

Petition to Classify Orphan as an Immediate Relative

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-600 OMB No. 1615-0028 Expires 02/28/2017

For U.S. Government Use Only							
The petitioner is: Married Unmarried	Action Block		Receipt/Fee Stamp				
☐ Form I-600A Approval Approval Valid Until (mm/dd/yyyy):							
The petitioner is approved to adopt an orphan from (if specified): (Name of non-Hague Convention Country) PAIR Letter Issued Date (if applicable) (mm/dd/yyyy):	Department of State Actions: Approved Transfer to USCIS as Not Clearly Approvable Transfer to USCIS as Consular Return	Officer Sig	dicating Office/Post: nature and Date: gal Name after Adoption:				
To be Completed By an Attorney or Accredited Representative (if any) Select this box Form G-28 or is attached.	an Attorney or Accredited Form G-28 or G-28I (if applicable) USCIS Online Account Number (if any)						
orphan as your immediate relative.	ink. Complete a separate petition for each		•				
Part 1. Information About You (Pet	itioner)						
1. Family Name (Last Name)	Given Name (First Name)	N.	Iiddle Name (if applicable)				
2. Other Names Used (if any) Provide all other names you have ever use this section, use the space provided in Par	ed, including aliases, maiden name, and nickret 10. Additional Information.	names. If yo	u need extra space to complete				
Family Name (Last Name)	Given Name (First Name)	M	liddle Name (if applicable)				
Your Contact Information			(USPS ZIP Code Lookup)				
3. U.S. Mailing Address (if any) In Care Of Name (if any)							
Street Number and Name		Apt. Ste. Flr.	Number				
Succe rumber and rvame	F		Nullioci				
City or Town		State	ZIP Code				
•							

Pa	rt 1. Information About You (Petitioner) (con	ntinued)		
4.	Is your current U.S. mailing address the same as your U	S. physical address?		Yes No
	If you answered "No," provide your U.S. physical addre appropriate.	ss in Item Number 5. or yo	ur address abro	ad in Item Number 6. , as
5. U.S. Physical Address (if any)				
	Street Number and Name		Apt. Ste. Flr.	Number
	City or Town		State	ZIP Code
6.	Address Abroad (if any) Street Number and Name		Apt. Ste. Flr.	Number
		An		
	City or Town		State	
	Province Postal Code	Country		
		1 10	r	
7.	Daytime Telephone Number	8. Mobile Telephone	Number (if any	y)
9.	Email Address (if any)			
T	Source ation About Your U.S. Citizenship			
	formation About Your U.S. Citizenship			
10.	USCIS Online Account Number (if any) ► 11. Da	ate of Birth (mm/dd/yyyy)		
12.	City/Town/Village of Birth	13. State or Province	e of Birth	
14.	Country of Birth			
15.	How did you obtain your U.S. citizenship?	rth Parents N	aturalization	
	A. If you acquired your citizenship through your paren your own name?	ts, have you obtained a Cert	ificate of Citize	enship in Yes No
	If you answered "Yes," provide the following inform	nation about your Certificat	e of Citizenship	:
	Your Name On the Certificate of Citizenship			
	Family Name (Last Name)	Given Name (First Nam	e)	Middle Name (if applicable)
	Alien Registration Number (A-Number) (if any) Cer	tificate of Citizenship Numb	er	
	► A-			
	Date of Issuance Place	ce of Issuance		
	(mm/dd/yyyy)			

