**TABLE OF CHANGES – INSTRUCTIONS**

**Form I-817, Application for Family Unity Benefits**

**OMB Number: 1615-0005**

**05/31/2017**

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| **Reason for Revision:** Limited revision for standard signature language. |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1,****When Should I File Form I-817?** | **[Page 1]**…**D.** For purposes of this application, a legalized alien is someone who obtained temporary or permanent residence in the United States through Legalization under section 210 or 245A of the Immigration and Nationality Act (INA), or under section 1504(b) of Public Law 106-553 (the LIFE Act). For the purposes of this form, a legalized alien is also someone who obtained permanent residence through a Cuban/Haitian Adjustment under section 202 of the Immigration Reform and Control Act of 1986. | **[Page 1]**…**D.** For purposes of this application, a legalized alien is someone who obtained temporary or permanent residence in the United States through Legalization under the Immigration and Nationality Act (INA) section 210 or 245A, or under section 1104(b) of Public Law 106-553 (the LIFE Act). For the purposes of this form, a legalized alien is also someone who obtained permanent residence through a Cuban/Haitian Adjustment under section 202 of the Immigration Reform and Control Act of 1986. |
| **Page 1-2,****General Instructions** | **[Page 1]****General Instructions**USCIS provides forms free of charge through the USCIS Web site. In order to view, print, or fill out our forms, you should use the latest version of Adobe Reader, which you can download for free at <http://get.adobe.com/reader/>. If you do not have Internet access, you may call the USCIS National Customer Service Center at **1-800-375-5283** and ask that we mail a form to you. For TTY (deaf or hard of hearing) call: **1-800-767-1833**. **Signature.** Each application must be properly signed and filed. For all signatures on this application, USCIS will not accept a stamped or typewritten name in place of a signature. If you are under 14 years of age, your parent or legal guardian may sign the application on your behalf. A legal guardian may also sign for a mentally incompetent person. NOTE: You must fill out a separate Form I-817 for each person who needs to apply for Family Unity benefits.**Filing Fee.** Each application must be accompanied by the appropriate filing fee. (See the **What Is the Filing Fee** section of these Instructions.) **Evidence.** At the time of filing, you must submit the evidence and supporting documentation listed in the **What Evidence Should You Submit** section of these Instructions. **Biometric Services Appointment.** USCIS may require that you appear for an interview or provide fingerprints, photograph, and/or signature at any time to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), before making a decision on your application. After USCIS receives your application and ensures it is complete, we will inform you in writing, if you need to attend a biometric services appointment. If an appointment is necessary, the notice will provide you the location of your local or designated USCIS Application Support Center (ASC) and the date and time of your appointment. If you fail to attend your biometric services appointment, USCIS may deny your application.**Acknowledgement of Appointment at USCIS Application Support Center.**  Review the ASC Acknowledgement that appears in Part 5. of the application. The purpose of this ASC Acknowledgement is to confirm that you have completed your application, reviewed your responses, and affirmed that the information was provided by you and is complete, true, and correct. If someone helped you fill out your application, that person must review the ASC Acknowledgement with you to make sure you understand it.**Copies.**  You may submit legible photocopies of documents requested, unless the instructions specifically state that you must submit an original document. USCIS may request an original document at the time of filing or at any time during processing of an application, petition, or request. If you submit original documents when not required, the documents may remain a part of the record, and USCIS will not automatically return them to you.**Translations.**  If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English.**How To Fill Out Form I-817****1.** Type or print legibly in black ink.**2.** If you need extra space to complete any item within this application, use the space provided in **Part 9.** **Additional Information** or attach a separate sheet of paper; type or print your name and Alien Registration Number (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.**…** | **[Page 1]****General Instructions**USCIS provides forms free of charge through the USCIS website. In order to view, print, or fill out our forms, you should use the latest version of Adobe Reader, which you can download for free at [**http://get.adobe.com/reader/**](http://get.adobe.com/reader/). If you do not have Internet access, you may call the USCIS National Customer Service Center at **1-800-375-5283** and ask that we mail a form to you. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.[no change][no change]**[Page 2]****Filing Fee.** Each application must be accompanied by the appropriate filing fee and biometric services fee (if applicable). (See the **What Is the Filing Fee** section of these Instructions.)