**TABLE OF CHANGES – INSTRUCTIONS**

**Form I-601A, Application for Provisional Unlawful Presence Waiver**

**OMB Number: 1615-0123**

**01/30/2018**

|  |
| --- |
| **Reason for Revision: Extension with Standard Language updates to Signature sections.*** Black font = Current text
* Purple font = Standard language
* Red font = Changes
 |

|  |  |  |
| --- | --- | --- |
| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 12, Specific Instructions** | [Page 12]**Specific Instructions**…**Part 6. Applicant’s Statement, Contact Information, 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 also need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your application. | [Page 12]**Specific Instructions**…**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 also need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your application. |
| **Page 19, USCIS Privacy Act Statement** | **[Page 19]****USCIS Privacy Act Statement****AUTHORITIES:** The information requested on this application, and the associated evidence, is collected under INA section 101, INA section 212(a)(9)(B)(i) and (v), and 8 CFR section 212.7(e).**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**](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 19]****DHS Privacy Notice****AUTHORITIES:** The information requested on this application, and the associated evidence, is collected under the Immigration and Nationality Act sections 212(a)(9)(B) (i)(I) and (II), and 212(a)(9)(B)(v). **PURPOSE:** The primary purpose for providing the requested information on this application is to determine if you have established eligibility for the provisional unlawful presence waiver. DHS uses the information you provide to grant or deny the immigration benefit you are seeking. **[Page 20]****DISCLOSURE:** 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 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, as 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 published privacy impact assessment [DHS/USCIS/PIA-016(a) Computer Linked Application Information Management System and Associated Systems], which you can find at [**www.dhs.gov/privacy**](http://www.dhs.gov/privacy)**.** DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security. |