TABLE OF CHANGES – FORM

Form I-730, Refugee/Asylee Relative Petition OMB Number: 1615-0037 05/13/2020

Reason for Revision: Biometrics Rule

Project Phase: NPRM

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 5/31/2019 Edition Date 5/30/2017

Current Page Number and Section	Current Text	Proposed Text
Pages 1-2,	[Page 1]	[Page 1]
Part 1. Information About You, the Petitioner	Part 1. Information About You, the Petitioner	[no change]
	U.S. Social Security Number (If applicable):	
	[Page 2]	
	Part 1. Information About You, the Petitioner (Continued)	
	[New]	Your Biographic Information
		Ethnicity (Select only one box) Hispanic or Latino Not Hispanic or Latino Race (Select all applicable boxes)
		White
		Asian Black or African American
		American Indian or Alaska Native
		Native Hawaiian or Other Pacific Islander
		Height Feet Inches
		Weight Pounds
		Eye Color (Select only one box) Black

	T	
	Other Names Used (Including maiden name)	Blue Brown Gray Green Hazel Maroon Pink Unknown/Other Hair Color (Select only one box) Bald (No hair) Black Blond Brown Gray Red Sandy White Unknown/Other [no change]
Pages 1-3,	 [Page 1]	[page 2]
Pages 1-5, Part 2. Information About Your Alien Relative, the Beneficiary	Part 2. Information About Your Alien Relative, the Beneficiary	[no change]
	U.S. Social Security Number (If applicable):	
	[Page 2]	
	Part 2. Information About Your Alien Relative, the Beneficiary (Continued)	
	[New]	Beneficiary's Biographic Information
		Ethnicity (Select only one box) Hispanic or Latino Not Hispanic or Latino
		Race (Select all applicable boxes) White Asian Black or African American American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
		Height Feet Inches
		Weight Pounds
		Eye Color (Select only one box) Black Blue

		Brown Gray Green Hazel Maroon Pink Unknown/Other Hair Color (Select only one box) Bald (No hair) Black Blond Brown Gray Red Sandy White Unknown/Other
	Other Names Used (Including maiden name) If married, Name of Spouse, Date (mm/dd/yyyy), and Place of Present Marriage If previously married, names of prior spouses:	[no change]
Page 3,	[page 3]	[page 3]
Part 4. Warning	Part 4. Warning	Part 4. Warning
	WARNING: Any beneficiary who is in the United States illegally is subject to removal if Form I-730 is not granted by USCIS. Any information provided in completing this petition may be used as a basis for the institution of, or as evidence in, removal proceedings, even if the petition is later withdrawn. Unexcused failure by the beneficiary to appear for an appointment to provide biometrics (such as fingerprints and photographs) and biographical information within the time allowed may result in denial of Form I-730. Information provided on this form and biometrics and biographical information provided by the beneficiary may also be used in producing an Employment Authorization Document if the beneficiary is granted derivative refugee or asylee status.	WARNING: Any beneficiary who is in the United States illegally is subject to removal if Form I-730 is not granted by USCIS. Any information provided in completing this petition may be used as a basis for the institution of, or as evidence in, removal proceedings, even if the petition is later withdrawn. Unexcused failure by the beneficiary to appear for an appointment to provide biometrics and biographical information within the time allowed may result in denial of Form I-730. Information provided on this form and biometrics and biographical information provided by the beneficiary may also be used in producing an Employment Authorization Document if the beneficiary is granted derivative refugee or asylee status.
Page 4,	[page 4]	[page 4]
Part 5. Petitioner's	Part 5. Petitioner's Statement, Contact	Part 5. Petitioner's Statement, Contact
Statement, Contact Information, Declaration,	Information, Declaration, Certification, and Signature	Information, Declaration, Certification, and Signature
Information,	Information, Declaration, Certification, and	Information, Declaration, Certification, and

	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 laws.	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 laws.
	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:	[deleted]
	1) I provided or authorized all of the information contained in, and submitted with, my petition;	
	2) I reviewed and understood all of the information 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 all of the information in my petition 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 petition, and that all of this information is complete, true, and correct.	I certify, under penalty of perjury, that all of the information in my petition 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 petition, and that all of this information is complete, true, and correct.
Page 5,	[page 5]	[page 5]
Part 6. Beneficiary's		
Statement, Contact	Part 6. Beneficiary's Statement, Contact Information, Declaration, Certification, and	Part 6. Beneficiary's Statement, Contact Information, Declaration, Certification, and
Information,	Signature if in the United States	Signature if in the United States
Declaration,	_	_
Certification, and	···	···
Signature if in the	I understand that USCIS may require me to	I understand that USCIS may require me to
United States	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:	appear for an appointment to take my biometrics and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:
		