**Evidence.** At the time of filing, you must submit all evidence and supporting documentation listed in the **What Evidence Must You Submit** section of these Instructions.**Biometric Services Appointment.** USCIS may require that you appear for an interview or provide fingerprints, photograph, and/or signature at any time to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), before making a decision on your application, petition, or request. After USCIS receives your application and ensures it is complete, we will inform you in writing if you need to attend a biometric services appointment. If an appointment is necessary, the notice will provide you the location of your local or designated USCIS Application Support Center (ASC) and the date and time of your appointment or, if you are currently overseas, instruct you to contact a U.S. Embassy, U.S. Consulate, or USCIS office outside the United States to set up an appointment.  If you are required to provide biometrics, at your appointment you must sign an oath reaffirming that: **1.** You provided or authorized all information in the application; **2.** You reviewed and understood all of the information contained in, and submitted with, your application; and**3.** All of this information was complete, true, and correct at the time of filing.If you fail to attend your biometric services appointment, USCIS may deny your application.**Copies.** You should submit legible photocopies of documents requested, unless the Instructions specifically state that you must submit an original document.  USCIS may request an original document at the time of filing or at any time during processing of an application, petition, or request.  If USCIS requests an original document from you, it will be returned to you after USCIS determines it no longer needs your original. **NOTE:** If you submit original documents when not required or requested by USCIS, **your original documents may be immediately destroyed upon receipt.****Translations.** If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English. The certification must include the translator’s signature. The Department of Homeland Security (DHS) recommends the certification contain the translator’s printed name and the date and the translator’s contact information.[no change][no change]**2.** If you need extra space to complete any item within this application, use the space provided in **Part 10.** **Additional Information** or attach a separate sheet of paper; type or print your name and Alien Registration Number (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.… |
| **Page 3,****Eligibility for Filing Form I-817** | **[Page 3]****Eligibility for Filing Form I-817**To prove eligibility for Family Unity Program benefits under **IMMACT 90, you must establish that you meet the following conditions:** …**Family Unity Benefits Eligibility**The classes of individuals eligible to apply for Family Unity benefits are listed below.Select the box in **Part 2. Basis for Application** that matches your request.**1. On May 5, 1988,** I was the spouse of an alien who was legalized under INA section 245A of the INA and I currently meet all of the necessary residence and other continuous eligibility requirements. …**[Page 4]****(4)** An extension…**NOTE:** If you previously qualified for Family Unity benefit under section 1504, you may be eligible to apply for benefits under section 301 of IMMACT 90. To determine if you are eligible for Family Unity Benefits Program, go to **Part 2. Basis for Application** in the **Specific Instructions** section of these Instructions.  | **[Page 3]****Eligibility for Filing Form I-817**To prove eligibility for Family Unity Program benefits under **IMMACT 90, you must establish that you meet the following conditions below.** …**Family Unity Benefits Eligibility**The classes of individuals eligible to apply for Family Unity benefits are listed below.Select the box in **Part 3. Basis for Application** that matches your request.**1. On May 5, 1988,** I was the spouse of an alien who was legalized under INA section 245A and I currently meet all of the necessary residence and other continuous eligibility requirements. …**[Page 4]****(4)** An extension…**NOTE:** If you previously qualified for Family Unity benefit under section 1504, you may be eligible to apply for benefits under section 301 of IMMACT 90. To determine if you are eligible for Family Unity Benefits Program, go to **Part 3. Basis for Application** in the **Specific Instructions** section of these Instructions.  |
| **Page 4-7, Specific Instructions** | **[Page 4]****Specific Instructions****Part 1. Information About You**…**[Page 5]****Item Numbers 3.a. - 4.c. Other Names Used.** Provide other names you have used since birth, including your maiden name, any nicknames, and any names that appear in your documents. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information** to provide other names used. …**Item Number 7. USCIS ELIS Account Number** (if any)**.** If you have previously filed an application, petition, or request using the USCIS Electronic Immigration System (USCIS ELIS), provide the USCIS ELIS Account Number you were issued by the system. The USCIS ELIS Account Number is not the same as an A-Number. If you were issued a USCIS ELIS Account Number, enter it in the space provided.**Item Number 8. Gender.** Select male or female.…**Item Numbers 13. - 18. Biographic Information.