d. Adjustment from A, G, or NATO nonimmigrant to immigrant.</p> <p>2.e. A-1, A-2, G-1, or G-2 nonimmigrant applying under Section 13 of the Act of September 11, 1957.</p> <p>NOTE: This request is not required if you have changed from an A or G nonimmigrant to Asylum (protection) status.</p>
<p>Page 2, Certification (Submit two copies with original signatures.)</p>		<p>[Page 2]</p> <p>Part 4. Requestor’s Statement, Contact Information, Certification, and Signature</p> <p>NOTE: Read the Penalties section of the Form I-566 Instructions before completing this part.</p> <p>NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.</p>

	<p>I certify under penalty of perjury that the foregoing is true and correct. I understand false information is a basis for denial or termination of the benefit requested and for other penalties provided by law and regulation. If I am requesting employment authorization, I further certify that I do not have a criminal record. I have not violated United States immigration and/or visa</p>	<p>1.a. I can read and understand English, and I have read and understand every question and instruction on this request and my answer to every question.</p> <p>1.b. The interpreter named in Part 5. read to me every question and instruction on this request and my answer to every question in _____, a language in which I am fluent, and I understood everything.</p> <p>[Page 3]</p> <p>2. At my request, the preparer named in Part 6., _____, prepared this request for me based only upon information I provided or authorized.</p> <p>Requestor’s Contact Information</p> <p>3. Requestor’s Daytime Telephone Number</p> <p>4. Requestor’s Mobile Telephone Number (if any)</p> <p>5. Requestor’s Email Address (if any)</p> <p>Requestor’s Certification</p> <p>Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.</p> <p>I further authorize release of information contained in this request, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.</p> <p>I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with my application, and that all of this information is complete, true, and correct.</p>
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	<p>laws, I have not worked illegally in the United States, and I have paid Social Security and all applicable taxes on all employment in the United States.</p> <p>Signature of Applicant Date (mm/dd/yyyy)</p>	<p>Requestor's Signature 6.a. Requestor's Signature 6.b. Date of Signature (mm/dd/yyyy)</p> <p>NOTE TO ALL REQUESTORS: If you do not completely fill out this request or fail to submit required documents listed in the Instructions, USCIS may deny your request.</p>
<p>Page 2, Part 5. Your Personal Information</p>	<p>Name of Applicant (<i>Family, Given, Middle</i>)</p> <p>Date of Birth (mm/dd/yyyy)</p> <p>DOS Personal Identification Number (<i>PID</i>)</p>	<p>[Deleted]</p>
<p>New</p>		<p>[Page 3]</p> <p>Part 5. Interpreter's Contact Information, Certification, and Signature</p> <p>Provide the following information about the interpreter.</p> <p>Interpreter's Full Name 1.a. Interpreter's Family Name (Last Name) 1.b. Interpreter's Given Name (First Name) 2. Interpreter's Business or Organization Name (if any)</p> <p>Interpreter's Mailing Address 3.a. Street Number and Name 3.b. Apt. Ste. Flr. 3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country</p> <p>Interpreter's Contact Information 4. Interpreter's Daytime Telephone Number 5. Interpreter's Email Address (if any)</p>

		<p>Interpreter’s Certification</p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and _____, which is the same language specified in Part 4., Item Number 1.b., and I have read to this requestor in the identified language every question and instruction on this request and his or her answer to every question. The requestor informed me that he or she understands every instruction, question, and answer on the request, including the Applicant’s Certification, and has verified the accuracy of every answer.</p> <p>[Page 4]</p> <p>Interpreter’s Signature 6.a. Interpreter’s Signature 6.b. Date of Signature (mm/dd/yyyy)</p>
<p>New</p>	<p>NOTE: Certifying official must have this information and page to complete process.</p>	<p>[Page 4]</p> <p>Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Request, if Other Than the Requestor</p> <p>Provide the following information about the preparer.</p> <p>Preparer’s Full Name 1.a. Preparer’s Family Name (Last Name) 1.b. Preparer’s Given Name (First Name) 2. Preparer’s Business or Organization Name (if any)</p> <p>Preparer’s Mailing Address 3.a. Street Number and Name 3.b. Apt. Ste. Flr. 3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country</p> <p>Preparer’s Contact Information 4. Preparer’s Daytime Telephone Number 5. Preparer’s Fax Number (if any) 6. Preparer’s Email Address (if any)</p>

