

TABLE OF CHANGES – FORM
Form I-129F, Petition for Alien Fiancé(e)
OMB Number: 1615-0001
Submission Date 08/17/2016

Reason for Revision: To correct an error on the current form and to satisfy additional GAO requirements for IMBRA.

Current Section and Page Number	Current Text	Proposed Text
		START HERE - Type or print in black ink.
Pages 1-2, Part 1. Information About You	<p>[Page 1]</p> <p>3. Alien Registration Number (A-Number)</p> <p>10. U.S. Social Security Number (<i>if any</i>)</p> <p>1.a. Family Name (<i>Last Name</i>) 1.b. Given Name (<i>First Name</i>) 1.c. Middle Name</p> <p>Other Names Used</p> <p>9.a. Family Name (<i>Last Name</i>) 9.b. Given Name (<i>First Name</i>) 9.c. Middle Name</p> <p>Your Mailing Address 2.a. In Care of Name 2.b. Street Number and Name 2.c. Apt. Ste. Flr. 2.d. City or Town 2.e. State 2.f. ZIP Code 2.g. Province 2.h. Postal Code 2.i. Country</p>	<p>[Page 1]</p> <p>1. Alien Registration Number (A-Number) (<i>if any</i>) 2. USCIS Online Account Number (<i>if any</i>) 3. U.S. Social Security Number (<i>if any</i>)</p> <p>Select one box below to indicate the classification you are requesting for your beneficiary: 4.a. Fiancé(e) (K-1 visa) 4.b. Spouse (K-3 visa)</p> <p>5. If you are filing to classify your spouse as a K-3, have you filed Form I-130? Y/N</p> <p>Your Full Name [<i>section sub-header</i>] 6.a. Family Name (Last Name) 6.b. Given Name (First Name) 6.c. Middle Name</p> <p>Other Names Used [<i>section sub-header</i>]</p> <p>Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>7.a. Family Name (Last Name) 7.b. Given Name (First Name) 7.c. Middle Name</p> <p>Your Mailing Address [<i>section sub-header</i>] 8.a. In Care of Name 8.b. Street Number and Name 8.c. Apt. Ste. Flr. 8.d. City or Town 8.e. State 8.f. ZIP Code 8.g. Province 8.h. Postal Code 8.i. Country</p> <p>8.j. Is your current mailing address the same as</p>

your physical address? Y/N

If you answered “No,” provide your physical address in **Item Numbers 9.a.-9.h.**

[Page 2]

Your Address History [section sub-header]

Provide your physical addresses for the last five years, whether inside or outside the United States. Provide your current address first if it is different from your mailing address in **Item Numbers 8.a - 8.i.** If you need extra space to complete this section, use the space provided in **Part 8. Additional Information.**

Physical Address 1

- 9.a. Street Number and Name
- 9.b. Apt. Ste. Flr.
- 9.c. City or Town
- 9.d. State 9.e. ZIP Code
- 9.f. Province
- 9.g. Postal Code
- 9.h. Country

10.a. Date From (mm/dd/yyyy)

10.b. Date To (mm/dd/yyyy) [PRESENT]

Physical Address 2

- 11.a. Street Number and Name
- 11.b. Apt. Ste. Flr.
- 11.c. City or Town
- 11.d. State 11.e. ZIP Code
- 11.f. Province
- 11.g. Postal Code
- 11.h. Country

12.a. Date From (mm/dd/yyyy)

12.b. Date To (mm/dd/yyyy)

Your Employment History [section sub-header]

Provide your employment history for the last five years, whether inside or outside the United States. Provide your current employment first. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information.**

Employer 1

13. Full Name of Employer

- 14.a. Street Number and Name
- 14.b. Apt. Ste. Flr.
- 14.c. City or Town
- 14.d. State 14.e. ZIP Code
- 14.f. Province
- 14.g. Postal Code

