Form I-929, Petition for Qualifying Family Member of a U-1 Nonimmigrant

FOR USCIS USE ONLY					
Bene. A-file Yes	Action Block			Bar Code (USCIS Use only)	
reviewed No					
U-1 A-file Yes reviewed No					
Bene. filed I-485					
Yes No				Remarks	
U-1 adjusted					
U-1 I-485 pending	<u> </u> 		_		
Yes No					
START HERE T	YPE OR PR	INT LEGIBLY USIN	G BLACK INF	(
I am filing for my:	(Select one)				_
Spouse			ological Child	Parent:	Biological Parent
			epchild		Stepparent
		L Ac	dopted Child	tor	Parent who adopted me
Part 1. Information About You			Part 2. Information Abou	ut Your Alien Relative	
La	st Name (Fan	nily Name)		Last Name (Family Name)	
Fi	rst Name (Giv	ven Name)		First Name (Given Name)	
	Z A			HOTIAN	
Middle Name				Midd	le Name
Middle Name				Titida.	
	Current Ac	ddress			nt Address
Street Number and Name Apt. Number			nber	Street Number and	Name Apt. Number
City		State Zip Cod	le	City	State/Province
				Country	Postal/Zip Code
Safe Mailing Address If Other Than Above			Mailing Address l	If Other Than Above	
Street Number and Name Apt. Number			nber		
City		State Zip Cod	le.		
Date of Birt	th	A-Number		Date of Birth	A-Number
Suit of Birt				Z WV 01 Ditui	

Part 1. Information About You (Cont'd)			Part 2. Information About Your Alien Relative (
Country of Birth	Social Security Number		Country of Birth	Social Security Number
Country of Citizenship/Nationality			Country of Citizen	ship/Nationality
Gender: (Select one) Mal	e Female		Gender: (Select one)	le Female
If you ever used other names,	provide them below:		If alien relative ever used other names, provide them b	
Last Name (Family Name)	First Name (Given Name)		Last Name (Family Name)	First Name (Given Name)
Middle Name	DD	A	Middle Name	
Last Name (Family Name)	First Name (Given Name)		Last Name (Family Name)	First Name (Given Name)
Middle Name	NI	4	Middle Name]
Last Name (Family Name)	First Name (Given Name)		Last Name (Family Name)	First Name (Given Name)
Middle Name			Middle Name	
Marital Status: (Select one)			Marital Status: (Select one)	
☐ Single (Never Married) ☐ Divorced	☐ Married ☐ Widowed		☐ Single (Never Married) ☐ Divorced	☐ Married ☐ Widowed
Spouse's Name: Last Name (Family Name) Middle Name Place of M	First Name (Given Name)	7/	Spouse's Name: Last Name (Family Name) Middle Name Place of M	First Name (Given Name) Aurriage
	-			-

Part 1. Information About You (Cont'd)		Part 2. Information About Your Alien Relative (Co		
Number of marriages including current marriage:		Number of marriages including current marriage:		
List any previous marriages beginning with the most recent. If you need more space, attach an additional sheet of paper.		List any previous marriages beginning with the most recent. If you need more space, attach an additional sheet of paper.		
Prior Spouse's Name:		Prior Spouse's Name:		
Last Name (Family Name) First Name (Given Name)		Last Name (Family Name)	First Name (Given Name)	
Middle Name Date of Marriage		Middle Name	Date of Marriage	
Place of Marriage	A	Place of Ma	ırrıage	
		D. CT	0.TT	
Date of Termination Place of Termination		Date of Termination Pla	ice of Termination	
Reason for Termination:		Reason for Termination:		
Divorce Death Annulment Other	t	Divorce Death Annulment Other		
Prior Spouse's Name:		Prior Spouse's Name:		
Last Name (Family Name) First Name (Given Name)		Last Name (Family Name) First Name (Given Nam		
		-10416		
Middle Name Date of Marriage		Middle Name	Date of Marriage	
Place of Marriage		Place of Marriage		
Date of Termination Place of Termination	7 /	Date of Termination Pla	ce of Termination	
Reason for Termination:		Reason for Termination:		
Divorce Death Annulment		☐ Divorce ☐ Death ☐ Annulment		
Other		Other		