		<p>Preparer's Statement</p> <p>7.a. I am not an attorney or accredited representative but have prepared this form on behalf of the authorized individual and with the authorized individual's consent.</p> <p>7.b. I am an attorney or accredited representative and have prepared this form on behalf of the authorized individual and with the authorized individual's consent.</p> <p>Preparer's Certification</p> <p>By my signature, I certify, under penalty of perjury, that I prepared this request at the request of the requestor. The requestor then reviewed this completed request and informed me that he or she understands all of the information contained in, and submitted with, his or her request, including the Applicant's Certification, and that all of this information is complete, true, and correct. I completed this request based only on information that the requestor provided to me or authorized me to obtain or use.</p> <p>Preparer's Signature</p> <p>8.a. Preparer's Signature</p> <p>8.b. Date of Signature (mm/dd/yyyy)</p>
New		<p>[Page 5]</p> <p>Part 7. Additional Information</p> <p>If you need extra space to provide any additional information within this request, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this request or attach a separate sheet of paper. Include your name and A-Number (if any) at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.</p> <p>1.a. Family Name (Last Name) [Auto-populated field]</p> <p>1.b. Given Name (First Name) [Auto-populated field]</p> <p>1.c. Middle Name [Auto-populated field]</p> <p>2. A-Number (if any) [Auto-populated field]</p>

		<p>3.a. Page Number 3.b. Part Number 3.c. Item Number 3.d. [Fillable Field]</p> <p>4.a. Page Number 4.b. Part Number 4.c. Item Number 4.d. [Fillable Field]</p> <p>5.a. Page Number 5.b. Part Number 5.c. Item Number 5.d. [Fillable Field]</p> <p>6.a. Page Number 6.b. Part Number 6.c. Item Number 6.d. [Fillable Field]</p> <p>7.a. Page Number 7.b. Part Number 7.c. Item Number 7.d. [Fillable Field]</p>
<p>Page 2., For Official Use Only Part 6. Certification by Diplomatic Mission, International Organization, NATO/HQ SACT, or NATO Member State (<i>Certifying official must have this information and page to complete process.</i>)</p>	<p>[Page 2] For Official Use Only</p> <p>Part 6. Certification by Diplomatic Mission, International Organization, NATO/HQ SACT, or NATO Member State (<i>Certifying official must have this information and page to complete process.</i>)</p> <p>I certify that the information provided on the first page of this Form I-566 is true and correct to the best of my knowledge and according to our official records.</p> <p>I further certify that the applicant's eligibility for employment authorization has been verified under the provisions of: A bilateral agreement with: A <i>de facto</i> agreement with: <i>Check all that apply:</i> Without a numerical limit Based on principal alien's G-4 status With a numerical limit and this applicant is within the limit; and</p>	<p>[Page 6] For Official Use Only</p> <p>Part 8. Certification by Diplomatic Mission, International Organization, NATO/HQ SACT, or NATO Member State</p> <p>NOTE: Certifying official must have this information and page to complete process.</p> <p>1. I certify that the information provided on the first page of this Form I-566 is true and correct to the best of my knowledge and according to our official records.</p> <p>2. I further certify that the requestor's eligibility for employment authorization was verified under the provisions of: 2.a. A bilateral agreement with 2.b. A <i>de facto</i> agreement with 2.c. Select all that apply Without a numerical limit Based on principal alien's G-4 status With a numerical limit and this requestor is within the limit</p>