	<p>7. Gender</p> <p>6. Date of Birth</p> <p>8. Marital Status Married/Widowed/Single/Divorced</p> <p>4. City/Town/Village of Birth</p> <p>5. Country of Birth</p>	<p>14.h. Country</p> <p>15. Your Occupation (specify)</p> <p>16.a. Employment Start Date (mm/dd/yyyy) 16.b. Employment End Date (mm/dd/yyyy)</p> <p>Employer 2</p> <p>17. Full Name of Employer</p> <p>18.a. Street Number and Name 18.b. Apt. Ste. Flr. 18.c. City or Town 18.d. State 18.e. ZIP Code 18.f. Province 18.g. Postal Code 18.h. Country</p> <p>19. Your Occupation (specify)</p> <p>20.a. Employment Start Date (mm/dd/yyyy) 20.b. Employment End Date (mm/dd/yyyy)</p> <p>Other Information [section sub-header]</p> <p>21. Gender 22. Date of Birth (mm/dd/yyyy) 23. Marital Status Single/Married/Divorced/Widowed 24. City/Town/Village of Birth 25. Province or State of Birth 26. Country of Birth</p> <p>Information About Your Parents [subheader]</p> <p>Parent 1's Information</p> <p>27.a. Family Name (Last Name) 27.b. Given Name (First Name) 27.c. Middle Name 28. Date of Birth 29. Gender Male Female 30. Country of Birth 31.a. City/Town/Village of Residence 31.b. Country of Residence</p> <p>Parent 2's Information</p> <p>Full Name of Parent 2 32.a. Family Name (Last Name) 32.b. Given Name (First Name) 32.c. Middle Name 33. Date of Birth 34. Gender Male Female 35. Country of Birth 36.a. City/Town/Village of Residence 36.b. Country of Residence</p> <p>37. Have you ever been previously married? Y/N</p>
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	<p>Name of Prior Spouse 1 11.a. Family Name (<i>Last Name</i>) 11.b. Given Name (<i>First Name</i>) 11.c. Middle Name 11.d. Date Marriage Ended (<i>mm/dd/yyyy</i>)</p> <p>Name of Prior Spouse 2 12.a. Family Name (<i>Last Name</i>) 12.b. Given Name (<i>First Name</i>)</p> <p>[Page 2]</p> <p>12.c. Middle Name 12.d. Date Marriage Ended (<i>mm/dd/yyyy</i>)</p> <p>My citizenship was acquired through (Select only one box):</p> <p>13.a. Birth in the United States 13.b. Naturalization 13.c. Parents</p> <p>13.d. Have you obtained a Certificate of Naturalization or a Certificate of Citizenship in your name? Y/N</p> <p>If "Yes," complete the following:</p> <p>13.d.1. Certificate Number 13.d.2. Place of Issuance 13.d.3. Date of Issuance (<i>mm/dd/yyyy</i>)</p> <p>14. Have you ever filed for this or any other alien fiancé(e) or husband/wife before? Y/N</p> <p>If you answered "Yes," provide the following for each alien (<i>attach additional sheets as necessary</i>)</p> <p>14.a. Alien Registration Number (A-Number) 14.b. Family Name (<i>Last Name</i>) 14.c. Given Name (<i>First Name</i>) 14.d. Middle Name 14.e. Date of Filing (<i>mm/dd/yyyy</i>) 14.f. City or Town 14.g. State</p>	<p>If you answered "Yes" to Item Number 37., provide the names of each spouse and the date that each prior marriage ended in Item Numbers 38.a. - 39. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>Name of Previous Spouse 38.a. Family Name (<i>Last Name</i>) 38.b. Given Name (<i>First Name</i>) 38.c. Middle Name 39. Date Marriage Ended (<i>mm/dd/yyyy</i>)</p> <p>[Delete.]</p> <p>Your Citizenship Information [subheader]</p> <p>You are a U.S. citizen through (select only one box):</p> <p>40.a. Birth in the United States 40.b. Naturalization 40.c. U.S. citizen Parents</p> <p>41. Have you obtained a Certificate of Naturalization or a Certificate of Citizenship in your own name? Y/N</p> <p>If you answered "Yes" to Item Number 41., complete Item Numbers 42.a. - 42.c.</p> <p>42.a. Certificate Number 42.b. Place of Issuance 42.c. Date of Issuance (<i>mm/dd/yyyy</i>)</p> <p>Additional Information [subheader]</p> <p>43. Have you ever filed Form I-129F for any other beneficiary? Y/N</p> <p>If you answered "Yes" to Item Number 43., provide the responses to Item Number 44. - 46. for each previous beneficiary. If you need to provide information for more than one beneficiary, use the space provided in Part 8. Additional Information.</p> <p>44. A-Number (if any) 45.a. Family Name (<i>Last Name</i>) 45.b. Given Name (<i>First Name</i>) 45.c. Middle Name 46. Date of Filing (<i>mm/dd/yyyy</i>) [Delete.] [Delete.]</p>
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	<p>14.h. Result</p>	<p>47. What action did USCIS take on Form I-129F (for example, approved, denied, revoked)?</p> <p>48. Do you have any children under 18 years of age?</p> <p>If you answered “Yes” to Item Number 48., provide the ages for your children under 18 years of age in Item Numbers 49.a. - 49.b.</p> <p>[Page 3]</p> <p>Provide the ages for your children under 18 years of age. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>49.a. Age _____ 49.b. Age _____</p> <p>Provide all U.S. states and foreign countries in which you have resided since your 18th birthday.</p> <p>Residence 1 50.a. State _____ 50.b. Country _____</p> <p>Residence 2 51.a. State _____ 51.b. Country _____</p>
<p>Pages 2-5, Part 2. Information About Your Alien Fiancé(e), Item Number 1.</p>	<p>[Page 2]</p> <p>Part 2. Information About Your Alien Fiancé(e)</p> <p>1. Identify the classification sought for your beneficiary (<i>select one</i>):</p> <ul style="list-style-type: none"> <input type="radio"/> K-1 Fiancé <input type="radio"/> K-3 Spouse <p>2.a. Family Name (Last Name) 2.b. Given Name (First Name) 2.c. Middle Name</p> <p>11. Alien Registration Number (A-Number) 12. U.S. Social Security Number (if any) 6. Date of Birth (<i>mm/dd/yyyy</i>) 8. Gender M/F 9. Marital Status Married/Widowed/Single/Divorced 4. City/Town/Village of Birth 5. Country of Birth 7. Country of Citizenship</p> <p>Other Names Used (Including Maiden Name)</p>	<p>[Page 3]</p> <p>Part 2. Information About Your Beneficiary</p> <p>[Delete.]</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p>2. A-Number (<i>if any</i>) 3. U.S. Social Security Number (if any) 4. Date of Birth (<i>mm/dd/yyyy</i>) 5. Gender M/F 6. Marital Status Single/Married/Divorced/Widowed 7. City/Town/Village of Birth 8. Country of Birth 9. Country of Citizenship or Nationality</p> <p>Other Names Used [subheader]</p> <p>Provide all other names you have ever used, including aliases, maiden name, and nicknames.</p>

