TABLE OF CHANGES – FORM

Form I-600, Petition to Classify Orphan as an Immediate Relative OMB Number: 1615-0028 10/31/2019

Reason for Revision: Fee Rule.

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 12/31/2018 Edition Date 12/23/2016

Current Page Number and Section	Current Text	Proposed Text
Page 1, For U.S.	[Page 1]	[Page 1]
Government Use Only	For U.S. Government Use Only	For U.S. Government Use Only
	[Column 1] The petitioner is:	[Column 1] The petitioner is:
	Married	Married
	Unmarried	Unmarried
	[] Form I-600A Approval Approval Valid Until (mm/dd/yyyy):	[] 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):	The petitioner is approved to adopt an orphan from (if specified): (Name of non-Hague Country):
	[] PAIR Letter Issued Date (if applicable) (mm/dd/yyyy):	[] PAIR Letter Issued Date (if applicable) (mm/dd/yyyy):
	[Column 2] Action Block	[Column 2] Action Block
	Department of State Actions: [] Approved [] Transfer to USCIS as Not Clearly Approvable [] Transfer to USCIS as Consular Return	Department of State Actions: [] Approved [] Transfer to USCIS as Not Clearly Approvable [] Transfer to USCIS as Consular Return
	[Column 3] Receipt/Fee Stamp	[Column 3] Receipt/Fee Stamp
	Final Adjudicating Office/Post: Officer Signature and Date: Child's Legal Name after Adoption:	Final Adjudicating Office/Post: Officer Signature and Date: Child's Legal Name after Adoption:
	To be Completed By an Attorney or Accredited Representative (if any). Select this box if Form G-28 or Form G-28I is	To be Completed by an Attorney or Accredited Representative (if any). Select this box if Form G-28 or Form G-28

attached.

Attorney State Bar Number (if applicable): Attorney or Accredited Representative USCIS Online Account Number (if any)

START HERE - Type or print legibly in black ink. Complete a separate petition for each child. This petition is made to classify the named orphan as your immediate relative.

You must be a U.S. citizen in order to file this petition. See the What Are the Eligibility Requirements section of the Form I-600 Instructions for more information.

is attached.

Attorney State Bar Number (if applicable): Attorney or Accredited Representative USCIS Online Account Number (if any)

START HERE - Type or print in black ink. Complete a separate petition for each child.

This petition is used to determine if a child is an orphan and eligible to be classified as your immediate relative.

You must be a U.S. citizen to file this petition. See the What Are the Eligibility Requirements section of the Form I-600 Instructions for more information.

Page 1, Information About You (Petitioner)

Part 1. Information About You (Petitioner)

- 1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
- 2. 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.**

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Your Contact Information

3. U.S. Mailing Address (if any) In Care Of Name Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code

4. Is your current U.S. mailing address the same as your U.S. physical address? Y/N

If you answered "No," provide your U.S. physical address in **Item Number 5.** or your address abroad in **Item Number 6.**, as appropriate.

5. U.S. Physical Address (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State

Part 1. Information About You (Petitioner)

- 1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
- 2. Other Names Used (if any)

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 13. Additional Information.**

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Your Contact Information

3. U.S. Mailing Address (if any) In Care Of Name Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code

[Page 2]

4. Is your current U.S. mailing address the same address as your U.S. physical residence? Yes/No

If you answered "No to **Item Number 4.**," provide the address for your U.S. residence in **Item Number 5.** or the address for your residence abroad in **Item Number 6.**, as appropriate.

5. Address of U.S. Residence (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State

ZIP Code

[Page 2]

6. Address Abroad (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State Province Postal Code Country

[New]

- 7. Your Daytime Telephone Number
- **8.** Your Mobile Telephone Number (if any)
- **9.** Your Email Address (if any)

Information About Your U.S. Citizenship

- **10.** USCIS Online Account Number (if any)
- 11. Date of Birth (mm/dd/yyyy)
- 12. City/Town/Village of Birth
- **13.** State or Province of Birth
- **14.** Country of Birth
- **15.** How did you obtain your U.S. citizenship? Birth

Parents

Naturalization

A. If you acquired your citizenship through your parents, have you obtained a Certificate of Citizenship in your own name? Yes/No

If you answered "Yes," provide the following information about your Certificate of Citizenship:

Your Name On The Certificate of Citizenship

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Alien Registration Number (A-Number) (if any)

Certificate of Citizenship Number

ZIP Code

6. Address of Residence Abroad (if any)

Street Number and Name Apt. Ste. Flr. Number

City or Town

State

Province

Postal Code

Country

7. Which address would you like USCIS to use for mailing notices and decisions to you?

U.S. Mailing Address

[] Address of Residence Abroad

- **8.** Your Daytime Telephone Number
- **9.** Your Mobile Telephone Number (if any)
- **10.** Your Email Address (if any)

