TABLE OF CHANGES – FORM Form I-601, Application for Waiver of Grounds of Inadmissibility OMB Number: 1615-0029 05/12/2020

Reason for Revision: Biometrics Rule

Project Phase: NPRM

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 10/31/2021 Edition Date 10/15/2019

Current Page Number and Section	Current Text	Proposed Text
Pages 1-2,	[page 1]	[page 1]
Part 1. Information		
About You		
	Other Names Used	Other Names Used
	List all other names you have ever used, including maiden names, aliases, and nicknames. If you need extra space to complete this section, use the space provided in Part 10. Additional Information .	List all other names you have ever used, including maiden names, aliases, and nicknames. If you need extra space to complete this section, use the space provided in Part 9 . Additional Information .
Pages 2-3,	[page 2]	[page 2]
Part 2. U.S. Entry Information	Part 2. U.S. Entry Information	Part 2. U.S. Entry Information
	Provide information for your previous periods of stay in the United States, beginning with your most recent arrival date.	Provide information for your previous periods of stay in the United States, beginning with your most recent arrival date.
	NOTE: If you need extra space to complete this section, use the space provided in Part 10. Additional Information.	NOTE: If you need extra space to complete this section, use the space provided in Part 9 . Additional Information .
Page 3,	[page 3]	[page 3]
Part 3. Biographic Information	Part 3. Biographic Information (for USCIS Applicant only)	[deleted]
	1. Ethnicity (Select only one box)	

	III'anania an I atia	
	Hispanic or Latino Not Hispanic or Latino	
	2. Race (Select all applicable boxes)	
	White	
	Asian	
	Black or African American	
	American Indian or Alaska Native	
	Native Hawaiian or Other Pacific Islander	
	3. Height	
	Feet	
	Inches	
	4. Weight	
	Pounds	
	Tourids	
	5. Eye Color (Select only one box)	
	Black	
	Blue	
	Brown	
	Gray	
	Green	
	Hazel	
	Maroon	
	Pink	
	Unknown/Other	
	6. Hair Color (Select only one box)	
	Bald (No hair)	
	Black	
	Blond	
	Brown	
	Gray	
	Red	
	Sandy	
	White	
	Unknown/Other	
	Ulikilowii/Otilei	
Pages 3-5, Part 4. Reasons for	[page 3]	[page 3]
Inadmissibility	Part 4. Reasons for Inadmissibility	Part 3. Reasons for Inadmissibility
	If you are seeking a waiver of inadmissibility	If you are seeking a waiver of inadmissibility
	because you have a Class A Tuberculosis	because you have a Class A Tuberculosis
	condition (as defined by U.S. Department of	condition (as defined by U.S. Department of
	Health and Human Services (HHS)	Health and Human Services (HHS)
	regulations), you must complete Part 11. of	regulations), you must complete Part 10. of
	this application.	this application.
	ans application.	ино аррисации.
		···
	[page 5]	[page 5]
	If you need extra space to complete your	If you need extra space to complete your
	statement, use the space provided in Part 10.	statement, use the space provided in Part 9 .
	Additional Information or attach a separate	Additional Information or attach a separate
	letter. If you include a separate letter, indicate in	letter. If you include a separate letter, indicate in
L		and the second of the second o

	Item Number 39. that you are attaching a letter.	Item Number 39. that you are attaching a letter.
Page 6,	[page 6]	[page 6]
Part 5. Information About Your Qualifying Relatives	Part 5. Information About Your Qualifying Relatives	Part 4. Information About Your Qualifying Relatives
	Provide information for your U.S. citizen or lawful permanent resident through whom you are eligible to submit this application. In Item Number 9. , provide a statement explaining the extreme hardship that you or your qualifying relative (U.S. citizen, lawful permanent resident, or other qualified parent or child) has or will experience if you are refused the immigration benefit you are seeking. It is not necessary for an SIJ to complete Part 5. of the application.	Provide information for your U.S. citizen or lawful permanent resident through whom you are eligible to submit this application. In Item Number 9. , provide a statement explaining the extreme hardship that you or your qualifying relative (U.S. citizen, lawful permanent resident, or other qualified parent or child) has or will experience if you are refused the immigration benefit you are seeking. It is not necessary for an SIJ to complete Part 4. of the application.
	Select this box if you have additional relatives through whom you claim eligibility and use the space provided in Part 10. Additional Information to provide the same information as requested in Part 5. , Item Numbers 1.a 8.	Select this box if you have additional relatives through whom you claim eligibility and use the space provided in Part 9 . Additional Information to provide the same information as requested in Part 4 ., Item Numbers 1.a 8 .
	Statement From Applicant (Extreme Hardship)	Statement From Applicant (Extreme Hardship)
	In the space provided below, explain the extreme hardship that your qualifying relative (or yourself if you are a VAWA self- petitioner) would experience if you are refused the immigration benefit you are seeking. For more information on extreme hardship, see Form I-601 Instructions. If you need extra space to complete your statement, use the space provided in Part 10. Additional Information or attach a separate letter. Indicate in Item Number 9. if you are attaching a separate letter. The letter must be submitted at the same time as your Form I-601 application.	In the space provided below, explain the extreme hardship that your qualifying relative (or yourself if you are a VAWA self- petitioner) would experience if you are refused the immigration benefit you are seeking. For more information on extreme hardship, see Form I-601 Instructions. If you need extra space to complete your statement, use the space provided in Part 9. Additional Information or attach a separate letter. Indicate in Item Number 9. if you are attaching a separate letter. The letter must be submitted at the same time as your Form I-601 application.
Page 6,	[page 6]	[page 6]
Part 6. Information About Your Other Relatives With Ties to the United States	Part 6. Information About Your Other Relatives With Ties to the United States	Part 5. Information About Your Other Relatives With Ties to the United States
	Select this box if you have any other relatives with ties to the United States and use the space provided in Part 10. Additional Information to provide the same information as requested in Part 6., Item Numbers 1.a 8.	Select this box if you have any other relatives with ties to the United States and use the space provided in Part 9 . Additional Information to provide the same information as requested in Part 5 ., Item Numbers 1.a 8 .