Form I-600 12/23/16 Page 2 of 17

Pa	rt	1. Information About You (Petitioner) (continued)
	В.	If you obtained your citizenship through naturalization, provide the following information about your Certificate of Naturalization:
		Your Name On the Certificate of Naturalization
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
		A-Number (if any) Certificate of Naturalization Number
		► A-
		Date of Naturalization Place of Naturalization
		(mm/dd/yyyy)
	yo N(we you EVER renounced or lost U.S. citizenship or has anyone you obtained citizenship through (such as Yes No ur parent or grandparent) EVER lost U.S. citizenship? OTE: If you answered "Yes," provide a detailed explanation in the space provided in Part 10. Additional Information .
		hat is your marital status? Single Married Separated Divorced Widowed
18.	Ho	ow many times have you been married (including your current marriage, if applicable)?
	N(OTE: If you are not currently married, skip to Item Number 29.
In	for	mation About Your Current Marriage
19.	Da	tte of Current Marriage (mm/dd/yyyy) 20. Place Where Current Marriage Occurred
21.	Na	ume of Your Current Spouse
		mily Name (Last Name) Given Name (First Name) Middle Name (if applicable)
22.	Ot	her Names Your Current Spouse Has Used (if any)
	co	ovide all other names your spouse has ever used, including aliases, maiden name, and nicknames. If you need extra space to implete this section, use the space provided in Part 10. Additional Information. Middle Name (if applicable)
23.	Inf	Formation About Your Current Spouse
	Sp	ouse's Date of Birth (mm/dd/yyyy) Spouse's A-Number (if any) Spouse's USCIS Online Account Number (if any)
		► A-
	Sp	ouse's City/Town/Village of Birth Spouse's State or Province of Birth
	Sp	ouse's Country of Birth

Form I-600 12/23/16 Page 3 of 17

Pa	rt 1. Information About You	(Petitioner) (cor	ntinued)		
	our spouse a U.S. citizen?		,		☐ Yes ☐ No
Ť	ou answered "Yes," how did your spot	ise obtain U.S. citiz	zenship? Birtl	h Naturalizati	on Parents
If y	ou answered "No," provide your spous	se's current U.S. im	migration status:		
24.	How many times has your current spo	ouse been married (including your current	marriage, if applicabl	e)?
Yo	ur Spouse's Contact Informatio	on			
25.	Does your current spouse reside with	you?			Yes No
	If you answered "No," provide your	current spouse's ph	ysical address in Item I	Number <mark>26.</mark>	
26.	Your Current Spouse's Physical Addr	ess (if applicable)			
	Street Number and Name		VA VI	Apt. Ste. Flr.	Number
	City or Town			State	ZIP Code
			4 4		
	Province	Postal Code	Country	7	
27.	Spouse's Daytime Telephone Number	r	28. Spouse's Mo	obile Telephone Num	ber
29.	Spouse's Email Address (if any)	00	JUCI	ior	1
Ad	ditional Household Members				
30.	How many persons 18 years of age or	older (other than y	your spouse, if married)	reside with you?	
	If you answered "1" or more, you MU for each person.	JST complete Form	n I-600A/I-600 Supplen	ment 1, Listing of Add	alt Member of the Household
31.	List all of your children who are under household, regardless of your relation provided in Part 10. Additional Info	ship to those child			
	Name (First/Middle/Last)	Date of Birth (mm/dd/yyyy)	Country of Birth	A-Number (if any)	Relationship to You

Form I-600 12/23/16 Page 4 of 17

Pa	rt 1. Information About You (Petitioner) (continued)		
Int	formation About Prior Filings or Adoptions		
If y	ou need extra space to complete Item Numbers 32 37., use the space provided in Part 10. Additional Inform	nation.	
32.	Have you ever previously filed Form I-600, Form I-600A, Application for Advance Processing of an Orphan Petition, Form I-800A, Application for Determination of Suitability to Adopt a Child From a Convention Country, Form I-800, Petition to Classify Convention Adoptee as an Immediate Relative, or Form I-130, Petition for Alien Relative, for an adopted child?	Yes	☐ No
	If you answered "Yes," provide the following information for EACH petition and/or application:		
	Type of Petition/Application Filed:		
	Form I-600A Form I-600 Form I-800A Form I-130 (for an adopted child) Result: Approved Denied Withdrawn Revoked Other (please explain):		
	Date (mm/dd/yyyy)		
33.	Have you previously completed a domestic adoption of a child within the U.S.? If you answered "Yes," provide the following information for each completed domestic adoption of a child.	Yes	□ No
	State And County Where Adoption Was Finalized Date Adoption Was Finalized	d (mm/dd/	′уууу)
34.	Have you ever previously attempted to adopt a child internationally or domestically, but the adoption was disrupted before it was finalized? An adoption is disrupted if you (or a custodian escorting the child on your behalf) are granted legal custody or guardianship of the child, but the adoptive placement is interrupted before the adoption was finalized. If you answered "Yes," provide a detailed description of the disruption.	Yes	No
35.	Have you ever previously completed an adoption, either in the United States or abroad, that was later dissolved? An adoption is dissolved if your parental rights over the adopted child are terminated at any time after the adoption was finalized.	Yes	☐ No
	If you answered "Yes," provide a detailed description of the dissolution.		
36.	Have you ever previously placed a child in the care of another person with the intent to transfer permanent	Yes	□ No
	custody of the child? If you answered "Yes," provide a detailed description of the placement.		
25			
51.	Have you ever received a child with the intent to gain permanent custody, but without involving the child welfare or other state/local authorities or following the state/local process?	Yes	No
	If you answered "Yes," provide a detailed description of the custody transfer.		

