

Supplement 1, Listing of Adult Member of the Household

d Form I-600A/I-600 Supplement 1

Supplement 1 OMB No. 1615-0028

Department of Homeland Security

U.S. Citizenship and Immigration Services

OMB No. 1615-0028 Expires 12/31/2018

USCIS

► START HERE - Type or print in black ink. You, the applicant or petitioner, must complete Form I-600A/Form I-600, Supplement 1, for EACH adult member of your household 18 years of age or older. Do not complete this separate Supplement 1 for yourself or your spouse (if married).

Pa	art 1. Information About an Adult Member of	the Househole	ld
Pro	ovide the following information about the Adult Member	r of the Househo	old.
1.	Family Name (Last Name) Gir	ven Name (First N	Name) Middle Name (if applicable)
2.	Other Names Used by the Adult Member of the Household	d (if any)	
	Provide all other names the adult member of the household need extra space to complete this section, use the space pro-		
	Family Name (Last Name) Gir	ven Name (First N	Name) Middle Name (if applicable)
Ac	dult Member of the Household's Contact Inform	ation	
3.	U.S. Mailing Address (if any) In Care Of Name (if any)		(USPS ZIP Code Lookup)
	Street Number and Name		Apt. Ste. Flr. Number
	11/9/		
	City or Town	3 ///	State ZIP Code
		<u> </u>	
4.	Is the current U.S. mailing address the same as the adult m	nember of the hou	busehold's U.S. physical address? Yes No
	If you answered "No," provide the U.S. physical address in appropriate.	n Item Number 5	5. or an address abroad 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
	City or Town		State
	Province Postal Code	Сог	ountry

Pa	rt 1	. Information About an Adult Member of the	Hou	ısel	hold (continued)
7.	Day	rtime Telephone Number	8	3.	Mobile Telephone Number (if any)
9.	Ema	ail Address (if any)	1		
Ad	ult .	Member of the Household's Biographical Infor	matic	on	
10.	Dat	e of Birth (mm/dd/yyyy) 11. City/Town/Village of	Birth		L I
12.	Stat	e or Province of Birth	13.	Cou	untry of Birth
			L		
14.	Alie		S Onl	line	Account Number (if any)
	•	A-		H	
$D\iota$	ıty a	of Disclosure			
Υοι	ı, the	applicant or petitioner, must answer each of the following	quest	tion	as. See the Duty of Disclosure section in the Form I-600A
or F	orm	I-600 Instructions concerning your ongoing duty to disclos	se info	orm	nation in response to these questions. If you answer "Yes"
		f these questions, provide a certified copy of the documenta			wing the final disposition of each incident which resulted action and a written statement giving details, including any
					signed by the adult member of the household under penalty
of p	erjui	ry under U.S. law. The statement should include the follow	ving:		
16.		igned outside the United States: "I declare (or certify, ve es of America that this statement is true and correct."	rify, o	or st	tate) under penalty of perjury under the laws of the United
		cuted On (mm/dd/yyyy) Signature			2010
			7		7/11/8
17.	If si	igned within the United States (including territories, pos	ssessi	ons	, and commonwealths): "I declare (or certify, verify, or
	state	e) under penalty of perjury that this statement is true and co	orrect.	Ex	secuted on (date in mm/dd/yyyy format). (Signature)."
	Exe	cuted on Signature			
The	writ	ten statement must also show the date of each incident; pla	ice the	ine	cident occurred (city/town, state/province, country); name
					ntity involved; date of incarceration and name of facility, if
		le; and include your (the applicant's/petitioner's) name and at, you should also provide a description of any type of cou			
		of the household would like considered in light of this hist		- , -	
18.	Has	the adult member of the household \mathbf{EVER} , whether in or	outsid	e th	ne United States:
	A.	Been investigated, arrested, cited, charged, indicted, convi			-
		violating any law or ordinance? (Answer "Yes" even if the adverse criminal history was expunged, sealed, pardoned,			
		not include traffic violations, except for violations for driv	ing o	r op	perating a vehicle while intoxicated or
		while impaired by or under the influence of alcohol or oth	er into	oxic	cant.)
	B.	Received a pardon, amnesty, rehabilitation decree, other a	ct of c	clen	mency, or similar action? Yes No