** Provide the biographic information requested. Providing this information as part of your application may reduce the time you spend at your USCIS ASC appointment as described in the **Biometric Services Appointment** section of these Instructions. **Ethnicity and Race.** Select the boxes that best describe your ethnicity and race. **Categories and Definitions for Ethnicity and Race****A. Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. (**NOTE:** This category is only included under Ethnicity in **Part 1.**, **Item Number 13.**)**B. White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.**C. Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.**D.** **Black or African American.** A person having origins in any of the black racial groups of Africa.**E. American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.**F. Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.**Height.** Select the values that best match your height in feet and inches. For example, if you are five feet and nine inches, select “5” for feet and “09” for inches. Do not enter your height in meters or centimeters.**Weight.** Enter your weight in pounds. If you do not know your weight, or need to enter a weight under 30 pounds or over 699 pounds, enter “000.” Do not enter your weight in kilograms.**Eye Color.** Select the box that best describes the color of your eyes.**Hair Color.** Select the box that best describes the color of your hair.**[Page 6]****Part 2. Basis for Application**…**Part 3. Information About Your Relationship**…**Item Numbers 21.a. - 24.e.** Complete this section…**1.** Provide the requested information about your relationship to the legalized alien and complete **Item Numbers 21.a. - 24.e.** If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**, and submit supporting documentation required in accordance to the Foreign Affairs Manual.…**Part 4. Other Information**…**Part 5. Applicant’s Statement, Certification, Acknowledgement of Appointment at USCIS Application Support Center, Signature, and Contact Information.** **Item Numbers 1.a. - 6.b.**  Select the appropriate box to indicate that you either read this application yourself or someone interpreted this application for you from English to a language in which you are fluent. If applicable, select the box to indicate if someone prepared this application for you. You must also affirm that you have read and understand or that an interpreter or preparer read to you and you understand the **Acknowledgement of Appointment at USCIS Application Support Center** in **Part 5.** Further, you must sign and date your application and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every application **MUST** contain the signature of the applicant (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.**Part 6. Interpreter’s Contact Information, Certification, and Signature.** **Item Numbers 1.a. - 6.b.** If you used anyone as an interpreter to read the Instructions and questions on this application to you in a language in which you are fluent, the interpreter must fill out this section, provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, and his or her email address (if any). The interpreter must also certify that he or she has read the **Acknowledgement of Appointment at USCIS Application Support Center** in **Part 5.** to you in the same language in which you are fluent. The interpreter must sign and date the application. **[Page 7]****Part 7. Contact Information, Statement, Certification, and Signature of the Person Preparing this Application, If Other Than the Applicant.****Item Numbers 1.a. - 8.b.** This section must contain the signature of the person who completed your application, if other than you, the applicant. If the same individual acted as your interpreter and your preparer, that person should complete both **Part 6.** and **Part 7.** If the person who completed this application is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you prepare this application **MUST** sign and date the application. A stamped or typewritten name in place of a signature is not acceptable. Anyone who helped you prepare your application must also certify that he or she has read the **Acknowledgement of Appointment at USCIS Application Support Center** in **Part 5.** to you, and that you informed him or her that you understood the ASC Acknowledgement. If the person who helped you prepare your application is an attorney or accredited representative, he or she must also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your application.**Part 8. Signature for Placement on Employment Authorization Document**…**Part 9. Additional Information.** **Item Numbers 1.a. - 7.d.** If you need extra space to provide any additional information within this application, use the space provided in P**art 9. Additional Information**. If you need more space than what is provided in **Part 9.**, you may make copies of **Part 9.** to complete and file with your application 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.… | **[Page 5]****Specific Instructions****Part 1. Information About You**…**Item Numbers 3.a. - 4.c. Other Names Used.** 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 10. Additional Information**. **…****Item Number 7. USCIS Online Account Number** (if any)**.