Form I-600 12/23/16 Page 5 of 17

Part 1. Information About You (Petitioner) (continued)
Duty of Disclosure
You and your spouse (if married) must answer the following questions. See the Duty of Disclosure section in the Form I-600 Instructions concerning your ongoing duty to disclose information in response to these questions. If you or your spouse answer "Yes" to any of the questions in Item Number 38. and 39. , provide a certified copy of the documentation showing the final disposition of each incident which resulted in arrest, indictment, conviction, and/or any other judicial or administrative action and a written statement giving details, including any mitigating circumstances about each arrest, signed by you and/or your spouse (if married) under penalty of perjury under U.S. law. The written statement must show the date of each incident; place incident occurred (city/town, state/province, country); name of police department or other law enforcement administration or other entity involved; date of incarceration and name of facility, if applicable. Provide a description of any type of counseling, rehabilitation, or other information that you and your spouse (if married) would like considered in light of this history in the space provided in Part 10. Additional Information .
38. Have you EVER, whether in or outside the United States: A. Been investigated, arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance? (Answer "Yes," even if the record of the arrest, conviction, or other adverse criminal history was expunged, sealed, pardoned, or the subject of any other amelioration. Do not include traffic violations, except for violations for driving or operating a vehicle while intoxicated

or while impaired by or under the influence of alcohol or other intoxicant.) **B.** Received a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action? Yes No C. Received a suspended sentence, been placed on probation or parole, or been in an alternative Yes No sentencing or rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication, or expungement of a criminal charge? D. Been the subject of any investigation at any time even if closed or unsubstantiated, by any child ☐ No Yes welfare agency, court, or other official authority in any state or foreign country concerning the abuse or neglect of any child? 39. Has your spouse **EVER**, whether in or outside the United States: A. Been investigated, arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or Yes ☐ No violating any law or ordinance? (Answer "Yes," even if the record of the arrest, conviction, or other adverse criminal history was expunged, sealed, pardoned, or the subject of any other amelioration. Do not include traffic violations, except for violations for driving or operating a vehicle while intoxicated or while impaired by or under the influence of alcohol or other intoxicant.) **B.** Received a pardon, amnesty, rehabilitation decree, other act of elemency, or similar action? No Yes C. Received a suspended sentence, been placed on probation or parole, or been in an alternative Yes No sentencing or rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication, or expungement of a criminal charge? D. Been the subject of any investigation at any time even if closed or unsubstantiated, by any child Yes □ No welfare agency, court, or other official authority in any state or foreign country concerning the abuse or neglect of any child? Part 2. Information About the Orphan Beneficiary Name at Birth Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) Current Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Form I-600 12/23/16 Page 6 of 17

