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

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

Current Page Number and Section	Current Text	Proposed Text
Page 1,	[Page 1]	[Page 1]
To be completed by an Attorney or Accredited Representative (if any).	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)	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,	[Page 1]	[Page 1]
Part 1. Information About You (Applicant)	 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) 	 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
	9. USCIS Online Account Number (if any)10. U.S. Social Security Number (if any)	9. USCIS Online Account Number10. U.S. Social Security Number

Pages 2-4,	[Page 3]	[Page 3]
Part 2. Additional		
Information About You		
mormation About 100		
	A. Relative 1	A. Relative 1
	Family Name (Last Name)	Family Name (Last Name)
	Given Name (First Name)	Given Name (First Name)
	Middle Name (if applicable)	Middle Name
	Street Number and Name	Street Number and Name
	Apt./Ste./Flr. Number	Apt./Ste./Flr. Number City or Town
	City or Town State	State
	ZIP Code	ZIP Code
	Date of Birth (mm/dd/yyyy)	Date of Birth (mm/dd/yyyy)
	Relationship	Relationship
	A-Number (if any)	A-Number
	Immigration Status (for example, U.S. citizen,	Immigration Status (for example, U.S. citizen)
	lawful permanent resident, valid nonimmigrant	lawful permanent resident, valid nonimmigrar
	status, deferred action recipient) [Fillable Field]	status, deferred action recipient) [Fillable Fiel
	status, deferred defor recipient, [rindole ricita]	status, derened denon recipienty (r muore r rei
	B. Relative 2	B. Relative 2
	Family Name (Last Name)	Family Name (Last Name)
	Given Name (First Name)	Given Name (First Name)
	Middle Name (if applicable)	Middle Name
	Street Number and Name	Street Number and Name
	Apt./Ste./Flr. Number	Apt./Ste./Flr. Number
	City or Town	City or Town
	State	State
	ZIP Code	ZIP Code
	Date of Birth (mm/dd/yyyy)	Date of Birth (mm/dd/yyyy)
	Relationship	Relationship
	A-Number (if any)	A-Number
	Immigration Status (for example, U.S. citizen,	Immigration Status (for example, U.S. citizen,
	lawful permanent resident, valid nonimmigrant	lawful permanent resident, valid nonimmigrar
	status, deferred action recipient) [Fillable Field]	status, deferred action recipient) [Fillable Field
	C. Relative 3	C. Relative 3
	Family Name (Last Name)	Family Name (Last Name)
	Given Name (First Name)	Given Name (First Name)
	Middle Name (if applicable)	Middle Name
	Street Number and Name	Street Number and Name
	Apt./Ste./Flr. Number	Apt./Ste./Flr. Number
	City or Town	City or Town
	State	State
	ZIP Code	ZIP Code
	Date of Birth (mm/dd/yyyy)	Date of Birth (mm/dd/yyyy)
	Relationship	Relationship
	A-Number (if any)	A-Number
	Immigration Status (for example, U.S. citizen,	Immigration Status (for example, U.S. citizen
	lawful permanent resident, valid nonimmigrant	lawful permanent resident, valid nonimmigrar
	status, deferred action recipient)	status, deferred action recipient)
	[Page 4]	[Page 4]
	D. Relative 4	D. Relative 4
	Family Name (Last Name)	Family Name (Last Name)
	Given Name (First Name)	Given Name (First Name)
	Middle Name (if applicable)	Middle Name
	Street Number and Name	Street Number and Name
	Apt. Ste. Flr. Number	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]	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	[Page 8]	[Page 8]
Information	Part 6. Additional Information	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)	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