Information About Your U.S. Citizenship

- 11. USCIS Online Account Number (if any)
- **12.** Date of Birth (mm/dd/yyyy)
- 13. City/Town/Village of Birth
- **14.** State or Province of Birth
- 15. Country of Birth

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16. How did you obtain your U.S. citizenship? Birth

Parents

Naturalization

A. If you obtained your citizenship through your parents, have you obtained a Certificate of Citizenship in your own name? Yes/No

If you answered "Yes," provide the following information about your Certificate of Citizenship:

Your Name On The Certificate of Citizenship

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Alien Registration Number (A-Number) (if any)

Certificate of Citizenship Number

Date of Issuance (mm/dd/yyyy)

Date of Issuance (mm/dd/yyyy)

Place of Issuance

B. 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

Date of Naturalization (mm/dd/yyyy)

Place of Naturalization

16. Have you **EVER** renounced or lost U.S. citizenship or has anyone you obtained citizenship through (such as your parent or grandparent) **EVER** lost U.S. citizenship? Yes/No

NOTE: If you answered "Yes", provide a detailed explanation in the space provided in **Part 10. Additional Information.**

17. What is your marital status? Single Married Separated Divorced Widowed

18. How many times have you been married (including your current marriage, if applicable)?

NOTE: If you are not currently married, skip to **Item Number 29.**

[New]

Place of Issuance

B. 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

Date of Naturalization (mm/dd/yyyy)

Place of Naturalization

17. Have you **EVER** renounced or lost U.S. citizenship or has anyone you obtained citizenship through (such as your parent or grandparent) **EVER** lost U.S. citizenship? Yes/No

NOTE: If you answered "Yes" to **Item Number 17.,** provide a detailed explanation in the space provided in **Part 13. Additional Information.**

[moved down]

[Delete]

Your Duty of Disclosure

You 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 answer "Yes" to any of the questions, 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 under penalty of perjury under U.S. law. The

written statement must show the date of each incident; place each incident occurred (city/town, state/province, country); name of police department or other law enforcement administration or other entity involved; and date of incarceration and name of facility, if applicable. Provide a description of any type of counseling, rehabilitation, or other information that you would like considered in light of this history.

- **18.** 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 criminal history was expunged, sealed, pardoned, or the subject of any other amelioration. Do not include parking or traffic violations, except for violations for driving or operating a vehicle while intoxicated, or while impaired by, or under the influence of, alcohol or another intoxicant.) Yes No
- **B.** Received a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action? Yes No

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- **C.** Received a suspended sentence, been placed on probation or parole, or been 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 even if closed or unsubstantiated, 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

Information About Your Marital Status

19. What is your marital status? Single Married Separated Divorced

Widowed

20. How many times have you been married (including your current marriage, if applicable)?

[Moved to Part 2]

Information About Your Current Marriage

- **19.** Date of Current Marriage (mm/dd/yyyy)
- 20. Place Where Current Marriage Occurred
- **21.** Name of Your Current Spouse Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
- **22.** Other Names Your Current Spouse Has Used (if any)

Provide all other names your spouse has 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**.

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

23. Information About Your Current Spouse

Spouse's Date of Birth (mm/dd/yyyy) Spouse's A-Number (if any) Spouse's USCIS Online Account Number (if any) Spouse's City/Town/Village of Birth Spouse's State or Province of Birth Spouse's Country of Birth

Is your spouse a U.S. citizen? Yes/No

If you answered "Yes," how did your spouse obtain U.S. citizenship?
Birth
Naturalization
Parents

If you answered "No," provide your spouse's current U.S. immigration status:

24. How many times has your current spouse been married (including your current marriage, if applicable)?

Your Spouse's Contact Information

25. Does your current spouse reside with you? Yes/No

If you answered "No", provide your current spouse's physical address in **Item Number 26.**