Pa	rt 2	2. Information About the Orp	han B	Beneficiary (c	ontinued)			
3.	Oth	ner Names the Orphan Has Used						
		ovide all other names the orphan has extion, use the space provided in Part 1 0.				need extra space to	o complete	this
	Fan	Family Name (Last Name) Given Name (First Name) Middle Name (First Name)				Middle Name	e (if applical	ole)
4.	Ger	nder 5. Date of Bir	th (mr	n/dd/yyyy) 6.	City/Town/Village of Bir	th		
		Male Female						
7.	Stat	te or Province of Birth		8.	Country of Birth			
						1		
9.	The	e beneficiary is an orphan because (sel	ect only	y one box):				
	A. He or she has no parents due to the death or disappearance of, abandonment or desertion by, or separation or loss from both parents.						s from	
	В.	He or she has a sole or surviving released the child for emigration			e of providing proper care	and who has in w	riting irrevo	cably
10.	If tl	he orphan has a sole or surviving pare	nt, answ	ver the following				
	A.	What happened to the other birth or p	orevious	s parent?				
				_	4			
	_							
		Is the remaining parent capable of pr					∐ Yes	∐ No
		Has the remaining parent irrevocably	release	ed the orphan fo	r emigration and adoption,	in writing?	∐ Yes	∐ No
		l you adopt the orphan abroad?					Yes	∐ No
		I your spouse (if married) adopt the or			1004		Yes	No
13.	If y	ou answered "Yes" to Item Number	11. or It	tem Number 12	, provide the following int	formation:		
	Α.	Did you or your spouse (if married) proceedings? (This does not include				ng the adoption	Yes	☐ No
	B.	Date of Adoption (mm/dd/yyyy)	C.	Place of Adopt	ion			
14.		rou answered "No" to either Item Nun ormation:	ıber 11	., Item Number	r 12., or Item A. in Item N	umber 13., provid	de the follow	wing
	NO	TE: If you need extra space to comp	lete Ite i	ms A D., use t	he space provided in Part	10. Additional In	formation.	
	A.	Do you and your spouse (if married)	intend	to adopt the orpl	nan in the United States?		Yes	☐ No
	В.	Provide a written description of all the relevant state statutes and regulations requirements, indicate "not applicable a	s. If the					

Form I-600 12/23/16 Page 7 of 17

Par	t 2	2. Information About the Orphan Benefit	ciary (contin	ued)				
	C.	Have any pre-adoption requirements of the orphan If you answered "Yes," provide which requiremen			already been n	net?	Yes	☐ No
]	D.	Will any pre-adoption requirements be met at a lat If you answered "Yes," describe the steps you will		with these re	quirements.		Yes	☐ No
		If you answered "No," provide each pre-adoption i	equirement that	will not be n	net and explain	why.		
15. <i>'</i>	Гоз	o your knowledge:						
	A.		and/or impairme	ent?			Yes	☐ No
]	В.	. If you answered "Yes," name or describe the speci	escribe the special need, disability, and/or impairment.					
16. ′	Гhe	he orphan's legal custodian is (select only one box): An individual or entity other than the orphan's birt	h parents.					
[Name of the individual or entity: Both of the orphan's living birth parents.						
[One of the orphan's living birth parents. The living	g birth parent is	the (select on	lly one box):	Mother	r \square Fa	ather
ا 1 7 . 1	Info							
		Information About the Attorney Abroad Representing You and/or Your Spouse (if married) in this Case (if any) Samily Name (Last Name) Given Name (First Name) Middle Name (if applicable)						
			O/2					
;	Stre	reet Number and Name			Apt. Ste. Flr.	Number		
(City	ity or Town			State	ZIP Code		
]	Pro	rovince Postal Co	de	Country				

Form I-600 12/23/16 Page 8 of 17

Pa	rt 2. Information About the Orphan Be	neficiary (continue	ed)			
18.	Address Where the Orphan Will Reside After the	Adoption (or after you	obtain legal	custody)		
	Street Number and Name		_	Apt. Ste. Flr.	Number	
	City or Town			State	ZIP Code	
	Province Posta	ıl Code C	Country			
19.	Current Address of the Orphan					
	In Care Of Name					
		2 /	K			
	Street Number and Name		<u> </u>	Apt. Ste. Flr.	Number	
	City or Town			State	ZIP Code	
		44				
	Province Posta	l Code C	Country			
20.	If the orphan resides in an institution, provide the	full name of the institut	tion.			
		_				
21.	If the orphan does not reside in an institution, provof the orphan's caretaker.	vide the full name of the	e person wit	h whom the orj	phan is residing or the nar	me
	·	Given Name (First Nan	20)	Mid	ldla Nama (if annliaghla)	
	ranny Name (Last Name)	Jiven Name (First Nam	ie)	Mid	Idle Name (if applicable)	
22.	Provide any additional information necessary to lo	ocate the ornhan such a	is the name (of a district sec	ction zone or locality in	
	which the orphan resides:	cate the orphan, such a		or a district, see	ction, zone, or locality in	
		10/2				
23.	After you obtain an adoption or legal custody of the	ne orphan, do you inten	d to:			
	A. Seek an immigrant visa because the child will	reside with you in the	United State	es?	Yes	No
	B. Seek a non-immigrant visa for the child to transaturalization, because you will continue to readoption?] No
24.	Where do you wish to file your visa application (if	f applicable)?				
	The U.S. Embassy or U.S. Consulate located at:					
	· L					