Part 1	1. Information About an Adult Member of the Household (continued)		
C.	Received a suspended sentence, been placed on probation or parole, or in an alternative sentencing or rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication, or expungement of a criminal charge?	Yes	☐ No
D.	Been the subject of any investigation at any time by any child welfare agency, court, or other official authority in any state or foreign country concerning the abuse or neglect of any child?	Yes	☐ No
Part 2	2. Adult Member of the Household's Statement, Certification, Duty of Disclosure,	and Signat	ure
and Ima	to the Adult Member of the Household: By signing this Form I-600A/I-600, Supplement 1, you agree migration Services (USCIS) may disclose to the applicant/petitioner or the applicant's/petitioner's adoption ble, information that USCIS may obtain about you that is relevant to the adjudication of the applicant's Form I-600, even if the Privacy Act, 5 USC 552a, might otherwise prevent disclosure of the information.	on service protorm I-600A o	viders, if r
docume	: If you, an adult member of the household, knowingly and willfully falsify or conceal a material fact or ent in support of this Supplement 1, USCIS will deny the Form I-600A/I-600 filed for this case and may os requested by the prospective adoptive parents.		
Adult	Member of the Household's Statement		
A. B.	lult Member of the Household's Statement Regarding the Interpreter (Select the box for either Item A. or I can read and understand English, and I have read and understand every question and instruction of my answer to every question. The interpreter named in Part 5. has read to me every question and instruction on this supplement every question, in	on this suppler	er to
	At my request, the preparer named in Part 6. ,		,
	prepared this supplement for me based only upon information I provided or authorized.		
A dult	Mombar of the Household's Cartification		

Adult Member of the Household'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 the suitability and eligibility of the applicant or petitioner as an adoptive parent.

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

Adult Member of the Household's Duty of Disclosure

I understand the ongoing duty to disclose information concerning any change of circumstance, as described in the Form I-600A and/or Form I-600 Instructions, and I agree to notify the applicant, petitioner, home study preparer, and USCIS of any new information that I am required to disclose.

	art 2. Adult Member of the Household's Statement, Certification, Duty of Disclosure, and Signature ontinued)					
Ad	lult Member of the Household's Signature					
3.	Adult Member of the Household's Signature Date of Signature (mm/dd/yyyy)					
Do	aut 2 Information About Voy the Applicant/Detitioner					
Pa	art 3. Information About You, the Applicant/Petitioner					
1.	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
2.	Date of Birth (mm/dd/yyyy) 3. City/Town/Village of Birth					
4.	State or Province of Birth 5. Country of Birth					
6.	A-Number (if any) 7. Daytime Telephone Number					
	► A-					
8.	Mobile Telephone Number (if any) 9. Email Address (if any)					
4.0						
10.	USCIS Online Account Number (if any)					
Pa	Part 4. Applicant's/Petitioner's Statement, Certification, and Signature					
NOTE: If you or any adult member of the household knowingly and willfully falsify or conceal a material fact or submit a false document with your Form I-600A/I-600, Supplement 1, USCIS will deny your Form I-600A or Form I-600 and may deny any USCIS benefit you request.						
Ap	pplicant's/Petitioner's Statement					
1.	Applicant's/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 supplement and my answer to every question.					
	B. The interpreter named in Part 5. read to me every question and instruction on this supplement and my answer to every					
	question in, a language in which I am fluent,					
	and I understood everything.					
2.	Applicant's/Petitioner's Statement Regarding the Preparer (if applicable)					
	At my request, the preparer named in Part 6. ,					
	prepared this supplement for me based only upon information I provided or authorized.					
2.	At my request, the preparer named in Part 6. ,					

Part 4. Applicant's/Petitioner's Statement, Certification, and Signature (continued)

Applicant's/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.

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

Ap	plicant's/Petitioner's Signature						
3.	Applicant's/Petitioner's Signature				Date of Signature (mm/dd/yyyy)		
				TR			
Pa	rt 5. Interpreter's Contact Information, Certific	ation,	and Signat	ture			
	ne adult member of the household and/or applicant/petitioner upowing information about the interpreter.	sed an	interpreter to 1	read and compl	ete this supplement, provide the		
-							
In	terpreter's Full Name						
1.	Interpreter's Family Name (Last Name)		Interpreter's C	Given Name (F	rst Name)		
2.	Interpreter's Business or Organization Name (if any)						
	11/26/2010						
In	terpreter's Mailing Address						
3.	Street Number and Name			Apt. Ste. I	Flr. Number		
	City or Town			State	ZIP Code		
	Province Postal Code		Country				
In	terpreter's Contact Information						
4.	Interpreter's Daytime Telephone Number	5.	Interpreter's N	Mobile Telepho	ne Number (if any)		
6.	Interpreter's Email Address (if any)	-					

Pa	art 5. Interpreter's Contact Information, Certification, and Signature (continued)
In	terpreter's Certification
I ce	rtify, under penalty of perjury, that:
I ar	n fluent in English and , which is the same language specified in Parts
ider the sup	nd 4., Item B. in Item Number 1., and I have read to this adult member of the household and/or applicant/petitioner in the ntified language every question and instruction on this supplement and his or her answer to every question. The adult member of household and applicant/petitioner informed me that he or she understands every instruction, question, and answer on the plement, including the Adult Member of the Household's Certification and the Applicant's/Petitioner's Certification, and has ified the accuracy of every answer.
In	terpreter's Signature
7.	Interpreter's Signature Date of Signature (mm/dd/yyyy)
	art 6. Contact Information, Declaration, and Signature of the Person Preparing this Supplement, If ther Than the Applicant/Petitioner or Adult Member of the Household
info	ou, the applicant/petitioner or adult member of the household used a preparer to complete this supplement, provide the following ormation about the preparer.
Pr	eparer's Full Name
1.	Preparer's Family Name (Last Name) Preparer's Given Name (First Name)
2.	Preparer's Business or Organization Name (if any)
Pr	eparer's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number
	City or Town State ZIP Code
	Province Postal Code Country
Pr	reparer's Contact Information
4.	Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)

Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Supplement, If Other Than the Applicant/Petitioner or Adult Member of the Household (continued)

Preparer's Statement

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this supplement at the request of the applicant/petitioner and/or adult member of the household. The applicant/petitioner and adult member of the household then reviewed this completed supplement and informed me that he or she understands all of the information contained in, and submitted with, this supplement, including the **Adult Member of the Household's Certification** and the **Applicant's/Petitioner's Certification**, and that all of this information is complete, true, and correct. I completed this supplement based only on information that the applicant/petitioner and/or adult member of the household provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature Date of Signature (mm/dd/yyyy)

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If you need extra space to provide any additional information within this supplement, 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 supplement 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	nily Name (Last Name)	Given Name (I	First Name)	Middle Name	
2.	A-N	Number (if any) ► A-	MD	VE_{-}	Γ	
3.	A.	Page Number B. Part Num	mber C. Item Number	er		
	D.					
			IOT			
					JR	
4.	A.	Page Number B. Part Num	nber C. Item Number	er T		
	D.				IUIV	
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			116		112	
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5.	A.	Page Number B. Part Num	mber C. Item Number	er		
	D.					
_	A	Dogo Nymbor D Dog Ny	mber C. Item Numbe			
0.	Α.	Page Number B. Part Num	nder C. Hem Number	er		
	D.					
	D.					

DHS Privacy Notice

AUTHORITIES: The information requested on this supplement, and the associated evidence, is collected under the Immigration and Nationality Act sections 101(b)(1)(F), 201, and 204, and 8 CFR sections 204.3, 204.301, and 204.311.

PURPOSE: This supplement must be completed for every adult member of the household, other than the applicant/petitioner and spouse (if married). USCIS may request submission of this supplemental form for additional individuals. The purpose of this supplement is to collect information on any individual who has the same residence as the applicant/petitioner and is 18 years of age or older on or before the date the applicant/petitioner files Form I-600A or Form I-600, any household member who has not yet turned 18 years of age before the applicant/petitioner files Form I-600A or Form I-600, and any individual who does not actually live at the same residence as the applicant/petitioner, but whose presence USCIS deems relevant to determine the applicant/petitioner's suitability to adopt. USCIS will determine suitability by conducting background and security checks on adult household members to assist in assessing the suitability of the applicant/petitioner.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of the underlying adoption-related application and/or petition.

ROUTINE USES: The Department of Homeland Security (DHS) may share the information you provide on this supplement 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-005 - Inter-Country Adoptions Security] and the published privacy impact assessments [DHS/USCIS/PIA-007(b) Domestically Filed Intercountry Adoptions Applications and Petitions and DHS/USCIS/PIA-051 Case and Activity Management for International Operations] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

PRIVACY ACT WAIVER: Except as permitted by the Privacy Act, 5 USC 552a, applicable routine uses, and information related to adult members of your household as noted below, USCIS may not disclose or give access to any information or record relating to any applicant/petitioner, spouse (if married), or adult member of your household to any individual or entity other than that person, including but not limited to an accredited agency, approved person, exempted provider, supervised provider, or other adoption service provider, unless you give written consent.

If you want to give consent for USCIS to disclose information about your case to an individual or entity, you must complete Form I-600A/I-600, Supplement 2, Consent to Disclose Information. You are not required to give this consent to file Form I-600.

NOTICE TO ADULT MEMBERS OF THE HOUSEHOLD: You are not the prospective adoptive parent who is filing Form I-600A application or Form I-600 petition. As an adult member of the prospective adoptive parent's household, however, information about you may be relevant to the adjudication of the prospective adoptive parent's Form I-600A or Form I-600. Under 8 CFR 103.2(b)(16), the prospective adoptive parent is entitled to review any information that may be used to deny a Form I-600A or Form I-600. By signing the Form I-600A/Form I-600, Supplement 1, you consent to USCIS disclosing to the prospective adoptive parents, adoption service provider, home study preparer, if applicable, and any individual or entity identified by the prospective adoptive parent, if applicable, information that USCIS may obtain about you that is relevant to the adjudication of the prospective adoptive parent's Form I-600 or Form I-600A, even if the Privacy Act, 5 USC 552a, might otherwise prevent disclosure of the information to the prospective adoptive parents.