26. Your Current Spouse's Physical Address (if applicable)
Street Number and Name

	Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country 27. Your Spouse's Daytime Telephone Number 28. Your Spouse's Mobile Telephone Number (if any) 29. Your Spouse's Email Address (if any) Additional Household Members Information About Prior Filings or Adoptions	[Moved to Part 3] [Moved to Part 4]
New	Information About Your Current Marriage	Part 2. Information About Your Current Spouse
		NOTE: If you are not currently married, skip to Part 3.
	19. Date of Current Marriage (mm/dd/yyyy)	Date of Current Marriage (mm/dd/yyyy)
	20. Place Where Current Marriage Occurred	2. Place Where Current Marriage Occurred
	21. Name of Your Current Spouse Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)	3. Name of Your Current Spouse Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	22. Other Names Your Current Spouse Has Used (if any)	4. Other Names Your Current Spouse Has Used
	Provide all other names your spouse has 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 .	Provide all other names your spouse has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 13 . Additional Information .
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	23. Information About Your Current Spouse	[deleted]
	Spouse's Date of Birth (mm/dd/yyyy) Spouse's A-Number (if any) Spouse's USCIS Online Account Number (if any) Spouse's City/Town/Village of Birth Spouse's State or Province of Birth Spouse's Country of Birth	Spouse's Date of Birth (mm/dd/yyyy) Spouse's A-Number (if any) Spouse's USCIS Online Account Number (if any) Spouse's City/Town/Village of Birth Spouse's State or Province of Birth Spouse's Country of Birth
	Is your spouse a U.S. citizen? Yes/No	Is your spouse a U.S. citizen? Yes/No
	If you answered "Yes," how did your spouse	If you answered "Yes," how did your spouse obtain U.S. citizenship?

obtain U.S. citizenship?

Birth

Naturalization

Parents

If you answered "No," provide your spouse's current U.S. immigration status:

24. How many times has your current spouse been married (including your current marriage, if applicable)?

Your Spouse's Contact Information

25. Does your current spouse reside with you? Yes/No

If you answered "No", provide your current spouse's physical address in **Item Number 26.**

26. Your Current Spouse's Physical Address (if applicable)

Street Number and Name

Apt. Ste. Flr.

Number

City or Town

State

ZIP Code

Province

Postal Code

Country

- 27. Your Spouse's Daytime Telephone Number28. Your Spouse's Mobile Telephone Number (if
- **29.** Your Spouse's Email Address (if any)

Birth

Naturalization

Parents

If you answered "No," provide your spouse's current U.S. immigration status:

5. How many times has your current spouse been married (including your current marriage)?

[Page 5]

Your Spouse's Contact Information

6. Does your current spouse reside with you? Yes/No

If you answered "No," provide your current spouse's physical address in **Item Number 7**.

7. Your Current Spouse's Physical Address (if applicable)

Street Number and Name

Apt. Ste. Flr.

Number

City or Town

State

ZIP Code

Province

Postal Code

Country

- **8.** Your Spouse's Daytime Telephone Number **9.** Your Spouse's Mobile Telephone Number (if any)
- **10.** Your Spouse's Email Address (if any)

Your Spouse's Duty of Disclosure

Your spouse must answer the following questions. See the **Duty of Disclosure** section in the Form I-600 Instructions concerning your spouse's ongoing duty to disclose information in response to these questions. If your spouse answers "Yes" to any of these questions, 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 your spouse under penalty of perjury under U.S. law. The written statement must show the date of each incident; place each incident occurred (city/town, state/province, country); name of police department or other law enforcement administration or other entity involved; and date of incarceration and name of facility, if applicable. Provide a description of any type of

		counseling, rehabilitation, or other information that your spouse would like considered in light of this history.
		11. 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 violating any law or ordinance? (Answer "Yes," even if the record of the arrest, conviction, or other criminal history was expunged, sealed, pardoned, or the subject of any other amelioration. Do not include parking or traffic violations, except for violations for driving or operating a vehicle while intoxicated, or while impaired by, or under the influence of, alcohol or another intoxicant.) Yes No
		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 sentencing or rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication, or expungement of a criminal charge? Yes No
		D. Yes No
Page 6, Part 2. Information About the Orphan Beneficiary	Part 2. Information About Orphan Beneficiary	[Moved to Part 5]
Page 10, Part 3. Information About Your Home Study and Primary Adoption Service Provider	Part 3. Information About Your Home Study and Primary Adoption Service Provider	[Moved to Part 6]
Page 4, Part 1.	[Content moved from Part 1]	[Page 6]
Information About You (Petitioner)	Additional Household Members	Part 3. Information About Additional Household Members
	30. How many persons 18 years of age or older (other than your spouse, if married) reside with you?	1. How many persons 18 years of age or older (other than your spouse, if married), reside with you?
	If you answered "1" or more, you MUST complete Form I-600A/I-600 Supplement 1, Listing of Adult Member of the Household, for each person.	If you answered one or more, you MUST complete Form I-600A/I-600 Supplement 1, Listing of Adult Member of the Household, for each person.
	31. List all of your children who are under 18 years of age. Also include any other children under 18 years of age who reside in your household, regardless of your relationship to those children. If you need extra space to	2. List all of your children who are under 18 years of age. Also include any other children under 18 years of age who reside in your household, regardless of your relationship to those children. If you need extra space to