Statement From Applicant (Discretion) Statement From Applicant (Discretion) In the space provided below, explain why you In the space provided below, explain why you believe your application should be approved as a believe your application should be approved as a matter of discretion, with the favorable matter of discretion, with the favorable outweighing the unfavorable factors in your outweighing the unfavorable factors in your case. For more information on discretion, see case. For more information on discretion, see Form I-601 Instructions. If you need extra space Form I-601 Instructions. If you need extra space to complete your statement, use the space to complete your statement, use the space provided in Part 10. Additional Information or provided in **Part 9. Additional Information** or attach a separate letter. Indicate in Item attach a separate letter. Indicate in Item **Number 9.** if you are attaching a separate letter. **Number 9.** if you are attaching a separate letter. The letter must be submitted at the same time as The letter must be submitted at the same time as your Form I-601 application. your Form I-601 application. [page 7] [page 7] Pages 7-8, Part 7. Applicant's Part 7. Applicant's Statement, Contact Part 6. Applicant's Statement, Contact **Statement, Contact** Information, Declaration, Certification, and Information, Declaration, Certification, and Information, Signature **Signature** Declaration, Certification, and **Signature 1.b.** The interpreter named in **Part 8.** read to me **1.b.** The interpreter named in **Part 7.** read to me every question and instruction on this every question and instruction on this application and my answer to every question, in application and my answer to every question, in [Fillable Field], a language in which I am [Fillable Field], a language in which I am fluent, and I understood everything. fluent, and I understood everything. **2.** At my request, the preparer named in **Part 2.** At my request, the preparer named in **Part 9.**, [Fillable Field], prepared this application **8.**, [Fillable Field], prepared this application for me based only upon information I provided for me based only upon information I provided or authorized. or authorized. [Page 8] [Page 8] I furthermore authorize release of information I furthermore authorize release of information contained in this application, in supporting contained in this application, in supporting documents, and in my USCIS records to other documents, and in my USCIS records to other entities and persons where necessary for the entities and persons where necessary for the administration and enforcement of U.S. administration and enforcement of U.S. immigration law. immigration law. [deleted] I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that: 1) I reviewed and understood all of the information contained in, and submitted

with, my application; and

	2) All of this information was complete, true,	
	and correct at the time of filing. I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.	I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.
Dages 0 0	[page 8]	[page 8]
Pages 8-9, Part 8. Interpreter's Contact Information, Certification, and	Part 8. Interpreter's Contact Information, Certification, and Signature	Part 7. Interpreter's Contact Information, Certification, and Signature
Signature		
	I am fluent in English and [Fillable Field], which is the same language specified in Part 7., Item Number 1.b. , and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification , and has verified the accuracy of every answer.	I am fluent in English and [Fillable Field], which is the same language specified in Part 6. , Item Number 1.b. , and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification , and has verified the accuracy of every answer.
Page 9, Part 9. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant Page 10,	[page 9] Part 9. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant	[page 9] Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant [page 10]
Part 10. Additional	Part 10. Additional Information	Part 9. Additional Information
Information		
Pages 11-12, Part 11. Statement for Applicants With a Class A Tuberculosis Condition (As Defined By HHS Regulations)	[page 11] Part 11. Statement for Applicants With a Class A Tuberculosis Condition (As Defined By HHS Regulations)	[page 11] Part 10. Statement for Applicants With a Class A Tuberculosis Condition (As Defined By HHS Regulations)