	<p>10.a. Family Name (<i>Last Name</i>) 10.b. Given Name (<i>First Name</i>) 10.c. Middle Name</p> <p><i>Alien Fiance(e)'s Mailing Address</i> 3.a. In Care of Name 3.b. Street Number and Name 3.c. Apt. Ste. Flr. 3.d. City or Town 3.e. State 3.f. Zip Code 3.g. Postal Code 3. h. Province 3.i. Country</p>	<p>If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>[no change]</p> <p>[Page 3]</p> <p><i>Mailing Address for Your Beneficiary</i> 11.a. In Care Of Name 11.b. Street Number and Name 11.c. Apt. Ste. Flr. 11.d. City or Town 11.e. State 11.f. ZIP Code 11.g. Province 11.h. Postal Code 11.i. Country</p> <p><i>Your Beneficiary's Address History</i> [section sub-header]</p> <p>Provide your beneficiary's physical addresses for the last five years, whether inside or outside the United States. Provide your beneficiary's current address first if it is different from the mailing address in Item Numbers 11.a - 11.i. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p><i>Beneficiary's Physical Address 1</i> 12.a. Street Number and Name 12.b. Apt. Ste. Flr. 12.c. City or Town 12.d. State 12.e. ZIP Code 12.f. Province 12.g. Postal Code 12.h. Country</p> <p>13.a. Date From (mm/dd/yyyy) 13.b. Date To (mm/dd/yyyy) [PRESENT]</p> <p><i>Beneficiary's Physical Address 2</i> 14.a. Street Number and Name 14.b. Apt. Ste. Flr. 14.c. City or Town 14.d. State 14.e. ZIP Code 14.f. Province 14.g. Postal Code 14.h. Country</p> <p>15.a. Date From (mm/dd/yyyy) 15.b. Date To (mm/dd/yyyy)</p> <p><i>Your Beneficiary's Employment History</i> [section sub-header]</p> <p>Provide your beneficiary's employment history for the last five years, whether inside or outside</p>
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the United States. Provide your current employment first. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information.**

Beneficiary's Employer 1

16. Full Name of Employer

17.a. Street Number and Name

17.b. Apt. Ste. Flr.

17.c. City or Town

17.d. State 17.e. ZIP Code

17.f. Province

17.g. Postal Code

17.h. Country

18. Beneficiary's Occupation (specify)

19.a. Employment Start Date (mm/dd/yyyy)

19.b. Employment End Date (mm/dd/yyyy)

Beneficiary's Employer 2

20. Full Name of Employer

21.a. Street Number and Name

21.b. Apt. Ste. Flr.

21.c. City or Town

21.d. State 21.e. ZIP Code

21.f. Province

21.g. Postal Code

21.h. Country

22. Beneficiary's Occupation (specify)

23.a. Employment Start Date (mm/dd/yyyy)

23.b. Employment End Date (mm/dd/yyyy)

Information About Your Beneficiary's Parents
[subheader]

Parent 1's Information

24.a. Family Name (Last Name)

24.b. Given Name (First Name)

24.c. Middle Name

25. Date of Birth

26. Gender Male Female

27. Country of Birth

28.a. City/Town/Village of Residence

28.b. Country of Residence

Parent 2's Information

Full Name of Parent 2

29.a. Family Name (Last Name)

29.b. Given Name (First Name)

