

Application for Advance Processing of an Orphan Petition

Department of Homeland Security U.S. Citizenship and Immigration Services USCIS Form I-600A OMB No. 1615-0028 Expires 12/31/2021

For USCIS Use Only				
The applicant is:	Action Block	Receipt/Fee Stamp		
□ Married □ Unmarried				
The applicant is approved to adopt an orphan from (if specified): (Name of non-Hague Convention Country)	DRAF	Γ		
Approval Valid Until (mm/dd/yyyy):		Remarks		
Final Adjudicating Office:	Not fo			
To be Completed by an Attorney or AccreditedSelect this Form G-2 is attachedRepresentative (if any)	8 or G-28I (if applicable)	Attorney or Accredited Representative USCIS Online Account Number (if any)		

► START HERE - Type or print in black ink. This application is used to determine whether you (and your spouse, if married) are suitable and eligible to adopt a child from a non-Hague Convention country, who has been or will be adopted and who qualifies as an orphan under U.S. immigration law.

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

Part 1. Information About You (Applicant)

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 9. 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 (if any)		
	Street Number and Name	Apt. Ste. Flr.	Number
	City or Town	State	ZIP Code

(USPS ZIP Code Lookup)

Pa	art 1. Information About You (Applicant) (conti	nued)		
4.	Is your current U.S. mailing address the same as your U.S.	physical address?		Yes No
	If you answered "No," provide your U.S. physical address appropriate.	in Item Number 5. or y	our address abro	oad 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 (USPS ZIP Code Lookup)
		AP		
6.	Address Abroad (if any)			
	Street Number and Name		Apt. Ste. Flr.	Number
	City or Town		State	
	Province Postal Code	Country		
7.	Daytime Telephone Number	8. Mobile Telep	phone Number (if any)
9.	Email Address (if any)			
_		-		
	formation About Your U.S. Citizenship			
10.	. USCIS Online Account Number (if any)	11. Date of Birth	n (mm/dd/yyyy)	_
12.	City/Town/Village of Birth	13. State or Prov	ince of Birth	
14.	Country of Birth	_		
15.	How did you obtain your U.S. citizenship?	Parents Nat	uralization	
	A. If you obtained your citizenship through your parents, your own name?	have you obtained a Cer	tificate of Citize	enship in Yes No
	If you answered "Yes," provide the following informat	tion about your Certifica	te of Citizenshi	p:
	Your Name On the Certificate of Citizenship			
	Family Name (Last Name)	Given Name (First Nam	ne)	Middle Name (if applicable)
			*	
	Alien Registration Number (A-Number) (if any) Certifi	cate of Citizenship Num	ber	
	► A-			
	Date of Issuance (mm/dd/yyyy) Place of Issuance			

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Part 1. Information About You (Applicant) (continued)

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) Certificat	te of Naturalization Number	
	► A-		
	Date of Naturalization (mm/dd/yyyy) Place of I	Naturalization	
16.	Have you EVER renounced or lost U.S. citizenship or h (such as your parent or grandparent) EVER lost U.S. ci		hrough Yes No
	NOTE: If you answered "Yes," provide a detailed exp	lanation in the space provided in Part	9. Additional Information.
Yo	our Biographic Information		
	OTE: If you previously filed Form I-600A and provided graphic information about you, the petitioner.	biographic information, skip to Item	Number 23. Otherwise, provide
17.	Ethnicity (Select only one box)		
	Hispanic or Latino Not Hispanic or Latino		
18.	Race (Select all applicable boxes)		
	American Indian or Asian Black or Alaska Native	African American Native Hav Pacific Isla	waiian or Other 🗌 White ander
19.	Height Feet Inches 20. Weig	ght Pounds	
21.	Eye color (Select only one box)		
	Black Blue Brown Gray C	Green Hazel Maroon	Pink Unknown/Other
22.	Hair color (Select only one box)		
	Bald (No hair) Black Blond Br	own Gray Red Sa	ndy White
	Unknown/Other		
Inf	formation About Your Marriage(s)		
23.	What is your marital status? Single Marrie	ed Separated Divorced	Widowed
24.	How many times have you been married (including you	r current marriage, if applicable)?	
NO	OTE: If you are not currently married, skip to Item Num	ber <mark>36.</mark>	
Inf	formation About Your Current Marriage		
25.	Date of Current Marriage (mm/dd/yyyy) 26. Pla	ce Where Current Marriage Occurred	
27.	Name of Your Current Spouse		
	Family Name (Last Name) Given N	Name (First Name)	Middle Name (if applicable)