	complete this table, use the space provided in Part 10. Additional Information. [Table 5 entries] Name (First/Middle/Last) Date of Birth (mm/dd/yyyy) Country of Birth A-Number (if any) Relationship to You	complete this table, use the space provided in Part 13. Additional Information. [No change]
Page 11, Part 4. Information About Fes, Expenses, and Other	Part 4. Information About Fes, Expenses, and Other Compensation	[Moved to Part 7]
Compensation Page 12, Part 5. Accommodations for Individuals With Disabilities and/or Impairments	Part 5. Accommodations for Individuals With Disabilities and/or Impairments	[Moved to Part 8]
Page 5, Part 1.	[Content moved from Part 1]	[Page 6]
Information About You (Petitioner)	Information About Prior Filings or Adoptions	Part 4. Information About Prior Filings or Adoptions
	If you need extra space to complete Item Numbers 32 37., use the space provided in Part 10. Additional Information.	If you need extra space to complete Item Numbers 1 6., use the space provided in Part 13. Additional Information.
	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	1. 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:	If you answered "Yes," provide the following information for EACH petition and/or application:
	Type of Petition/Application Filed: Form I-600A Form I-800A Form I-800 Form I-130 (for an adopted child)	[No change]
	Result: Approved Denied Withdrawn Revoked Other (please explain): [fillable field] Date (mm/dd/yyyy)	
	33. Have you previously completed a domestic	2. Have you previously completed a domestic

adoption of a child within the U.S.? Yes/No

If you answered "Yes," provide the following information for each completed domestic adoption of a child.

State And County Where Adoption Was Finalized

Date Adoption Was Finalized (mm/dd/yyyy)

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. Yes No

If you answered "Yes," provide a detailed description of the disruption.
[Fillable field]

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. [Fillable field]

36. Have you ever previously placed a child in the care of another person with the intent to transfer permanent custody of the child? Yes No

If you answered "Yes," provide a detailed description of the placement. [Fillable field]

37. 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. [Fillable field]

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adoption of a child within the U.S.? Yes No

If you answered "Yes," provide the following information for each completed domestic adoption.

State And County Where Adoption Was Finalized

Date Adoption Was Finalized (mm/dd/yyyy)

[Page 7]

3. 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. Yes No

If you answered "Yes," provide a detailed description of the disruption.
[Fillable field]

4. 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," please provide a detailed description of the dissolution. [Fillable field]

5. Have you ever previously placed a child in the care of another person with the intent to transfer permanent custody of the child? Yes No

If you answered "Yes," please provide a detailed description of the placement. [Fillable field]

6. Have you ever received a child with the intent to gain permanent custody but without involving child welfare or other state/local authorities or following a state/local process? Yes No

If you answered "Yes," please provide a detailed description of the custody transfer. [Fillable field]

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 Numbers 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.) Yes No
- **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 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 even if closed or unsubstantiated, 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

[Moved to Part 1]

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 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.) Yes No

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 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 even if closed or unsubstantiated, 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

[Moved to Part 2]

Page 6, Part 2. Information About the Orphan Beneficiary

[Page 6]

Part 2. Information About the Orphan Beneficiary

1. Name at Birth Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

- 2. Current Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
- 3. Other Names the Orphan Has Used

Provide all other names the orphan has ever used, including aliases and nicknames. If you need extra space to complete this section, use the space provided in **Part 10. Additional Information.**

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

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Part 5. Information About The Orphan Beneficiary

- 1. Name at Birth Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
- 2. Current Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
- **3.** Other Names the Child Has Used (if any)

Provide all other names the child has ever used, including aliases and nicknames. If you need extra space to complete this section, use the space provided in **Part 13**. **Additional Information**.

- 4. Gender Male/Female
- **5.** Date of Birth (mm/dd/yyyy)
- 6. City/Town/Village of Birth
- 7. State or Province of Birth
- 8. Country of Birth
- **9.** The beneficiary is an orphan because (Select only 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.
- **B.** He or she has a sole or surviving parent who is incapable of providing proper care and who has in writing irrevocably released the child for emigration and adoption.

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- **10.** If the orphan has a sole or surviving parent, answer the following:
- **A.** What happened to the other birth or previous parent? [Fillable field]
- **B.** Is the remaining parent capable of providing proper care for the orphan? Y/N
- **C.** Has the remaining parent irrevocably released the orphan for emigration and adoption, in writing? Y/N
- 11. Did you adopt the orphan abroad? Yes/No
- **12.** Did your spouse (if married) adopt the child abroad? Yes/No
- **13.** If you answered "Yes" to **Item Number 11. or Item Number 12.,** provide the following information:
- **A.** Did you or your spouse (if married) personally see and observe the child before or during the adoption proceedings (this does not include the visa interview and issuance)? Yes/No
- **B.** Date of Adoption (mm/dd/yyyy)
- **C.** Place of Adoption

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9. The child beneficiary is an orphan because (Select only one box):