29.c. Middle Name

30. Date of Birth

31. Gender Male Female

	<p>Other Information About Your Alien Fiance(e)</p> <p>[Page 3]</p> <p>Name of Prior Spouse 1 13.a. Family Name (<i>Last Name</i>) 13.b. Given Name (<i>First Name</i>) 13.c. Middle Name 13.d. Date Marriage Ended (<i>mm/dd/yyyy</i>)</p> <p>Name of Prior Spouse 2 14.a. Family Name (<i>Last Name</i>) 14.b. Given Name (<i>First Name</i>) 14.c. Middle Name 14.d. Date Marriage Ended (<i>mm/dd/yyyy</i>)</p> <p>15. Has your fiancé(e) ever been in the United States? Y/N</p> <p>If your fiancé(e) is currently in the United States, complete the following:</p> <p>15.a. He or she last arrived as a: (visitor, student, exchange alien, crewman, stowaway, temporary worker, without inspection, etc.)</p> <p>15.b. 1-94 Arrival/Departure Record Number 15.c. Date of Arrival (<i>mm/dd/yyyy</i>) 15.d. Date authorized stay expired or will expire as shown on I-94 or I-95 (<i>mm/dd/yyyy</i>)</p> <p>15.e. Passport Number 15.f. Travel Document Number 15.g. Country of Issuance for Passport or Travel Document 15.h. Expiration Date for Passport or Travel Document (<i>mm/dd/yyyy</i>)</p>	<p>32. Country of Birth 33.a. City/Town/Village of Residence 33.b. Country of Residence</p> <p>Other Information About Your Beneficiary</p> <p>34. Has your beneficiary ever been previously married? Y/N</p> <p>If you answered “Yes” to Item Number 34., provide the names of each prior spouse and the date each prior marriage ended in Item Numbers 35.a. - 36. If you need to provide information for more than one spouse, use the space provided in Part 8. Additional Information.</p> <p>Name of Previous Spouse 35.a. Family Name (Last Name) 35.b. Given Name (First Name) 35.c. Middle Name 36. Date Marriage Ended (<i>mm/dd/yyyy</i>)</p> <p>[Delete.]</p> <p>37. Has your beneficiary ever been in the United States? Y/N</p> <p>If your beneficiary is currently in the United States, complete Item Numbers 38.a. - 38.h.</p> <p>[Page 4]</p> <p>38.a. He or she last entered as a (for example, visitor, student, exchange alien, crewman, stowaway, temporary worker, without inspection):</p> <p>38.b. 1-94 Arrival-Departure Record Number 38.c. Date of Arrival (<i>mm/dd/yyyy</i>) 38.d. Date authorized stay expired or will expire as shown on Form I-94 or I-95 (<i>mm/dd/yyyy</i>)</p> <p>38.e. Passport Number 38.f. Travel Document Number 38.g. Country of Issuance for Passport or Travel Document 38.h. Expiration Date for Passport or Travel Document (<i>mm/dd/yyyy</i>)</p> <p>39. Does your beneficiary have any children? Y/N</p> <p>If you answered “Yes” to Item Number 39.,</p>
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	<p>Complete the following for all children of your alien fiancé(e) (if any).</p> <p>Child 1 of Alien Fiancé(e) 16.a. Family Name (<i>Last Name</i>) 16.b. Given Name (<i>First Name</i>) 16.c. Middle Name</p> <p>17. Country of Birth 18. Date of Birth (<i>mm/dd/yyyy</i>)</p> <p>19.a. Street Number and Name 19.b. Apt. Ste. Flr. 19.c. City or Town 19.d. State 19.e. Zip Code 19.f. Postal Code 19.g. Province 19.h. Country</p> <p>Child 2 of Alien Fiancé(e) 20.a. Family Name (<i>Last Name</i>) 20.b. Given Name (<i>First Name</i>) 20.c. Middle Name 21. Country of Birth 22. Date of Birth (<i>mm/dd/yyyy</i>) 23.a. Street Number and Name 23.b. Apt. Ste. Flr. 23.c. City or Town 23.d. State 23.e. Zip Code 23.f. Postal Code 23.g. Province 23.h. Country</p> <p>[Page 4]</p> <p>Child 3 of Alien Fiancé(e) 24.a. Family Name (<i>Last Name</i>) 24.b. Given Name (<i>First Name</i>) 24.c. Middle Name 25. Country of Birth 26. Date of Birth (<i>mm/dd/yyyy</i>) 27.a. Street Number and Name 27.b. Apt. Ste. Flr. 27.c. City or Town 27.d. State 27.e. Zip Code 27.f. Postal Code 27.g. Province 27.h. Country</p>	<p>provide the following information about each child. If you need to provide information for more than one child, use the space provided in Part 8. Additional Information.</p> <p>[Delete.]</p> <p>Children of Beneficiary 40.a. Family Name (Last Name) 40.b. Given Name (First Name) 40.c. Middle Name</p> <p>41. Country of Birth 42. Date of Birth (mm/dd/yyyy)</p> <p>43. Does this child reside with your beneficiary? Y/N</p> <p>If the child does not reside with your beneficiary, provide the child's physical residence.</p> <p>44.a. Street Number and Name 44.b. Apt. Ste. Flr. 44.c. City or Town 44.d. State 44.e. ZIP Code 44.f. Province 44.g. Postal Code 44.h. Country</p> <p>[Delete.]</p> <p>[Delete.]</p>
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	<p>Address in the United States where your fiancé(e) intends to live.</p> <p>28.a. Street Number and Name 28.b. Apt. Ste. Flr. 28.c. City or Town 28.d. State 28.e. Zip Code</p> <p>Your fiancé(e)'s address abroad.</p> <p>29.a. Street Number and Name 29.b. Apt. Ste. Flr. 29.c. City or Town 29.d. Postal Code 29.e. Province 29.f. Country</p> <p>30. Daytime Phone Number/Extension</p> <p>If your fiancé(e)'s native alphabet uses other than Roman letters, write his or her name and address abroad in the native alphabet.</p> <p>31.b. Family Name (<i>Last Name</i>) 31.c. Given Name (<i>First Name</i>) 31.d. Middle Name</p> <p>Your fiancé(e)'s address abroad. (<i>Native Alphabet</i>)</p> <p>32.a. Street Number and Name 32.b. Apt. Ste. Flr. 32.c. City or Town 32.d. Postal Code 32.e. Province 32.f. Country</p> <p>33. Is your fiancé(e) related to you? Y/N</p> <p>33.a. If you are related, state the nature and degree of relationship, e.g., third cousin or maternal uncle, etc.