** If you have previously filed an application, petition, or request using the USCIS online filing system (previously called USCIS Electronic Immigration System (USCIS ELIS)), provide the USCIS Online Account Number you were issued by the system. You can find your USCIS Online Account Number by logging in to your account and going to the profile page. If you previously filed certain applications, petitions, or requests on a paper form via a USCIS Lockbox facility, you may have received a USCIS Online Account Access Notice issuing you a USCIS Online Account Number. If you received such a notice, your USCIS Online Account Number can be found at the top of the notice. If you were issued a USCIS Online Account Number, enter it in the space provided. The USCIS Online Account Number is not the same as an A-Number.**Item Number 8. Sex.** Select male or female.…**Part 2. Biographic Information**Provide the biographic information requested in **Part 2.**, **Item Numbers 1. - 6.**  Providing this information as part of your application may reduce the time you spend at your USCIS ASC appointment as described in the **Biometric Services Appointment** section of these Instructions. **Item Numbers 1. - 2. Ethnicity and Race.** Select the boxes that best describe your ethnicity and race. **Categories and Definitions for Ethnicity and Race****1. Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. (**NOTE:** This category is only included under Ethnicity in **Part 2.**, **Item Number 1.**)**2. White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.**3. Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.**[Page 6]****4.** **Black or African American.** A person having origins in any of the black racial groups of Africa.**5. American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.**6. Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.**Item Number 3. Height.** Select the values that best match your height in feet and inches. For example, if you are five feet and nine inches, select “5” for feet and “09” for inches. Do not enter your height in meters or centimeters.**Item Number 4. Weight.** Enter your weight in pounds. If you do not know your weight, or need to enter a weight under 30 pounds or over 699 pounds, enter “000.” Do not enter your weight in kilograms.**Item Number 5. Eye Color.** Select the box that best describes the color of your eyes.**Item Number 6. Hair Color.** Select the box that best describes the color of your hair. **Part 3. Basis for Application**…**Part 4. Information About Your Relationship**…**Item Numbers 21.a. - 24.e.** Complete this section…**1.** Provide the requested information about your relationship to the legalized alien and complete **Item Numbers 21.a. - 24.e.** If you need extra space to complete this section, use the space provided in **Part 10. Additional Information**, and submit supporting documentation required in accordance to the Foreign Affairs Manual.…**Part 5. Other Information**…**[Page 7]****Part 6. Applicant’s Statement, Contact Information, Declaration, Certification, and Signature** **Item Numbers 1.a. - 6.b.** Select the appropriate box to indicate whether you read this application yourself or whether you had an interpreter assist you. If someone assisted you in completing the application, select the box indicating that you used a preparer. Further, you must sign and date your application and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every application **MUST** contain the signature of the applicant (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.**Part 7. Interpreter’s Contact Information, Certification, and Signature****Item Numbers 1.a. - 7.b.** If you used anyone as an interpreter to read the Instructions and questions on this application to you in a language in which you are fluent, the interpreter must fill out this section, provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the application.**Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant****Item Numbers 1.a. - 8.b.** This section must contain the signature of the person who completed your application, if other than you, the applicant. If the same individual acted as your interpreter **and** your preparer, that person should complete both **Part 7.** and **Part 8.** If the person who completed this application is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this application **MUST** sign and date the application. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your application is an attorney or accredited representative, he or she may be obliged to also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your application.**Part 9. Signature for Placement on Employment Authorization Document**…**Part 10. Additional Information****Item Numbers 1.a - 7.d.** If you need extra space to provide any additional information within this application, use the space provided in **Part 10. Additional Information**. If you need more space than what is provided in **Part 10.**, you may make copies of **Part 10.** to complete and file with your application, 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.… |