Form I-600 12/23/16 Page 9 of 17

Pa	art 3. Information About Your Home Study a	and Primary Adoption Service Provider					
ι.	Your home study:						
	A. Was previously submitted with your approved approval notice).	d Form I-600A application (please attach a copy of your Form I-600A	A				
	B. Was previously submitted with your pending F receipt notice).	Form I-600A application (please attach a copy of your Form I-600A	fee				
	C. IS attached to this Form I-600.						
	D. IS NOT attached to this Form I-600 because of state requirements necessitating review and documentation. The appropriate state authority has indicated that it will submit the home study directly to U.S. Citizenship and Immigration Services (USCIS). (Do not submit your Form I-600 to USCIS until the state authority is ready to send your home study to USCIS.)						
In	formation About Your Primary Adoption Service	vice Provider					
ens sup	uring all six adoption services defined in 22 CFR 96.2 are	ted agency or approved person who is responsible under 22 CFR 96 free provided according to the law, for supervising and being responsible developing and implementing a service plan in accordance with 22	le for				
2.	Name of Primary Adoption Service Provider						
		t tor					
3.	Point of Contact Within the Organization						
	Family Name (Last Name)	Given Name (First Name)					
l.	Primary Adoption Service Provider's Mailing Address	l 4.º					
	Street Number and Name	Apt. Ste. Flr. Number					
	City or Town	State ZIP Code					
5.	Primary Adoption Service Provider's Daytime Telephone N	Number 6. Primary Adoption Service Provider's Fax Number (i	f any)				
7.	Primary Adoption Service Provider's Email Address (if a	any) LULO					
	, angle of the second of the s						
3.	The primary adoption service provider named above is o	one of the following:					
	A. An accredited agency in the United States.	Yes	No				
	B. An approved person in the United States.	Yes	No				

Form I-600 12/23/16 Page 10 of 17

Part 4. Information About Fees, Expenses, and Other Compensation

If you need extra space to complete the tables in Item Numbers 1. or 2., use the space provided in Part 10. Additional Information.

1. Information on payments already made. In the following table, provide all payments, including in-kind contributions that you and your spouse (if married) have made in relation to the adoption of the child identified in this Form I-600. The information you provide in this table must include all fees, expenses, in-kind contributions, and other compensation that you and your spouse (if married) or anyone on behalf of you and your spouse, have directly or indirectly made, to any individual, agency, entity, governmental authority, or other payee or recipient. The information below should include all payments made as of the date of your signing this Form I-600.

Date (mm/dd/yyyy)	Payee	Relationship to Child (if any)	Purpose of Payment	Amount of payment (or description and value of in kind consideration)
		RA		
		ot:	tor	
	Dro		ctio	

2. Information on anticipated future payments. In the following table, provide all fees, expenses, in-kind contributions, and other compensation that you and your spouse (if married) or anyone on behalf of you and your spouse, reasonably expect to pay or make, either directly or indirectly, to any individual, agency, entity, governmental authority, or other payee or recipient.

Anticipated Date of Payment (mm/dd/yyyy)	Payee	Relationship to Child (if any)	Purpose of Payment	Amount of payment (or description and value of in kind consideration)
		40/	401	O