Part 1. Information About You (Applicant) (continued)

28. 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 9. Additional Information**.

	Family Name (Last Name)	Given Name (Fin	rst Nam	e)	N	Middle	Name (if	applicab	le)
29.	Information About Your Current Spouse								
	Spouse's Date of Birth (mm/dd/yyyy) Spou	se's A-Number (if ar	ny)	S _I	oouse's USC	IS Onl	ine Accou	unt Numb	er (if any)
	Spouse's City/Town/Village of Birth		Spous	e's State or	Province of	Birth			
	Spouse's Country of Birth	Inf			r				
	Is your spouse a U.S. citizen?							Yes	No
	If you answered "Yes," how did your spous	e obtain citizenship?		Birth] Naturaliza	ation	Pare	nts	
	If you answered "No," provide your spouse	s current U.S. immig	gration s	status:					
	Dro								
30.	How many times has your current spouse be	en married (includin	g your	current mai	rriage, if app	licable)?		
Yo	ur Spouse's Contact Information								,
31.	Does your current spouse reside with you?							Yes	No No
	If you answered "No," provide your current	spouse's physical ad	dress in	Item Nun	1ber <mark>32.</mark>				
32.	Your Current Spouse's Physical Address (if	applicable)					NT		
	Street Number and Name				Apt. Ste	\square	Number		
	City or Town				L L		ZIP Code		
	Province	Postal Code		Country					
33.	Your Spouse's Daytime Telephone Number		34. Y	our Spouse	e's Mobile To	elepho	ne Numbe	er (If any))
35.	Your Spouse's Email Address (if any)		L						

Part 1. Information About You (Applicant) (continued)

Additional Household Members

36. 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.

37. 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 9. Additional Information**.

Name (First/Middle/Last)	Date of Birth (mm/dd/yyyy)		A-Number (if any)	Relationship to You
		4 C		

Information About Prior Filings or Adoptions

If you need extra space to complete Item Numbers 38. - 43., use the space provided in Part 9. Additional Information.

38.	Have you ever previously filed Form I-600A, Form I-600, Petition to Classify Orphan as an Immediate Yes No Relative, Form I-800A, Application for Determination of Suitability to Adopt a Child From a Convention Country, or Form I-800, Petition to Classify Convention Adoptee as an Immediate Relative?
	If you answered "Yes," provide the following information for EACH petition and/or application:
	Type of Petition/Application Filed:
	Form I-600A Form I-600 Form I-800A Form I-800 Form I-130 (for an adopted child)
	Result: Approved Denied Withdrawn Revoked
	Other (please explain):
	Date (mm/dd/yyyy)
39.	Have you previously completed a domestic adoption of a child within the U.S.?
	If you answered "Yes," provide the following information for each completed domestic adoption of a child.
	State And Country Where Adoption Was Finalized Date Adoption Was Finalized (mm/dd/yyyy)