| **Page 7-11,****What Evidence Should You Submit?** | **[Page 7]****What Evidence Should You Submit?**You must submit all evidence or supporting documents requested in these Instructions with your application. If you fail to submit required evidence or supporting documents, USCIS may reject or deny your application for failure to submit requested evidence or supporting documents in accordance with 8 CFR 103.2(b)(1) and these Instructions.…**[Page 8]****(4)** If you were born out of wedlock and the legalized alien is your natural father, submit a copy of the front and back of your birth certificate showing your father’s name. You must provide evidence showing that a valid parent-child relationship exists.**Such evidence…****(a)** Money…**(b)** Your…**(c)** Your…**(d)** Your…**(e)** Your…**(f)** Correspondence…**[Page 9]****(4)** If you were born out of wedlock and the alien eligible for adjustment under the LIFE Act is your natural father, submit a copy of the front and back of your birth certificate showing your father’s name. You must provide evidence showing that a valid parent-child relationship exists.**Such evidence…****(a)** Money…**(b)** Your…**(c)** Your…**(d)** Your…**(e)** Your…… | **[Page 7]****What Evidence Must You Submit?**You must submit all evidence requested in these Instructions with your application. If you fail to submit required evidence, USCIS may reject or deny your application for failure to submit requested evidence or supporting documents in accordance with 8 CFR 103.2(b)(1) and these Instructions.…**[Page 8]****(4)** If you were born out of wedlock and the legalized alien is your natural father, submit a copy of the front and back of your birth certificate showing your father’s name. You must provide evidence showing that a valid parent-child relationship exists.**Such evidence…****(a.)** Money…**(b.)** Your…**(c.)** Your…**(d.)** Your…**(e.)** Your…**(f.)** Correspondence…**[Page 9]****(4)** If you were born out of wedlock and the alien eligible for adjustment under the LIFE Act is your natural father, submit a copy of the front and back of your birth certificate showing your father’s name. You must provide evidence showing that a valid parent-child relationship exists.**Such evidence…****(a.)** Money…**(b.)** Your…**(c.)** Your…**(d.)** Your…**(e.)** Your…… |
| **Page 11-12,****What Is the Filing Fee?** | **[Page 12]****What Is the Filing Fee?**…**How To Check If The Fees Are Correct**Form I-817 filing fee and biometric services fee are current as of the edition date in the lower left corner of this page. However, because USCIS fees change periodically, you can verify that the fees are correct by following one of the steps below.**1.** Visit the USCIS Web site at [**www.uscis.gov**](http://www.uscis.gov), select “FORMS,” and check the appropriate fee; or… | **[Page 12]****What Is the Filing Fee?**…**How To Check If The Fees Are Correct**[no change]**1.** Visit the USCIS website at [**www.uscis.gov**](http://www.uscis.gov), select “FORMS,” and check the appropriate fee; or… |
| **Page 12,****Where to File?** | **[Page 12]****Where to File?**Please see our Web site at [**www.uscis.gov/I-817**](http://www.uscis.gov/I-817) or call our National Customer Service Center at **1-800-375-5283** for the most current information about where to file this application. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.**…** | **[Page 12]****Where To File?**Please see our website at [**www.uscis.gov/I-817**](http://www.uscis.gov/I-817) or call our National Customer Service Center at **1-800-375-5283** for the most current information about where to file this application. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.… |
| **Page 12,****Address Change** | **[Page 12]****Address Change**You must notify USCIS of your new address within 10 days of moving from your previous residence. For information on filing a change of address go to the USCIS Web site at [**www.uscis.gov/addresschange**](http://www.uscis.gov/addresschange) or contact the USCIS National Customer Service Center at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.**NOTE:** Do not submit a change of address request to USCIS Lockbox facilities because these facilities do not process change of address requests. | **[Page 13]****Address Change**An applicant who is not a U.S. citizen must notify USCIS of his or her new address within 10 days of moving from his or her previous residence.  For information on filing a change of address, go to the USCIS website at [**www.uscis.gov/addresschange**](http://www.uscis.gov/addresschange)or contact the USCIS National Customer Service Center at **1-800-375-5283**.  For TTY (deaf or hard of hearing) call:  **1-800-767-1833**.**NOTE:**  Do not submit a change of address request to the USCIS Lockboxfacilities because the Lockboxdoes not process change of address requests. |
| **Page 12,****Processing Information** | **[Page 12]****Processing Information**You must have a United States address to file this application.**Initial Processing.**  Once USCIS accepts your application, we will check it for completeness. If you do not completely fill out this application, you will not establish a basis for your eligibility and USCIS may reject or deny your application.**Requests for More Information.** We may request that you provide more information or evidence to support your application. We may also request that you provide the originals of any copies you submit. USCIS will return any requested originals when they are no longer needed. **…** | **[Page 13]****Processing Information**[no change]**Initial Processing.** Once USCIS accepts your application we will check it for completeness. If you do not completely fill out this application, you will not establish a basis for your eligibility and USCIS may reject or deny your application.**Requests for More Information.** We may request that you provide more information or evidence to support your application. We may also request that you provide the originals of any copies you submit. If USCIS requests an original document from you, it will be returned to you after USCIS determines it no longer needs your original.… |