Form I-600 12/23/16 Page 11 of 17

Pa	rt 4. Information About Fees, Expenses, and Other Compensation (continued)			
	Have you or your spouse (if married) or anyone on behalf of you and your spouse, given or arranged to give money or other consideration either directly or indirectly to the orphan's parent(s), agent(s), other individual(s), or entity to induce or encourage the release of the orphan? If you answered "Yes," provide a detailed description to explain.			
_				
Pa	rt 5. Accommodations for Individuals With Disabilities and/or Impairments			
NO	TE: Read the information in the Form I-600 Instructions before completing this section.			
1.	Are you requesting an accommodation because of disabilities and/or impairments?			
2.	If you answered "Yes," select all applicable boxes below to indicate who has the disabilities and/or impairments.			
	Petitioner Spouse Other Adult Household Member			
3.	If you answered "Yes" to Item Number 1 ., select all applicable boxes in Items A C. and provide an answer for each person with disabilities and/or impairments.			
	A. Deaf or hard of hearing and request the following accommodation. (If requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).):			
	B. Blind or have low vision and request the following accommodation:			
	C. Another type of disability and/or impairment. (Describe the nature of the disability and/or impairment and the requested accommodation.):			
	11/00/010			
Pa	rt 6. Petitioner's Statement, Certification, Duty of Disclosure, and Signature			
NO	TE: Read the Penalties section of the Form I-600 Instructions before completing this section.			
Pe	titioner's Statement			
1.	Petitioner's Statement Regarding the Interpreter (Select the box for either Item A. or B.)			
A. I can read and understand English, and I have read and understand every question and instruction on this parameter to every question.				
	B. The interpreter named in Part 8. read to me every question and instruction on this petition and my answer to			
	every question in , a language in which I am fluent, and			
	I understood everything.			
2.	Petitioner's Statement Regarding the Preparer (if applicable)			
	At my request, the preparer named in Part 9. ,			
	prepared this application for me based only upon information I provided or authorized.			

Form I-600 12/23/16 Page 12 of 17

Part 6. Petitioner's Statement, Certification, Duty of Disclosure, and Signature (continued)

Petitioner's Certification

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 and all of my records that USCIS may need to determine my suitability and eligibility as an adoptive parent and whether the child I am petitioning for is eligible to be classified as my immediate relative.

I furthermore 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 law.

I understand that USCIS will require me to appear for an appointment to take my biometrics (for example, fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:

- 1) I reviewed and provided or authorized all of the information in my petition;
- 2) I understood all of the information contained in, and submitted with, my petition; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my petition, I understand all of the information contained in and submitted with my petition, and that all of this information is complete, true, and correct.

Petitioner's Duty of Disclosure

I understand the ongoing duty to disclose information concerning my suitability and eligibility as an adoptive parent, as described in the Form I-600 and/or Form I-600A Instructions, and I agree to notify my home study preparer and USCIS of any new information that I am required to disclose.

Pé	etitioner's Signature					
3.	Petitioner's Signature Date of Signature (mm/dd/yyyy)					
	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.					
	11/00/010					
Pa	art 7. Your Spouse's Statement, Certification, Duty of Disclosure, and Signature					
NC	NOTE: Read the Penalties section of the Form I-600 Instructions before completing this section.					
Ya	our Spouse's Statement					
1.	Spouse's Statement Regarding the Interpreter (Select the box for either Item A. or B.)					
A. I can read and understand English, and have read and understand every question and instruction on thi answer to every question.						
	B. The interpreter named in Part 8. read to me every question and instruction on this petition and my answer to					
	every question in , a language in which I am fluent,					
	and I understood everything.					
2.	Spouse's Statement Regarding the Preparer (if applicable)					
	At my request, the preparer named in Part 9. ,					
	prepared this petition for me based only upon information I provided or authorized.					

Form I-600 12/23/16 Page 13 of 17

Part 7. Your Spouse's Statement, Certification, Duty of Disclosure, and Signature (continued)

Your Spouse's Certification

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 and all of my records that USCIS may need to determine my suitability and eligibility as an adoptive parent and whether the child my spouse is petitioning for is eligible to be classified as our immediate relative.

I furthermore 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 law.

I understand that USCIS will require me to appear for an appointment to take my biometrics (for example, fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:

- 1) I reviewed and provided or authorized all of the information in my petition;
- 2) I understood all of the information contained in, and submitted with, my petition; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my petition, I understand all of the information contained in and submitted with my petition, and that all of this information is complete, true, and correct.

Your Spouse's Duty of Disclosure

Vour Spausa's Signatura

I understand the ongoing duty to disclose information concerning my suitability and eligibility as an adoptive parent, as described in the Form I-600 and/or Form I-600A Instructions, and I agree to notify the home study preparer and USCIS of any new information that I am required to disclose.

