**TABLE OF CHANGES – FORM**

**Form** **I-690, Application for Waiver of Grounds of Inadmissibility Under Sections 245A or 210 of the Immigration and Nationality Act**

**OMB Number: 1615-0032**

**07/27/2020**

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| **Reason for Revision: Fee Rule**  **Project Phase:**  Legend for Proposed Text:   * Black font = Current text * Red font = Changes   Expires 7/31/2021  Edition Date 7/23/2020 |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1,**  **To be completed by an Attorney or Accredited Representative (if any).** | **[Page 1]**  **To be completed by an Attorney or Accredited Representative** (if any)**.**  **Select this box if Form G-28 or G-28I is attached.**  **Attorney State Bar Number** (if applicable)  **Attorney or Accredited Representative USCIS Online Account Number** (if any) | **[Page 1]**  **To be completed by an Attorney or Accredited Representative.**  **Select this box if Form G-28 or G-28I is attached.**  **Attorney State Bar Number**  **Attorney or Accredited Representative USCIS Online Account Number** |
| **Pages 1-2,**  **Part 1. Information About You (Applicant)** | **[Page 1]**  ***Your Current Legal Name***  **1.** Family Name (Last Name)  Given Name (First Name)  Middle Name (if applicable)  ***Mailing Address***  **2.** In Care Of Name (if any)  Street Number and Name  Apt./Ste./Flr. Number  City or Town  State  ZIP Code  Province  Postal Code  Country  **…**  **[Page 1]**  **8.** Alien Registration Number (A-Number) (if any)  **9.** USCIS Online Account Number (if any)  **10.** U.S. Social Security Number (if any) | **[Page 1]**  ***Your Current Legal Name***  **1.** Family Name (Last Name)  Given Name (First Name)  Middle Name  ***Mailing Address***  **2.** In Care Of Name  Street Number and Name  Apt./Ste./Flr. Number  City or Town  State  ZIP Code  Province  Postal Code  Country  **…**  **[Page 1]**  **8.** Alien Registration Number (A-Number)  **9.** USCIS Online Account Number  **10.** U.S. Social Security Number |
| **Pages 2-4,**  **Part 2. Additional Information About You** | **[Page 3]**  **…**  **A.** Relative 1  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  Date of Birth (mm/dd/yyyy)  Relationship  A-Number (if any)  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient) [Fillable Field]  **B.** Relative 2  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  Date of Birth (mm/dd/yyyy)  Relationship  A-Number (if any)  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient) [Fillable Field]  **C.** Relative 3  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  Date of Birth (mm/dd/yyyy)  Relationship  A-Number (if any)  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient)  **[Page 4]**  **D.** Relative 4  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  Date of Birth (mm/dd/yyyy)  Relationship  A-Number (if any)  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient) [Fillable Field]  **…** | **[Page 3]**  **…**  **A.** Relative 1  Family Name (Last Name)  Given Name (First Name)  Middle Name  Street Number and Name  Apt./Ste./Flr. Number  City or Town  State  ZIP Code  Date of Birth (mm/dd/yyyy)  Relationship  A-Number  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient) [Fillable Field]  **B.** Relative 2  Family Name (Last Name)  Given Name (First Name)  Middle Name  Street Number and Name  Apt./Ste./Flr. Number  City or Town  State  ZIP Code  Date of Birth (mm/dd/yyyy)  Relationship  A-Number  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient) [Fillable Field]  **C.** Relative 3  Family Name (Last Name)  Given Name (First Name)  Middle Name  Street Number and Name  Apt./Ste./Flr. Number  City or Town  State  ZIP Code  Date of Birth (mm/dd/yyyy)  Relationship  A-Number  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient)  **[Page 4]**  **D.** Relative 4  Family Name (Last Name)  Given Name (First Name)  Middle Name  Street Number and Name  Apt. Ste. Flr. Number  City or Town  State  ZIP Code  Date of Birth (mm/dd/yyyy)  Relationship  A-Number  Immigration Status (for example, U.S. citizen, lawful permanent resident, valid nonimmigrant status, deferred action recipient) [Fillable Field]  **…** |
| **Page 8,**  **Part 6. Additional Information** | **[Page 8]**  **Part 6. Additional Information**  If you need extra space to provide any additional information within this application, 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 application or attach a separate sheet of paper. Type or print your 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.  **…**  **2.** A-Number (if any)  **…** | **[Page 8]**  **Part 6. Additional Information**  If you need extra space to provide any additional information within this application, 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 application or attach a separate sheet of paper. Type or print your name and A-Number 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.  **…**  **2.** A-Number  **…** |