Pa	art 1. Information About You (Applicant) (continued)	
	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.	
41	Have you ever previously completed an adoption, either in the United States or abroad, that was later	
41.	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.	
42.	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.	
43.	Have you ever received a child with the intent to gain permanent custody but without involving child	Yes No
	welfare or other state/local authorities or following a state/local process?	
	If you answered "Yes," provide a detailed description of the custody transfer.	
	A5/12/2020	
Dı	uty of Disclosure	
Inst any inci deta und nan app	a and your spouse (if married), must answer the following questions. See the Duty of Disclosure section in the F ructions concerning your ongoing duty to disclose information in response to these questions. If you or your spo of the questions in Item Numbers 44. and 45. , provide a certified copy of the documentation showing the final dent which resulted in arrest, indictment, conviction, and/or any other judicial or administrative action and a writ ails, including any mitigating circumstances about each arrest, signed by you and/or your spouse (if married) und er U.S. law. The written statement must show the date of each incident; place incident occurred (city/town, state ne of police department or other law enforcement administration or other entity involved; date of incarceration an licable. Provide a description of any type of counseling, rehabilitation, or other information that you and your sp ald like considered in light of this history in the space provided in Part 9. Additional Information .	use answer "Yes" to disposition of each ten statement giving er penalty of perjury /province, country); id name of facility, if

44. Have you EVER, whether in or outside the United States:

- **A.** Been investigated, arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance? (Answer "Yes" even if the record of the arrest, conviction, or other adverse criminal history was expunged, sealed, pardoned, or the subject of any other amelioration. Do not include traffic violations, except for violations for driving or operating a vehicle while intoxicated or while impaired by or under the influence of alcohol or other intoxicant.)
- B. Received a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action?
- **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

Yes	No No
Yes	🗌 No

Pa	rt 1	. Information About You (Applicant) (continued)				
	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			
45.	Has	s your spouse EVER, whether in or outside the United States:				
	А.	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			
D	4.0		D 11			
Pa		2. Information About Your Home Study Preparer and/or Primary Adoption Servic	e Provider			
1.	Υοι	ar home study:				
	А. В.					
In	forn	nation About Your Home Study Preparer				
2.	Info	ormation About Who Prepared or Will Prepare Your Home Study				
	A.	A. Name of Home Study Preparer				
	B.	Point of Contact Within the Organization (if applicable)				
		Family Name (Last Name) Given Name (First Name)				
	C.	Home Study Preparer's Mailing Address and Contact Information				
		Street Number and Name Apt. Ste. Flr. Number	ber			

City	or	Town

Province

E. Home Study Preparer's Fax Number (if any)

State

Country

ZIP Code

F. Home Study Preparer's Email Address (if any)

D. Home Study Preparer's Daytime Telephone Number

Postal Code

Part 2. Information About Your Home Study Preparer and/or Primary Adoption Service Provider (continued)

Information About Your Home Study Reviewer and Approver (if applicable)

If your home study was not performed by an accredited agency, an accredited agency must review and approve your home study before you submit it to USCIS. This requirement does not apply to a home study that was prepared by a public domestic authority or a public foreign authority.

- 3. Information About Who Reviewed And Approved (or will review and approve) Your Home Study (if applicable)
 - A. Name of Home Study Reviewer/Approver

Point of Contact Within the Organization (if applicable)			
Family Name (Last Name)	Given Name (First	t Name)	
. Reviewer's/Approver's Mailing Address and Contact Information			
Street Number and Name		Apt. Ste. Flr.	Number
City or Town		State	ZIP Code
Province Postal Code	Country		
Home Study Reviewer's/Approver's Daytime Telephone	E. Home Study Re	eviewer's/Appro	over's Fax Number
Number	(if any)		
Home Study Reviewer's/Approver's Email Address (if any)	20	20	
	Family Name (Last Name) Family Name (Last Name) Reviewer's/Approver's Mailing Address and Contact Information Street Number and Name City or Town Province Postal Code Home Study Reviewer's/Approver's Daytime Telephone Number	Family Name (Last Name) Given Name (Firs Reviewer's/Approver's Mailing Address and Contact Information Street Number and Name City or Town City or Town Province Postal Code Country Home Study Reviewer's/Approver's Daytime Telephone E. Home Study Reviewer's/Approver's Daytime Telephone Number (if any)	Family Name (Last Name) Given Name (First Name) Reviewer's/Approver's Mailing Address and Contact Information Apt. Ste. Flr. Street Number and Name Apt. Ste. Flr. City or Town State Province Postal Code Country Home Study Reviewer's/Approver's Daytime Telephone E. Home Study Reviewer's/Approver's Daytime Telephone

Information About Your Primary Adoption Service Provider (if applicable)

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.