- **10.** If the child has a sole or surviving parent, answer the following:
- **A.** What happened to the other birth or previous parent? [Fillable field]
- **B.** Is the remaining parent capable of providing proper care for the child? Yes/No
- **C.** Has the remaining parent irrevocably released the **child** for emigration and adoption, in writing? Yes/No
- 11. Did you adopt the child abroad? Yes/No
- **12.** Did your spouse (if married) adopt the child abroad? Yes/No
- **13.** If you answered "Yes" to **Item Number 11.** or **Item Number 12.,** provide the following information:
- **A.** Did you or your spouse (if married) personally see and observe the child before or during the adoption proceedings? (This does not include the visa interview and issuance.) Yes/No
- **B.** Date of Adoption (mm/dd/yyyy)
- **C.** Place of Adoption
- **14.** If you answered "No" to either **Item**

14. If you answered "No" to either **Item Number 11., Item Number 12.,** or **Item A.** in **Item Number 13.,** provide the following information:

NOTE: If you need extra space to complete **Items A. - D.,** use the space provided in **Part 10. Additional Information.**

- **A.** Do you and your spouse (if married) intend to adopt the orphan in the United States? Y/N
- **B.** Provide a written description of all the preadoption requirements of the state of the orphan's proposed residence and cite any relevant state statutes and regulations. If the state of the orphan's proposed residence does not have any pre-adoption requirements, indicate "not applicable." [Fillable field]

[Page 8]

C. Have any pre-adoption requirements of the orphan's proposed state of residence already been met? Yes/No

If you answered "Yes," provide which requirements have been met.
[Fillable field]

D. Will any pre-adoption requirements be met at a later time? Yes/No

If you answered "Yes," describe the steps you will take to comply with these requirements. [Fillable field]

If you answered "No," provide each pre-adoption requirement that will not be met and explain why.

[Fillable field]

- **15.** To your knowledge:
- **A.** Does the orphan have any special need, disability, and/or impairment? Yes/No
- **B.** If you answered "Yes," name or describe the special need, disability, and/or impairment. [Fillable field]
- **16.** The orphan's legal custodian is (select **only one** box):
- [] An individual or entity other than the orphan's birth parents. Name of the individual or entity: [Fillable field]

Number 11., Item Number 12., or **Item A.** in **Item Number 13.,** provide the following information:

NOTE: If you need extra space to complete **Items A. - D.,** use the space provided in **Part 13. Additional Information.**

- **A.** Do you and your spouse (if married) intend to adopt the child in the United States? Yes/No
- **B.** Provide a written description of all the preadoption requirements of the state of the child's proposed residence and cite any relevant state statutes and regulations. If the state of the child's proposed residence does not have any pre-adoption requirements, indicate "not applicable."

 [Fillable field]

C. Have any pre-adoption requirements of the child's proposed state of residence already been met? Yes/No

If you answered "Yes," provide which requirements have been met.
[Fillable field]

D. Will any pre-adoption requirements be met at a later time? Yes/No

[Page 9]

If you answered "Yes," describe the steps you will take to comply with these requirements. [Fillable field]

If you answered "No," provide each preadoption requirement that will not be met and explain why. [Fillable field]

- **15.** To your knowledge:
- **A.** Does the child have any special need, disability, and/or impairment? Yes/No
- **B.** If you answered "Yes," name or describe the special need, disability, and/or impairment. [Fillable field]
- **16.** The **child's** legal custodian is (select **only one** box):
- [] An individual or entity other than the child's birth parents. Name of the individual or entity: [Fillable field]
- [] Both of the child's living birth parents.
- [] One of the child's living birth parents. The

[] Both of the orphan's living birth parents. [] One of the orphan's living birth parents. The living birth parent is the (select only one box): Mother/Father

17. Information About the Attorney Abroad Representing You and/or Your Spouse (if married) in this Case (if any)

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Street Number and Name

Apt. Ste. Flr. Number City or Town State

ZIP Code Province Postal Code

Country

[Page 9]

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 Postal Code Country

19. Current Address of the Orphan

In Care Of Name

Street Number and Name

Apt. Ste. Flr. Number City or Town State

State
ZIP Code
Province
Postal Code
Country

- **20.** If the orphan resides in an institution, provide the full name of the institution.
- **21.** If the orphan does not reside in an institution, provide the full name of the person with whom the orphan is residing or the name of the orphan's caretaker.

Family Name (Last Name)

living birth parent is the (select one): Mother/Father

[No change]

18. Address Where the Child 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

Postal Code

Country

[Page 10]

19. Current Address of the Child

In Care Of Name

Street Number and Name

Apt. Ste. Flr.