| **Page 13,****USCIS Forms and Instructions** | **[Page 13]****USCIS Forms and Instructions**To ensure you are using the latest version of this application, visit the USCIS Web site at [**www.uscis.gov**](http://www.uscis.gov) where you can obtain the latest USCIS forms and immigration-related information. If you do not have Internet access, you may order USCIS forms by calling our toll-free number at **1-800-870-3676**. You may also obtain forms and information by calling the USCIS National Customer Service Center at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.Instead of waiting in line for assistance at your local USCIS office, you can now schedule an appointment through our online system, **InfoPass**, at [**infopass.uscis.gov**](http://infopass.uscis.gov). Use the **InfoPass** appointment scheduler and follow the screen prompts to set up your appointment. **InfoPass** generates an electronic appointment notice that appears on the screen. | **[Page 13]****USCIS Forms and Information**To ensure you are using the latest version of this application, visit the USCIS website at [**www.uscis.gov**](http://www.uscis.gov)where you can obtain the latest USCIS forms and immigration-related information. If you do not have Internet access, you may order USCIS forms by calling the Forms Request Line at **1-800-870-3676**. You may also obtain forms and information by calling the USCIS National Customer Service Center at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**. Instead of waiting in line for assistance at your local USCIS office, you can schedule an appointment online at [**www.uscis.gov**](http://www.uscis.gov). Select “Schedule an Appointment” and follow the screen prompts to set up your appointment. Once you finish scheduling an appointment, the system will generate an appointment notice for you. |
| **Page 13,****USCIS Privacy Act Statement** | **[Page 13]****USCIS Privacy Act Statement****AUTHORITIES:** The information requested on this application, and the associated evidence, is collected under section 301 of the Immigration Act of 1990 (IMMACT 90) and section 1504 of the Legal Immigration Family Equity Act (LIFE Act).**PURPOSE:** The primary purpose for providing the requested information on this application is to determine if you have established eligibility for the immigration benefit for which you are filing. DHS will use the information you provide to grant or deny the immigration benefit you are seeking.**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision in your case or result in denial of your application.**ROUTINE USES:** DHS may share the information you provide on this application with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-007 - Benefits Information System and DHS-USCIS-001- Alien File, Index, and National File Tracking System of Records] which you can find at **www.dhs.gov/privacy**. DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security. | **[Page 14]****USCIS Privacy Act Statement****AUTHORITIES:** The information requested on this application, and the associated evidence, is collected under the Section 301 of the Immigration Act of 1990 (IMMACT 90) and Section 1504 of the Legal Immigration Family Equity Act Amendments (LIFE Act Amendments). **PURPOSE:** The purpose of this application is to request initial benefits under the Family Unity Program or to request an extension of such benefits. DHS/USCIS will use the information you provide to grant or deny the benefit. USCIS requests the applicant to provide their Social Security Number (SSN) to facilitate and expedite the adjudication of the applicant’s request. The SSN is used to establish and corroborate the applicant’s identity to complete a sufficient background check. **DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, including the SSN and any requested evidence, may delay a final decision in your case or result in denial of your application. **ROUTINE USES:** DHS may share the information you provide on this application with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS-007 - Benefits Information System and DHS/USCIS-001 - Alien File, Index, and National File Tracking System of Records] which you can find at [**www.dhs.gov/privacy**](http://www.dhs.gov/privacy)**.** DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security. |
| **Page 13,****Paperwork Reduction Act** | **[Page 14]****Paperwork Reduction Act**An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 2 hours per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application, preparing statements, attaching necessary documentation, and submitting the application. The collection of biometrics is estimated to require 1 hour and 10 minutes. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0005. **Do not mail your completed Form I-817 to this address.** | **[Page 14]****Paperwork Reduction Act**An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 2 hours, including the time for reviewing instructions, gathering the required documentation and information, completing the application, attaching necessary documentation, and submitting the application. The collection of biometrics is estimated to require 1 hour and 10 minutes. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0005. **Do not mail your completed Form I-817 to this address.** |