</p> <p>34. Has your alien fiancé(e) met and seen you within the 2-year period immediately preceeding the filing of this petition? Yes/No</p> <p>34.a. Describe the circumstances under which you met. If you have not personally met each other, explain how the relationship was established. If you met your fiancé(e) or spouse through an international marriage broker, please explain those circumstances in</p>	<p>Address in the United States Where Your Beneficiary Intends to Live [subheader]</p> <p>45.a. Street Number and Name 45.b. Apt. Ste. Flr. 45.c. City or Town 45.d. State 45.e. ZIP Code</p> <p>46. Daytime Telephone Number</p> <p>[Page 4]</p> <p>Your Beneficiary's Physical Address Abroad [subheader]</p> <p>47.a. Street Number and Name 47.b. Apt. Ste. Flr. 47.c. City or Town 47.d. Province 47.e. Postal Code 47.f. Country</p> <p>48. Daytime Telephone Number</p> <p>[Page 5]</p> <p>Your Beneficiary's Name and Address in His or Her Native Alphabet</p> <p>49.a. Family Name (Last Name) 49.b. Given Name (First Name) 49.c. Middle Name</p> <p>50.a. Street Number and Name 50.b. Apt. Ste. Flr. 50.c. City or Town 50.d. Province 50.e. Postal Code 50.f. Country</p> <p>51. Is your fiancé(e) related to you? Y/N/N/A, beneficiary is my spouse</p> <p>52. Provide the nature and degree of relationship (for example, third cousin or maternal uncle).</p> <p>53. Have you and your fiancé(e) met in person during the two years immediately before filing this petition? Yes/No/N/A, beneficiary is my spouse</p> <p>If you answered "Yes" to Item Number 53., describe the circumstances of your in-person meeting in Item Number 54. Attach evidence to demonstrate that you were in each other's physical presence during the required two year period.</p>
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	<p>number 35.a. Explain in detail any reasons you may have for requesting that the requirement that you and your fiancé(e) must have met should not apply to you.</p> <hr/> <hr/> <p>35. Did you meet your fiancé(e) or spouse through the services of an international marriage broker? Y/N</p> <p>35.a. If you answered “Yes,” provide the Internet and/or Street Address below. In addition, attach a copy of the signed, written consent form the IMB obtained from your beneficiary authorizing the release of your beneficiary’s personal contact information to you. If additional space is needed, attach a separate sheet of paper.</p> <p>[Page 5]</p> <p>Your fiancé(e) will apply for a visa abroad at the American embassy or consulate at:</p> <p>36.a. City or Town</p>	<p>If you answered “No,” explain your reasons for requesting an exemption from the in person meeting requirement in Item Number 54. and provide evidence that you should be exempt from this requirement. Refer to Part 2., Item Numbers 53. - 54. of the Specific Instructions section of the Instructions for additional information about the requirement to meet. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>54. [Lines.]</p> <p>International Marriage Broker (IMB) Information [subheader]</p> <p>55. Did you meet your beneficiary through the services of an IMB? Y/N</p> <p>If you answered “Yes” to Item Number 55. provide the IMB’s contact information and Web site information below. In addition, attach a copy of the signed, written consent form the IMB obtained from your beneficiary authorizing your beneficiary’s personal contact information to be released to you.</p> <p>56. IMB’s Name (if any) 57.a. Family Name of IMB (Last Name) 57.b. Given Name of IMB (First Name) 58. Organization Name of IMB 59. Web site of IMB</p> <p>60.a. Street Number and Name 60.b. Apt. Ste. Flr. 60.c. City or Town 60.d. Province 60.e. Postal Code 60.f. Country</p> <p>61. Daytime Telephone Number</p> <p>Consular Processing Information [subheader]</p> <p>Your beneficiary will apply for a visa abroad at the U.S. Embassy or U.S. Consulate at:</p> <p>62.a. City or Town</p>
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	<p>36.b. Country</p> <p>Note: Designation of a U.S. embassy or consulate outside the country of your fiancé(e)'s last residence does not guarantee acceptance for processing by that foreign post. Acceptance is at the discretion of the designated embassy or consulate.</p>	<p>62.b. Country</p> <p>[Delete.]</p>
<p>Page 5, Part 3. Other Information</p>	<p>[Page 5]</p> <p>Part 3. Other Information</p> <p>1. If you are serving overseas in the Armed Forces of the United States, please answer the following:</p> <p>I presently reside or am stationed overseas and my current mailing address is:</p> <p>1.a. In Care of Name 1.b. Street Number and Name 1.c. Apt. Ste. Flr. 1.d. City or Town 1.e. State 1.f. ZIP Code 1.g. Province 1.h. Postal Code 1.i. Country</p> <p>2. Have you ever been convicted by a court of law (civil or criminal) or court martialled by a military tribunal for any of the following crimes:</p> <p>2.a. Domestic violence, sexual assault, child abuse and neglect, dating violence, elder abuse or stalking? (Please refer to Page 3 of the instructions for the full definition of the term “domestic violence”). Y/N</p> <p>2.b. Homicide, murder, manslaughter, rape, abusive sexual contact, sexual exploitation, incest, torture, trafficking, peonage, holding hostage, involuntary servitude, slave trade, kidnapping, abduction, unlawful criminal restraint, false imprisonment or an attempt to</p>	<p>[Page 6]</p> <p>Part 3. Other Information</p> <p>Criminal Information [subheader]</p> <p>NOTE: These criminal information questions must be answered even if your records were sealed, cleared, or if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>1. Have you EVER been subject to a temporary or permanent protection or restraining order (either civil or criminal)? Y/N</p> <p>[Delete]</p> <p>Have you EVER been arrested or convicted of any of the following crimes:</p> <p>2.a. Domestic violence, sexual assault, child abuse, child neglect, dating violence, elder abuse, stalking, or an attempt to commit any of these crimes? (See Part 3. Other Information, Item Numbers 1. - 3.c. of the Instructions for the full definition of the term “domestic violence.”)</p> <p>2.b. Homicide, murder, manslaughter, rape, abusive sexual contact, sexual exploitation, incest, torture, trafficking, peonage, holding hostage, involuntary servitude, slave trade, kidnapping, abduction, unlawful criminal restraint, false imprisonment, or an attempt to</p>