Number

City or Town

State

ZIP Code

Province

Postal Code

Country

- **20.** If the child resides in an institution, provide the full name of the institution.
- **21.** If the child does not reside in an institution, provide the full name of the person with whom the child is residing or the name of the child's caretaker.

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

	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.)	state authority has indicated that it will submit the home study directly to USCIS. (Do not submit your Form I-600 to USCIS until the state authority is ready to send your home study to USCIS.)
	D. IS NOT attached to this Form I-600 because of state requirements necessitating review and documentation. The appropriate state authority	E. IS NOT attached to this Form I-600 because of state requirements necessitating review and documentation. The appropriate
		D. IS attached to this Form I-600.
	C. IS attached to this Form I-600.	C. Was previously submitted with a Form I-600A/I-600, Supplement 3 (please attach a copy of your Form I-600A/I-600, Supplement 3 fee receipt notice).
	B. Was previously submitted with your pending Form I-600A application (please attach a copy of your Form I-600A fee receipt notice).	B. Was previously submitted with your pending Form I-600A application (please attach a copy of your Form I-600A fee receipt notice).
	A. Was previously submitted with your approved Form I-600A application (please attach a copy of your Form I-600A approval notice).	A. Was previously submitted with your approved and valid Form I-600A application (please attach a copy of your Form I-600A approval notice).
Service Frovider	1. Your home study:	1. Your home study:
Information About Your Home Study and Primary Adoption Service Provider	Part 3. Information About Your Home Study and Primary Adoption Service Provider	Part 6. Information About Your Home Study and Primary Adoption Service Provider
Page 10, Part 3.	[Page 10]	[Page 10]
	The U.S. Embassy or U.S. Consulate located at: [Fillable field]	[I madic neta]
	24. Where do you wish to file your visa application (if applicable)?	The U.S. Embassy or U.S. Consulate located at: [Fillable field]
	B. Seek a non-immigrant visa for the child to travel to the United States temporarily for the purpose of naturalization, because you will continue to reside abroad with the child immediately following the adoption? Y/N	24. Where do you wish to file your visa application (if applicable)?
	A. Seek an immigrant visa because the child will reside with you in the United States? Y/N	
	23. After you obtain an adoption or legal custody of the orphan, do you intend to:	[No change]
	orphan resides: [Fillable field]	23. After you obtain an adoption or legal custody of the child, do you intend to:
	22. Provide any additional information necessary to locate the orphan, such as the name of a district, section, zone, or locality in which the	of a district, section, zone, or locality in which the child resides: [Fillable field]
	Given Name (First Name) Middle Name (if applicable)	22. Provide any additional information necessary to locate the child, such as the name

Information About Your Primary Adoption Service Provider

NOTE: A primary adoption service provider is the accredited agency or approved person who is responsible under 22 CFR 96 for ensuring all six adoption services defined in 22 CFR 96.2 are provided according to the law, for supervising and being responsible for supervised providers when used (see 22 CFR 96.14), and for developing and implementing a service plan in accordance with 22 CFR 96.44.

- **2.** Name of Primary Adoption Service Provider
- **3.** Point of Contact Within the Organization Family Name (Last Name) Given Name (First Name)
- **4.** Primary Adoption Service Provider's Mailing Address Street Number and Name

Sueet Nullivel allu Nali Ant Cta Ela

Apt. Ste. Flr.

Number

City or Town

State

ZIP Code

- **5.** Primary Adoption Service Provider's Daytime Telephone Number
- **6.** Primary Adoption Service Provider's Fax Number (if any)
- **7.** Primary Adoption Service Provider's Email Address (if any)
- **8.** The primary adoption service provider named above is one of the following:
- **A.** An accredited agency in the United States. Yes/No
- **B.** An approved person in the United States. Yes/No

[Page 11]

Information About Your Primary Adoption Service Provider

A primary adoption service provider is the accredited agency or approved person who is responsible under 22 CFR 96 for ensuring all six adoption services defined in 22 CFR 96.2 are provided according to the law, for supervising and being responsible for supervised providers when used (see 22 CFR 96.14), and for developing and implementing a service plan in accordance with 22 CFR 96.44.

[No change]

Page 11, Part 4. Information About Fees, Expenses, and Other Compensation

[Page 11]

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

[Page 12]

Part 7. 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 13. 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

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.

[Table 4 entries]

Date (mm/dd/yyyy)

Payee

Relationship to Child (if any)

Purpose of Payment

Amount of Payment (or description and value of in kind consideration)

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.

[Table 4 entries]

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)

[Page 12]

3. 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? Yes/No

If you answered "Yes," provide a detailed description to explain. [Fillable Field]

[Page 12]

Part 5. Accommodations for Individuals With Disabilities and/or Impairments

NOTE: Read the information in the Form I-600 Instructions before completing this section.