4. Is your home study preparer or the agency that reviewed and approved your home study also your primary adoption service provider?

If you answered "Yes," indicate which individual or organization provided in either **Item Number 2.** or **Item Number 3.** is serving as your primary adoption service provider.

If you answered "No," you must answer Item Number 5.

- 5. Have you identified another accredited agency or approved person to serve as your primary adoption service provider?
 - Yes, I have identified a primary adoption service provider that will be responsible for my case. Provide the name and contact information of your primary adoption service provider in **Items A. E.** below.
 - No, I have not yet identified a primary adoption service provider that will be responsible for my case.

∀es No

Part 2. Information About Your Home Study Preparer and/or Primary Adoption Service Provider (continued)

NOTE: If you have not identified a different agency to serve as your primary adoption service provider, the individual or agency that prepared or reviewed and approved your home study must serve as your primary adoption service provider when you file your Form I-600 petition on behalf of a specific child. See the General Instructions section of the Form I-600A's Instructions for more information.

Provide the name and contact information of the primary adoption service provider that will be responsible for your case.

A. Name of Primary Adoption Service Provider

	B.	Point of Contact Within the Organization	
		Family Name (Last Name)	Given Name (First Name)
C.		Primary Adoption Service Provider's Daytime Telephone Number	D. Primary Adoption Service Provider's Fax Number (if any)
	E.	Primary Adoption Service Provider's Email Address (if any)	
Pa	art 3	. Information About Your Intended Adoption(s)	
1.	Wh	at country do you intend to adopt from (if known)?	
2.	Do	you or your spouse (if married) plan to travel abroad to locate	or adopt a child?
3. If you answered "Yes" to Item Number 2., provide the following information (if available):			
	А.	Your Intended Departure Date (mm/dd/yyyy)	B. Your Spouse's Intended Departure Date (mm/dd/yyyy)
	C.	Place to Which You or Your Spouse (if married) Are Travelin	ng
		City or Town	Province
		Country	1
_			
4.		l you and your spouse (if married) adopt the child abroad after e personally seen and observed the child before or during the a	
			r r

5. If you know that the child will be adopted in the United States, provide a written description of all the pre-adoption requirements of the state of the child's proposed residence. Cite any relevant state statutes and regulations, and describe the steps you have already taken or will take to comply with these requirements. Identify and explain any pre-adoption requirements that you cannot meet at this time as a result of state law. If you need extra space to complete this Item Number, use the space provided in Part 9. Additional Information.

Pa	art 3. Iı	nformation About Your Intended Adoption(s) (continued)			
<u> </u>	Where of				
	A. The	e USCIS office located at:			
	OF	R			
	B. The	e U.S. Embassy or U.S. Consulate located at:			
7.	Do you	plan to adopt more than one child?	Yes No		
8.	If you a	inswered "Yes," enter the number of children you plan to adopt.			
Pa	art 4. A	Accommodations for Individuals With Disabilities and/or Impairments			
N)TE: Rea	ad the information in the Form I-600A Instructions before completing this section.			
1.	Are you	requesting an accommodation because of disabilities and/or impairments?	Yes No		
2.	If you a	inswered "Yes," select all applicable boxes below that indicate who has the disabilities and/or impairme	ents.		
	App	plicant Spouse Other Adult Household Member			
3. If you answered "Yes" to Item Number 1., select all applicable boxes in Items A C. and provide an answer for each perso					
	with disabilities and/or impairments. A. Deaf or hard of hearing and request the following accommodation. (If requesting a sign-language interpreter, indicate				
	for which language (for example, American Sign Language)):				
	Production				
	B.	Blind or have low vision and request the following accommodation:			
	C. Another type of disability and/or impairment. (Describe the nature of the disability and/or impairment and the requested				
		1			
-					
Pa	art 5. A	Applicant's Statement, Certification, Duty of Disclosure, and Signature			
N	TE. Res	ad the Penalties section of the Form I-600A Instructions before completing this section			

Applicant's Statement

- 1. Applicant'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 application and my answer to every question.
 - B. The interpreter named in Part 7. read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I

understood everything.