	<p>commit any of these crimes?</p> <p>2.c. Three or more convictions for crimes relating to a controlled substance or alcohol not arising from a single act? Y/N</p> <p>These questions must be answered even if your records were sealed or otherwise cleared; or if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. Using a separate sheet(s) of paper, provide information relating to the conviction(s), such as crime involved, date of conviction and sentence.</p> <p>3. If you have provided information about a conviction for a crime listed above and you were being battered or subjected to extreme cruelty by your spouse, parent, or adult child at the time of your conviction, check all of the following that apply to you:</p> <p>3.a. <input type="checkbox"/> I was acting in self-defense.</p> <p>3.b. <input type="checkbox"/> I violated a protection order issued for my own protection.</p> <p>3.c. <input type="checkbox"/> I committed, was arrested for, was convicted of, or plead guilty to committing a crime that did not result in serious bodily injury, and there was a connection between the crime committed and my having been battered or subjected to extreme cruelty.</p> <p>If your beneficiary is your fiancé(e) and: (a) this is the third (or more) Form I-129F petition that you have filed; or (b) this is the third (or more) Form I-129F petition you have filed and your</p>	<p>commit any of these crimes?</p> <p>2.c. Three or more arrests or convictions, not from a single act, for crimes relating to a controlled substance or alcohol? Y/N</p> <p>NOTE: If you were ever arrested or convicted of any of the specified crimes, you must submit certified copies of all court and police records showing the charges and disposition for every arrest or conviction. You must do so even if your records were sealed, expunged, or otherwise cleared, and regardless of whether anyone, including a judge, law enforcement officer, or attorney, informed you that you no longer have a criminal record. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>If you have provided information about a conviction for a crime listed in Item Numbers 2.a. - 2.c. and you were being battered or subjected to extreme cruelty at the time of your conviction, select all of the following that apply to you:</p> <p>[no change]</p> <p>[no change]</p> <p>3.c. <input type="checkbox"/> I committed, was arrested for, was convicted of, or pled guilty to a crime that did not result in serious bodily injury and there was a connection between the crime and me having been battered or subjected to extreme cruelty.</p> <p>4.a. Have you ever been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance in any country, excluding traffic violations (unless a traffic violation was alcohol- or drug-related or involved a fine of \$500 or more)? Y/N</p> <p>4.b. If the answer to Item Number 4.a. is “Yes,” provide information about each of those arrests, citations, charges, indictments, convictions, fines, or imprisonments in the space below. If you were the subject of an order of protection or restraining order and believe you are the victim, please explain those circumstances and provide any evidence to support your claims. Include the dates and outcomes. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.</p> <p>[Delete.]</p> <p>_____</p>
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	<p>first Form I-129F petition was approved within the last 2 years, then your petition cannot be approved unless a waiver of the multiple filing restriction is granted. Attach a signed and dated letter, requesting the waiver and explaining why a waiver is appropriate under your circumstances, together with any evidence in support of the waiver request.</p> <p>4. Indicate which waiver applies:</p> <p><input type="checkbox"/> Multiple Filer, No Disqualifying Convictions (General Waiver)</p> <p><input type="checkbox"/> Multiple Filer, Prior Criminal Conviction for Specified Offenses (Extraordinary Circumstances Waiver)</p> <p><input type="checkbox"/> Multiple Filer, Prior Criminal Convictions Resulting from Domestic Violence (Mandatory Waiver)</p> <p><input type="checkbox"/> Not applicable, beneficiary is my spouse</p> <p>NOTE: See Page 3, question 3.b. of the filing instructions.</p>	<p>Multiple Filer Waiver Request Information [subheader]</p> <p>Refer to Part 3. Types of Waivers in the Specific Instructions section of the Instructions for an explanation of the filing waivers.</p> <p>Indicate which one of the following waivers you are requesting:</p> <p>5.a. Multiple Filer, No Permanent Restraining Orders or Convictions for a Specified Offense (General Waiver)</p> <p>5.b. Multiple Filer, Prior Permanent Restraining Orders or Criminal Conviction for Specified Offense (Extraordinary Circumstances Waiver)</p> <p>5.c. Multiple Filer, Prior Permanent Restraining Order or Criminal Convictions for Specified Offense Resulting from Domestic Violence (Mandatory Waiver)</p> <p>5.d. Not applicable, beneficiary is my spouse or I am not a multiple filer</p> <p>[Delete]</p>
<p>New</p>		<p>[Page 6]</p> <p>Part 4. Biographic Information</p> <p>1. Ethnicity (Select only one box) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino</p> <p>2. Race (Select all applicable boxes) <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p>3. Height Feet__ Inches __</p> <p>[Page 7]</p> <p>4. Weight Pounds ___</p> <p>5. Eye Color (Select only one box) <input type="checkbox"/> Black <input type="checkbox"/> Blue <input type="checkbox"/> Brown</p>