1. Are you requesting an accommodation because of your disabilities and/or impairments?

to the adoption of the child identified in this Form I-600. The information you provide in this table must include all fees, expenses, inkind contributions, and other compensation that you and your spouse (if married) or anyone on behalf of you or your spouse (if married) 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.

[Table 4 entries]

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)

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 or your spouse (if married) reasonably expect to pay or make, either directly or indirectly, to any individual, agency, entity, governmental authority, or other payee or recipient.

[No change]

[Page 13]

3. Have you or your spouse (if married) or anyone on behalf of you or your spouse (if married) given or arranged to give money or other consideration either directly or indirectly to the child's parent(s), agent(s), other individual(s), or entity to induce or encourage the release of the child? Yes/No

If you answered "Yes," provide a detailed description to explain. [Fillable Field]

[Page 13]

Part 8. Accommodations for Individuals With Disabilities and/or Impairments

[No change]

Page 12, Part 5. Accommodations for Individuals With Disabilities and/or Impairments

	Yes/No	
	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	2. If you answered "Yes," select all applicable boxes below to indicate who has the disabilities and/or impairments. Petitioner Spouse Adult Member of the Household
	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 signlanguage interpreter, indicate for which language (for example, American Sign Language).): [Fillable field]	
	B. Blind or have low vision and request the following accommodation: [Fillable field]	
	C. Another type of disability and/or impairment. (Describe the nature of the disability and/or impairment and the requested accommodation.): [Fillable field]	
Page 12, Part 6.	[Page 12]	[Page 13]
Petitioner's Statement, Certification, Duty of Disclosure, and	Part 6. Petitioner's Statement, Certification, Duty of Disclosure, and Signature	Part 9. Petitioner's Statement, Certification, Duty of Disclosure, and Signature
Signature	NOTE: Read the Penalties section of the Form I-600 Instructions before completing this section.	[No change]
	Petitioner's Statement	
	Petitioner's Statement Regarding the Interpreter (Select the box for either Item A. or B.)	 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 petition and my answer to every question.	A. I can read and understand English, and I have read and understand every question and instruction on this petition and my answer to every question.
	read and understand every question and instruction on this petition and my answer to	have read and understand every question and instruction on this petition and my answer to
	read and understand every question and instruction on this petition and my 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 [Fillable field], a language in which I am fluent, and I	have read and understand every question and instruction on this petition and my answer to every question. B. The interpreter named in Part 11. read to me every question and instruction on this petition and my answer to every question in [Fillable field], a language in which I am fluent,

authorized.

[Page 13]

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.

Petitioner's Signature

3. Petitioner's Signature Date of Signature (mm/dd/yyyy)

[Page 14]

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 to adopt and whether the child I am petitioning for is an orphan and eligible to be classified as my immediate relative.

[No change]

I certify, under penalty of perjury under the laws of the United States, 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 to adopt, 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.

	T	
	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.	
Page 13, Part 7. Your	[Page 13]	[Page 14]
Spouse's Statement, Certification, Duty of Disclosure, and Signature	Part 7. Your Spouse's Statement, Certification, Duty of Disclosure, and Signature	Part 10. Your Spouse's Statement, Certification, Duty of Disclosure, and Signature
	NOTE: Read the Penalties section of the Form I-600 Instructions before completing this section.	NOTE: Read the Penalties section of the Form I-600 Instructions before completing this section.
	Your Spouse's Statement	Your Spouse's Statement
	1. Spouse's Statement Regarding the Interpreter (Select the box for either Item A. or B.)	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 this petition and my answer to every question.	A. I can read and understand English, and have read and understand every question and instruction on this petition and my 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 [Fillable field], a language in which I am fluent, and I understood everything.	B. The interpreter named in Part 11. read to me every question and instruction on this petition and my answer to every question in [Fillable field], a language in which I am fluent, and I understood everything.
	2. Spouse's Statement Regarding the Preparer (if applicable)	2. Spouse's Statement Regarding the Preparer (if applicable)
	At my request, the preparer named in Part 9. , [Fillable field], prepared this petition for me based only upon information I provided or authorized.	At my request, the preparer named in Part 12. , prepared this petition for me based only upon information I provided or authorized.
	[Page 14]	[Page 15]
	Your Spouse's Certification	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.	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 to adopt and whether the child my spouse is petitioning for is an orphan and 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.	[No change]