	<p>I further certify that the applicant for status as a principal alien is being offered the position below and DOS was notified. <i>Position:</i> <i>DOS Notification Date:</i></p> <p>Printed Name Certifying Officer or Official</p> <p>Duty/Title</p> <p>Signature of Certifying Officer or Official Date (mm/dd/yyyy) Phone Number (include area code)</p> <p>Name and Address of Diplomatic Mission, International Organization, NATO/HQ SACT, or NATO Member State</p> <p>Official Seal</p>	<p>3. I further certify that the requestor for status as a principal alien is being offered the position below and DOS was notified Position DOS Notification Date (mm/dd/yyyy)</p> <p>4.a. Certifying Officer or Official's Last Name 4.b. Certifying Officer or Official's First Name 5. Certifying Officer or Official's Duty/Title 6.a. Certifying Officer or Official's Signature 6.b. Date of Signature (mm/dd/yyyy) 7. Telephone Number (including area code) 8. Name of Diplomatic Mission, International Organization, NATO/HQ SACT, or NATO Member State</p> <p>Address of Diplomatic Mission, International Organization, NATO/HQ SACT, or NATO Member State 9.a. In Care Of Name 9.b. Street Number and Name 9.c. Apt. Ste. Flr. [Fillable Field] 9.d. City or Town 9.e. State 9.f. ZIP Code 9.g. Province 9.h. Postal Code 9.i. Country</p> <p>Official Seal</p>
		<p>Page 7,</p> <p><i>For Official Use Only</i></p> <p>Part 9. DOS, NATO/HQ SACT, and or USUN Use Only</p> <p>1. The Department of State, NAT/HQ SACT, and/or USUN</p> <p>a. Recommends the request be granted b. Recommends the request be denied c. If the recommendation is for denial, provide a reasons for such a recommendation</p> <p>2. Date of Decision (mm/dd/yyyy)</p>

		<p>3. Telephone Number (include area code)</p> <p>4. Office Protocol USUN NATO/HQ SACT Visa</p> <p>5. Signature 1</p> <p>6. Signature 2</p>
	<p>USCIS Use Only</p> <p>From: Adjudicator ID Number</p> <p>USCIS Office</p> <p>Office Telephone Number</p> <p>Alien Registration Number</p> <p>To: Protocol</p> <p>USUN</p> <p>NATO/HQ SACT</p> <p>Visa Office (Subject filed under Section 13. Advise USCIS of findings.)</p> <p>Adjustment or Change of Status</p> <p>Granted Date of Decision (mm/dd/yyyy)</p> <p>If change of status granted, write new status: _</p> <p>Denied Date of Decision (mm/dd/yyyy)</p> <p>If change of status granted, write new status</p> <p>Request for Employment Authorization: Granted Denied</p> <p>Date of Decision (mm/dd/yyyy)</p> <p>Valid to(mm/dd/yyyy)</p>	<p>Page 7,</p> <p>Part 10. USCIS USE ONLY</p> <p>From Adjudicator ID Number</p> <p>USCIS Office</p> <p>Office Telephone Number (with area code)</p> <p>A-Number/File Number</p> <p>To Protocol</p> <p>USUN</p> <p>NATO/HQ SACT</p> <p>Visa Office (Subject filed under Section 13. Advise USCIS of findings.)</p> <p>Adjustment or Change of Status</p> <p>Granted</p> <p>Denied</p> <p>Date of Decision (mm/dd/yyyy)</p> <p>If change of status granted, print new status</p> <p>Request for Employment Authorization: Granted Denied</p> <p>Date of Decision (mm/dd/yyyy)</p> <p>Date Valid Until (mm/dd/yyyy)</p>

	Classification DOS, USUN, NATO/HQ SACT, OR Visa Office Office Notified: Yes No Date of Notification (mm/dd/yyyy)	Classification DOS, USUN, NATO/HQ SACT, OR Visa Office Office Notified Yes No Date of Notification (mm/dd/yyyy)
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