		<p> <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Hazel <input type="checkbox"/> Maroon <input type="checkbox"/> Pink <input type="checkbox"/> Unknown/Other </p> <p> 6. Hair Color (Select only one box) <input type="checkbox"/> Bald (No hair) <input type="checkbox"/> Black <input type="checkbox"/> Blond <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Sandy <input type="checkbox"/> White <input type="checkbox"/> Unknown/Other </p>
<p>Page 6, Part 4. Signature of Petitioner</p>	<p>[Page 6]</p> <p>Part 4. Signature of Petitioner</p> <p>Penalties</p> <p>You may by law be imprisoned for not more than 5 years, or fined \$250,000, or both, for entering into a marriage contract for the purpose of evading any provision of the immigration laws, and you may be fined up to \$10,000 or imprisoned upon to five years, or both, for knowingly and willfully falsifying or concealing a material fact or using any false document in submitting this petition.</p>	<p>[Page 7]</p> <p>Part 5. Petitioner’s Statement, Contact Information, Declaration, and Signature</p> <p>NOTE: Read the Penalties section of the Form I-129F Instructions before completing this part.</p> <p>[delete]</p> <p><i>Petitioner’s Statement</i> [subheader]</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>1.a. I can read and understand English, and I have read and understand every question and instruction on this petition and my answer to every question.</p> <p>1.b. The interpreter named in Part 6. read to me every question and instruction on this petition and my answer to every question in [Fillable Field], a language in which I am fluent, and I understood everything.</p> <p>2. At my request, the preparer named in Part 7., [Fillable Filed], prepared this petition for me based only upon information I provided or authorized.</p> <p><i>Petitioner’s Contact Information</i> [sub header]</p> <p>3. Petitioner’s Daytime Telephone Number</p> <p>4. Petitioner’s Mobile Telephone Number (if</p>