	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.	I certify, under penalty of perjury under the laws of the United States, 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	Your Spouse'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 the home study preparer and USCIS of any new information that I am required to disclose.	I understand the ongoing duty to disclose information concerning my suitability and eligibility to adopt, 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.
	Your Spouse's Signature	Your Spouse's Signature
	3. Your Spouse's Signature Date of Signature (mm/dd/yyyy)	3. Your Spouse's Signature Date of Signature (mm/dd/yyyy)
Page 14, Part 8.	[Page 14]	[Page 15]
Interpreter's Contact Information, Certification, and	Part 8. Interpreter's Contact Information, Certification, and Signature	Part 11. Interpreter's Contact Information, Certification, and Signature
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.	[No change]
	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)	
	[Page 15]	
	Interpreter's Mailing Address	

3. Street Number and Name

Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country

Interpreter's Contact Information

- **4.** Interpreter's Daytime Telephone Number
- **5.** Interpreter's Mobile Telephone Number (if any)
- **6.** Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and [Fillable field], which is the same language specified in **Parts 6. and 7., Item B** in **Item Number 1.,** and I have read to this petitioner and/or the petitioner's spouse in the identified language every question and instruction on this petition and their answer to every question. The petitioner and/or the petitioner's spouse informed me that he or she understands every instruction, question, and answer on the petition, including the **Petitioner's Certification** and the **Your Spouse's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature Date of Signature (mm/dd/yyyy)

Page 15, Part 9.
Contact Information,
Declaration, and
Signature of the Person
Preparing this Petition,
If Other Than the
Petitioner and Spouse

[Page 15]

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

If you and/or your spouse (if married) used a preparer to complete this petition, provide the following information about the preparer.

Preparer's Full Name

- **1.** Preparer's Family Name (Last Name) Preparer's Given Name (First Name)
- 2. Preparer's Business or Organization Name (if

[Page 16]

Interpreter's Certification

I certify, under penalty of perjury under the laws of the United States, that:

I am fluent in English and [Fillable field], which is the same language specified in **Parts 9. and 10.**, **Item B.** in **Item Number 1.**, and I have read to this petitioner and/or the petitioner's spouse in the identified language every question and instruction on this petition and his or her answer to every question. The petitioner and/or the petitioner's spouse informed me that he or she understands every instruction, question, and answer on the petition, including the **Petitioner's Certification** and the **Your Spouse's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature Date of Signature (mm/dd/yyyy)

[Page 16]

Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Petition, If Other Than the Petitioner and Spouse

any)

[Page 16]

Preparer's Mailing Address

3. Street Number and Name Apt. Ste. Flr. 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)

Preparer's Statement

- **7. A.** I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and/or the petitioner's spouse (if married) with the petitioner's and/or the petitioner's spouse's consent.
- **B.** I am an attorney or accredited representative and my representation of the petitioner and/or the petitioner's spouse (if married) in this case extends/does not extend beyond the preparation of this petition.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this petition at the request of the petitioner and/or the petitioner's spouse (if married). The petitioner and the petitioner's spouse (if married) then reviewed this completed petition and informed me that he or she understands all of the information contained in, and submitted with, his or her petition, including the **Petitioner's Certification** and the **Your Spouse's Certification**, and that all of this information is complete, true, and correct. I completed this petition based only on information that the petitioner provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature

[Page 17]

Preparer's Statement

- **7. A.** I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and/or the petitioner's spouse with the petitioner's and/or the petitioner's spouse's consent.
- **B.** I am an attorney or accredited representative and my representation of the petitioner and/or the petitioner's spouse in this case extends/does not extend beyond the preparation of this petition.

Preparer's Certification

By my signature, I certify, under penalty of perjury under the laws of the United States, that I prepared this petition at the request of the petitioner and/or the petitioner's spouse. The petitioner and/or the petitioner's spouse then reviewed this completed petition and informed me that he or she understands all of the information contained in, and submitted with, his or her petition, including the Petitioner's Certification and the Your Spouse's Certification, and that all of this information is complete, true, and correct. I completed this petitioner and/or the petitioner's spouse provided to me or authorized me to obtain or use.

Preparer's Signature

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

	Date of Signature (mm/dd/yyyy)	
Page 17, Part 10.	[Page 17]	[Page 18]
Additional Information		
	Part 10. Additional Information	Part 13. Additional Information
		INTo all according
	If you need extra space to provide any additional	[No change]
	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. Family Name (Last Name) [Auto-populated	
	field]	
	Given Name (First Name) [Auto-populated field]	
	Middle Name [Auto-populated field]	
	2. A-Number (if any) [Auto-populated field]	
	3. A. Page Number	
	B. Part Number	
	C. Item Number	
	D. [Fillable field]	
	4. A. Page Number	
	B. Part Number	
	C. Item Number D. [Fillable field]	
	D. [1 maule melu]	
	5. A. Page Number	
	B. Part Number	
	C. Item Number	
	D. [Fillable field]	
	6. A. Page Number	
	B. Part Number	
	C. Item Number D. [Fillable field]	
	D. [1 maule melu]	