Part 1. Information About You (Cont'c	1)	Part 2. Information About Y	our Alien Relative (Cont'd)
Prior Spouse's Name:		Prior Spouse's Name:	
Last Name (Family Name) First Name	(Given Name)	Last Name (Family Name)	First Name (Given Name)
Middle Name Date o	f Marriage	Middle Name	Date of Marriage
Place of Marriage		Place of Marriage	
Date of Termination Place of Term	ination	Date of Termination P	lace of Termination
Reason for Termination: Divorce Death Annulmer Other	RA	Reason for Termination: Divorce Death Other	Annulment
Select One:		Complete if your relative	is in the United States
I am a Lawful Permanent Resident I obtained my Lawful Permanent Residence on: My Form I-485 is currently pending Receipt Number	No t	Date of Admission P Class of Admission	Date Authorized to Stay
Part 3. Information About Your Alien	Relative's Children		
Last Name (Family Name)	First Name (C	Given Name)	Middle Name
Date of Birth Place of Street Number and Name		Gender: (Select one) Male	child
Country	Postal/Zip Code	A-Number	Country of Birth
Name of Mother Last Name (Family Name) First N		Given Name)	Middle Name
Name of Father			
Last Name (Family Name)	First Name (C	Given Name)	Middle Name

Part 3. Information About Your Alien Relative's Children (Cont'd)					
Last Name (Family Name)	First Name (Given Name)	Middle Name			
Date of Birth Place of	of Birth Biological Child Gender: (Select one)				
Street Number and Name		City State/Province			
Country	Postal/Zip Code A-Number	Country of Birth			
Name of Mother Last Name (Family Name)	First Name (Given Name)	Middle Name			
Name of Father Last Name (Family Name)	First Name (Given Name)	Middle Name			
Last Name (Family Name)	First Name (Given Name)	Middle Name			
Date of Birth Place of Street Number and Name	of Birth Biological Child Gender: (Select one) Apt. Number				
Country Name of Mother	Postal/Zip Code A-Number	Country of Birth			
Last Name (Family Name)	First Name (Given Name)	Middle Name			
Name of Father Last Name (Family Name)	First Name (Given Name)	Middle Name			
Last Name (Family Name)	First Name (Given Name)	Middle Name			
Date of Birth Place of	of Birth Biological Child Gender: (Select one)				

Part 3. Information About Your Alien Relative's Children (Cont'd)					
Street Number and Name	Apt. Number Cit	y State/Province			
Country	Postal/Zip Code A-Number	Country of Birth			
Name of Mother					
Last Name (Family Name)	First Name (Given Name)	Middle Name			
Name of Father					
Last Name (Family Name)	First Name (Given Name)	Middle Name			
	KAK				
Last Name (Family Name)	First Name (Given Name)	Middle Name			
East Name (Family Name)	This Name (Given Name)				
Date of Birth Place of B	Birth Biological Child	Stepchild Adopted Child			
Date of Birtii	Gender: (Select one)	Male Female			
	11/1 11/1				
Street Number and Name	Apt. Number Cit	y State/Province			
Country	Postal/Zip Code A-Number	Country of Birth			
N COLUMN THE COLUMN TH		/ ////////////////////////////////////			
Name of Mother Last Name (Family Name)	First Name (Given Name)	Middle Name			
Last Name (Family Name)	riist Name (Given Name)	Middle Name			
Name of Father	117/00				
Last Name (Family Name)	First Name (Given Name)	Middle Name			
U Z I	1//40				
Name and address of your alien relative in the language written in the country where he/she currently resides.					
Last Name (Family Name)	First Name (Given Name)	Middle Name			
C/O: (In Care Of)	Street Number and N	ame Apt. Number			
City/State or Province	Country	Postal/Zip Code			

Part 4. Processing Information					
1. Select one:					
a. The person named in Part 2 is now in the United States					
b. The person named in Part 2 is now outside the United States. (Indicate below at which U.S. Embassy or consulate your relative will apply for a visa.)					
U.S. Embassy or consulate at:					
	City and Country				
2. Is the person named in Part 2 or has this person ever been in depo	rtation or removal proceedings in the Ur	nited States?			
a. No					
b. Yes (Indicate when and where):					
Part 5. Signature					
I certify, or if outside the United States, I swear or affirm, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it, is all true and correct. I authorize the release of any information from my record that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking.					
Signature	Print Your Full Name	Date			
Part 6. Preparer's Information, If Other Than Person Signing	g Above				
I declare that I prepared this petition at the request of the above person, a	nd it is based on all the information that	t I have knowledge.			
Signature	Print Your Full Name	Date			
	de tio				
Firm Name	Street Number and Name	Suite Number			
00/4	0015				
City/State or Province	Postal/Zip Code	Telephone Number			