10	ar Spouse's Signature						
3.	Your Spouse's Signature Date of Signature (mm/dd/yyyy						
Pa	Part 8. Interpreter's Contact Information, Certification, and Signature						
•	If you and/or your spouse (if married) used an interpreter to read and complete this petition, provide the following information about the interpreter.						
In	Interpreter's Full Name						
1.	Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)						
2.	Interpreter's Business or Organization Name (if any)						

Form I-600 12/23/16 Page 14 of 17

Pa	Part 8. Interpreter's Contact Information, Certification, and Signature (continued)						
In	terpr	eter's Mailing	Address				
3.	-	Street Number and Name			Apt. Ste. Flr. Number		
	City	or Town				State	ZIP Code
	Prov	ince	Postal Coo	de	Country		
In	ternr	eter's Contact I	Information	^			
4.	-		Telephone Number	5 In	tornratar'a Mak	oile Telephone N	(umbar (if any)
٦.		Expreser's Daytime	Telephone Number	3, 111	terpreter's two	one relephone N	umber (ii any)
6.	Inte	erpreter's Email Ad	ldress (if any)				
			<u></u>				
		. ~ .0			1.		
In	terpr	eter's Certifica	tion				
I ce	ertify,	under penalty of po	erjury, that:				
I ar	n fluei	nt in English and [, which is	the same language specified in
eve info	ry que ormed	estion and instructi me that he or she	tem Number 1., and I have react on on this petition and their answunderstands every instruction, quality Spouse's Certification, and ha	wer to every uestion, and a	question. The answer on the p	petitioner and/or petition, includin	the petitioner's spouse
In	terpr	eter's Signatur	e				
7.	Inter	preter's Signature				D	ate of Signature (mm/dd/yyyy)
			11/2	9/	71		
		Contact Infor he Petitioner a	rmation, Declaration, and nd Spouse	Signature	e of the Pers	son Preparing	g this Petition, If Other
If y	ou and	d/or your spouse (i	f married) used a preparer to con	mplete this p	etition, provide	the following ir	nformation about the preparer.
Pr	repar	er's Full Name					
1.	Prepa	arer's Family Nam	e (Last Name)		Preparer's Giv	ven Name (First	Name)
						,	
2.	Prepa	arer's Business or G	Organization Name (if any)				

Form I-600 12/23/16 Page 15 of 17

Part 9. Contact Information, Declaration, and Signature of the Person Preparing this Petition, If Other Than the Petitioner and Spouse (continued)

Pr	eparer's Mailing Address					
3.	Street Number and Name	Apt. Ste. F	ir. Number			
	City or Town	State	ZIP Code			
	Province Postal Code Country					
Preparer's Contact Information						
4.	Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)					
6.	Preparer's Email Address (if any)					
	Not fo	10				
Pr	eparer's Statement					
7.	alf of the petitioner and/or the sent.					
	B. I am an attorney or accredited representative and my representation of the (if married) in this case extends does not extend beyond the property of the extends are accredited representative and my representation of the control of the property of the extends are accredited representative and my representation of the control of	•				
Pr	eparer's Certification					
spor	my signature, I certify, under penalty of perjury, that I prepared this petition at the ruse (if married). The petitioner and the petitioner's spouse (if married) then reviewed by she understands all of the information contained in, and submitted with, his or he etification and the Your Spouse's Certification, and that all of this information is a tion based only on information that the petitioner provided to me or authorized me	ed this compler r petition, incl complete, true	eted petition and informed me that uding the Petitioner's , and correct. I completed this			
Preparer's Signature						
8.	Preparer's Signature		Date of Signature (mm/dd/yyyy)			

Form I-600 12/23/16 Page 16 of 17

Part 10. Additional Information

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. If you attach a separate sheet of paper, type or print your full 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.

1.	Fan	family Name (Last Name) Given	n Name (First Name)	Middle Name
2.	A-N	A-Number (if any) ► A-		
3.	A.	A. Page Number B. Part Number C. Ite	em Number	
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6.	A.	A. Page Number B. Part Number C. Ite	em Number	
	D.). 		

Form I-600 12/23/16 Page 17 of 17