	<p>Your Certification</p> <p>I certify that I am legally able to and intend to marry my alien fiancé(e) within 90 days of his or her arrival in the United States. I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit that I am seeking.</p> <p>Moreover, I understand that this petition, including any criminal conviction information that I am required to provide with this petition, as well as any related criminal background information pertaining to me that U.S.</p>	<p>any) 5. Petitioner’s Email Address (if any)</p> <p>[Page 8]</p> <p><i>Petitioner’s Declaration and Certification</i> <i>[subheader]</i></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 that I seek.</p> <p>I further authorize release of information contained in this petition, 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 understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:</p> <ol style="list-style-type: none"> 1) I provided or authorized all of the information contained in, and submitted with, my petition; 2) I reviewed and understood all of the information in, and submitted with, my petition; and 3) All of this information was complete, true, and correct at the time of filing. <p>I certify, under penalty of perjury, that all of the information in my petition and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my petition, and that all of this information is complete, true, and correct.</p> <p><i>[delete]</i></p>
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	<p>Citizenship and Immigration Services may discover independently in adjudicating this petition will be disclosed to the beneficiary of this petition.</p> <ol style="list-style-type: none"> 1.a. Signature of Petitioner 1.b. Date of Signature (mm/dd/yyyy) 2. Daytime Phone Number 3. Mobile Phone Number 4. E-mail Address (if any) 	<p>Petitioner's Signature [sub header] 6.a. Petitioner's Signature 6.b. Date of Signature (mm/dd/yyyy) [Delete] [Delete] [Delete]</p> <p>NOTE TO ALL PETITIONERS: If you do not completely fill out this petition or fail to submit required documents listed in the Instructions, USCIS may deny your petition.</p>
<p>NEW</p>		<p>[Page 8]</p> <p>Part 6. Interpreter's Contact Information Certification, and Signature</p> <p>Provide the following information about the interpreter.</p> <p>Interpreter's Full Name [sub header]</p> <ol style="list-style-type: none"> 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>Interpreter's Mailing Address [sub header]</p> <ol style="list-style-type: none"> 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>Interpreter's Contact Information [sub header]</p> <ol style="list-style-type: none"> 4. Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Telephone Number (if any) 6. Interpreter's Email Address (if any) <p>Interpreter's Certification [sub header]</p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in Part 5., Item Number 1.b., and I have read to this petitioner in the identified language every question and instruction on this petition and his or her answer to every question. The petitioner informed me that he or she understands every instruction, question, and answer on the petition, including the Petitioner's Declaration</p>

		<p>and Certification, and has verified the accuracy of every answer.</p> <p><i>Interpreter's Signature</i> [sub header] 7.a. Interpreter's Signature 7.b. Date of Signature (mm/dd/yyyy)</p>
<p>Page 6, Part 5. Signature of Person Preparing This Petition, If Other Than the Petitioner</p>	<p>Part 5. Signature of Person Preparing This Petition, If Other Than the Petitioner</p> <p>NOTE: If you are an attorney or representative, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with this Petition.</p> <p>[] Form G-28 submitted with this Petition. G-28 ID Number</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</p> <p><i>Preparer's Mailing Address</i> 5.a. Street Number and Name 5.b. Apt. Ste. Flr. 5.c. City or Town 5.d. State 5.e. ZIP Code 5.f. Province 5.g. Postal Code 5.h. Country</p> <p><i>Preparer's Contact Information</i> [sub-header] 3. Preparer's Daytime Telephone Number</p> <p>4. Preparer's Email Address (if any)</p>	<p>[Page 9]</p> <p>Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner</p> <p>Provide the following information about the preparer.</p> <p>[delete]</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>[Page 8]</p> <p>Preparer's Contact Information [sub-header] 4. Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any) 6. Preparer's Email Address (if any)</p> <p>Preparer's Statement [sub-header] 7.a. I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent. 7.b. I am an attorney or accredited representative and my representation of the petitioner in this case extends/does not extend beyond the preparation of this petition.</p> <p>NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this petition, you may be obliged to submit a completed Form G-28,</p>

	<p>Declaration To be completed by all preparers, including attorneys and authorized representatives: I declare that I prepared this benefit request at the request of the Petitioner, that it is based on all the information of which I have knowledge, and that the information is true to the best of my knowledge.</p> <p>6.a. Signature of Preparer 6.b. Date of Signature (mm/dd/yyyy)</p>	<p>Notice of Entry of Appearance as Attorney or Accredited Representative, or G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this petition.</p> <p>Preparer's Certification [sub-header] By my signature, I certify, under penalty of perjury, that I prepared this petition at the request of the petitioner. The petitioner then reviewed this completed petition and informed me that he or she understands all of the information contained in, and submitted with, his or her petition, including the Petitioner's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this petition based only on information that the petitioner provided to me or authorized me to obtain or use.</p> <p>Preparer's Signature [sub-header] 8.a. Preparer's Signature 8.b. Date of Signature (mm/dd/yyyy)</p>
<p>NEW</p>		<p>[Page 10]</p> <p>Part 8. Additional Information</p> <p>If you need extra space to provide any additional information within this petition, 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 petition or attach a separate sheet of paper. Type or print 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) [autofill] 1.b. Given Name (First Name) [autofill] 1.c. Middle Name [autofill]</p> <p>2. A-Number (if any) [autofill]</p> <p>3.a. Page Number 3.b. Part Number 3.c. Item Number 3.d. [Narrative space]</p> <p>4.a. Page Number 4.b. Part Number 4.c. Item Number 4.d. [Narrative space]</p> <p>5.a. Page Number 5.b. Part Number 5.c. Item Number 5.d. [Narrative space]</p> <p>6.a. Page Number</p>

		<p>6.b. Part Number 6.c. Item Number 6.d. [Narrative space]</p> <p>7.a. Page Number 7.b. Part Number 7.c. Item Number 7.d. [Narrative space]</p>
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