

**TABLE OF CHANGES – INSTRUCTIONS**  
**Form I-129F, Petition for Alien Fiancé(e)**  
**OMB Number: 1615-0001**  
**04/27/2018**

**Reason for Revision: Extension**

Legend for Proposed Text:

- Black font = Current text
- Purple font = Standard language
- Red font = Changes

Current Page Number and Section	Current Text	Proposed Text
<p>Pages 3-9,  General Instructions</p>	<p>[Page 8]</p> <p>...</p> <p><b>Part 5. Petitioner’s Statement, Contact Information, Declaration, and Signature</b></p> <p><b>Item Numbers 1.a. - 6.b.</b> Select the appropriate box to indicate whether you read this petition yourself or whether you had an interpreter assist you. If someone assisted you in completing the petition, select the box indicating that you used a preparer. Further, you must sign and date your petition and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every petition <b>MUST</b> contain the signature of the petitioner (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.</p> <p>[Page 9]</p> <p><b>Part 6. Interpreter’s Contact Information, Certification, and Signature</b></p> <p><b>Item Numbers 1.a. - 7.b.</b> If you used anyone as an interpreter to read the Instructions and questions on this petition 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</p>	<p>[Page 8]</p> <p>...</p> <p><b>Part 5. Petitioner’s Statement, Contact Information, Declaration, Certification, and Signature</b></p> <p>[no change]</p> <p>[Page 9]</p> <p><b>Item Numbers 1.a. - 7.b.</b> If you used anyone as an interpreter to read the Instructions and questions on this petition to you in a language in which you are fluent, the interpreter must fill out this <b>section</b>; provide his or her name, the name and address of his or her business or</p>

	<p>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 petition.</p> <p><b>Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner</b></p> <p><b>Item Numbers 1.a. - 8.b.</b> This section must contain the signature of the person who completed your petition, if other than you, the petitioner. If the same individual acted as your interpreter and your preparer, that person should complete both <b>Part 6.</b> and <b>Part 7.</b> If the person who completed this petition 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 petition <b>MUST</b> sign and date the petition. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your petition is an attorney or accredited representative whose representation extends beyond preparation of this petition, he or she may be obliged to also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or Form G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, along with your petition.</p> <p>...</p>	<p>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 petition.</p> <p>[no change]</p> <p><b>Item Numbers 1.a. - 8.b.</b> This section must contain the signature of the person who completed your petition, if other than you, the petitioner. If the same individual acted as your interpreter <b>and</b> your preparer, that person should complete both <b>Part 6.</b> and <b>Part 7.</b> If the person who completed this petition 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 petition <b>MUST</b> sign and date the petition. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your petition is an attorney or accredited <b>representative</b>, he or she may <b>also need to</b> submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or Form G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, along with your petition.</p> <p>...</p>
<p><b>Page 14,</b> <b>USCIS Privacy Act Statement</b></p>	<p><b>[Page 14]</b> <b>USCIS Privacy Act Statement</b></p> <p><b>AUTHORITIES:</b> The information requested on this petition, and the associated evidence, is collected under the Immigration and Nationality Act (INA) section 214(d) and 8 CFR 214.2(k).</p> <p><b>PURPOSE:</b> The primary purpose for providing the requested information on this petition is for your fiancé(e)/spouse and that person’s children to enter the United States. DHS will use the information you provide to grant or deny the immigration</p>	<p><b>[Page 14]</b> <b>DHS Privacy Notice</b></p> <p><b>AUTHORITIES:</b> The information requested on this petition, and the associated evidence, is collected under the Immigration and Nationality Act <b>section 214(d) and</b> 8 CFR 214.2(k).</p> <p><b>PURPOSE:</b> The primary purpose for providing the requested information on this petition is to <b>petition USCIS</b> for your fiancé(e)/spouse and that person’s children to enter the United States. DHS <b>uses</b> the information you provide to grant or deny</p>

	<p>benefit you are seeking.</p> <p><b>DISCLOSURE:</b> 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 petition.</p> <p><b>ROUTINE USES:</b> DHS may share the information you provide on this petition 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 <a href="http://www.dhs.gov/privacy">www.dhs.gov/privacy</a>. DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.</p>	<p>the benefit you are seeking on behalf of the listed beneficiary.</p> <p><b>DISCLOSURE:</b> The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number, and any requested evidence, may delay a final decision or result in denial of your petition.</p> <p><b>ROUTINE USES:</b> DHS may share the information you provide on this petition and any additional requested evidence 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-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-007 - Benefits Information System] and the published privacy impact assessment [DHS/USCIS/PIA-016a Computer Linked Application Information Management System and Associated Systems], which can be found at <a href="http://www.dhs.gov/privacy">www.dhs.gov/privacy</a>. DHS may also share this information as appropriate for law enforcement purposes or in the interest of national security.</p>
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