Part 5. Applicant's Statement, Certification, Duty of Disclosure, and Signature (continued)

2. Applicant's Statement Regarding the Preparer (if applicable)

At my request, the preparer named in **Part 8.**,

prepared this application for me based only upon information I provided or authorized.

Applicant'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 application, 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 application, I understand all of the information contained in and submitted with my application, and that all of this information is complete, true, and correct.

Applicant'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-600A and/or Form I-600 Instructions, and I agree to notify my home study preparer and USCIS of any new information that I am required to disclose.

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

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 6. Your Spouse's Statement, Certification, Duty of Disclosure, and Signature

Your Spouse's Statement

- 1. Spouse's Statement Regarding the Interpreter (select the box for either Item A. or B.)
 - A. I can read and understand English, and have read and understand every question and instruction on this application and my answer to every question.
 - **B.** The interpreter named in **Part 7.** read to me every question and instruction on this application and my answer to every question in a language in which I am fluent, and I

understood everything.

- 2. Spouse's Statement Regarding the Preparer (if applicable)
 - At my request, the preparer named in **Part 8.**,

prepared this application for me based only upon information I provided or authorized.

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.

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

I furthermore authorize release of information contained in this application, 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 application, I understand all of the information contained in and submitted with my application, and that all of this information is complete, true, and correct.

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-600A and/or Form I-600 Instructions, and I agree to notify the home study preparer and USCIS of any new information that I am required to disclose.

Your Sp	ouse's Signature		
3. Your	Spouse's Signature		Date of Signature (mm/dd/yyyy)

NOTE TO ALL SPOUSES: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your petition.

Part 7. Interpreter's Contact Information, Certification, and Signature

If you and/or your spouse (if married) used an interpreter to read and complete this application, provide the following information about the interpreter.

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)	2020
Int	erpreter'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

Interpreter's Daytime Telephone Number 4.

Interpreter's Mobile Telephone Number (if any) 5.

- 6. Interpreter's Email Address (if any)

Part 7. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Certification

I cer	rtify, under penalty of perjury, that:	
I am	n fluent in English and	, which is the same language specified in Parts 5. and 6. ,
and or sł	instruction on this application and their answer to every que	nd/or the applicant's spouse in the identified language every question nestion. The applicant and/or the applicant's spouse informed me that he he application, including the Applicant's Certification and the Your answer.
Int	terpreter's Signature	
7.	Interpreter's Signature	Date of Signature (mm/dd/yyyy)
	rt 8. Contact Information, Declaration, and Si her Than the Applicant and Spouse	ignature of the Person Preparing this Application, If
•	ou and/or your spouse (if married) used a preparer to complete parer.	lete this application, provide the following information about the
Pre	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)	
Pro	eparer's Mailing Address	
	Street Number and Name	Apt. Ste. Flr. Number
5.		
	City or Town	State ZIP Code
	Province Postal Code	Country
Pre	eparer's Contact Information	

4. Preparer's Daytime Telephone Number
6. Preparer's Email Address (if any)

Form I-600A Edition 12/21/19

5.

Preparer's Mobile Telephone Number (if any)

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant and Spouse (continued)

Preparer's Statement

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

NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or Form G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this petition.

Preparer's Certification

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

05/13/2020

Preparer's Signature

8. Preparer's Signature

Date of Signature (mm/dd/yyyy)

Part 9. 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. 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)	Given Name (First Name)	Middle Name (if applicable)
	 A-Number (if any) ► A- A. Page Number B. Part Number C. Iten D. 	n Number	
4		ot for	
4.	A. Page Number B. Part Number C. Iten D.	n Number	h
5.	A. Page Number B. Part Number C. Iten D.		0
6.	A. Page Number B. Part Number C. Iten D.	n Number	