**TABLE OF CHANGES – INSTRUCTIONS**

**Instructions for Form I-730, Refugee/Asylee Relative Petition**

**OMB Number: 1615-0037**

**05/14/2020**

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| **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 |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Pages 1-2,**  **Who May Not File Form I-730?** | **[page 2]**  **…**  ***Warning:* If your alien relative is in the United States illegally, he or she 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petition may be used as a basis for initiating, or as evidence in, removal proceedings, even if the petition is later withdrawn. Unexcused failure of your alien relative to appear for an appointment to provide biometrics (such as fingerprints) and other biographical information within the time allowed may result in dismissal of the petition. See 8 CFR Section 103.2(b)(13).**  **…** | **[page 2]**  **…**  ***Warning:* If your alien relative is in the United States illegally, he or she 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petition may be used as a basis for initiating, or as evidence in, removal proceedings, even if the petition is later withdrawn. Unexcused failure of your alien relative to appear for an appointment to provide biometrics and other biographical information within the time allowed may result in dismissal of the petition. See 8 CFR Section 103.2(b)(13).**  **…** |
| **Pages 2-5,**  **General Instructions** | **[page 3]**  **…**  **Page 3, Part 2. Information About Your Alien Relative, the Beneficiary (continued).** Complete all sections. Regarding the Admission/travel document. Provide the I-94 admission number which may have been received from U.S. Customs and Border Protection in connection with arrival and admission to the United States, or from U.S. Citizenship and Immigration Services if immigration status was granted within the United States. The I-94 number is on the Form I-94 Arrival-Departure Record, which may be noted as the Departure Number on some versions. If CBP did not provide a Form I-94 upon arrival/admission to the United States, a print out of the Form I-94 may be obtained according to the instructions provided by CBP. Also, provide the date of admission and the date that the authorized stay expired or will expire.  If a passport or other travel document was used at the last admission to the United States, enter the number in the space provided even if the document is now expired. Provide the country of issuance and expiration date as well.  [new]  **Part 5. Petitioner’s Statement, Contact Information, Declaration, Certification, and Signature.** Select the appropriate box to indicate whether you read this petition yourself or whether you had an interpreter assist you. If someone assisted you in completing the petition, select the box indicating that you used a preparer and/or interpreter. Further, you must sign and date your petition and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every petition MUST contain the signature of the petitioner. A stamped or typewritten name in place of a signature is not acceptable.  **Part 6. Beneficiary's Statement, Contact Information, Declaration, Certification, and Signature if in the United States.** Select the appropriate box to indicate whether you (the beneficiary) read this petition yourself or whether you had an interpreter assist you. If someone assisted you in completing the petition, select the box indicating that you used a preparer and/or interpreter. Further, you must sign and date the petition and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every petition **MUST** contain the signature of the beneficiary, if applicable. (Note: If the beneficiary is not currently in the United States, or is not 14 years of age or older, this section should be left blank.) A stamped or typewritten name in place of a signature is not acceptable.  **Part 7. Contact Information, Certification, and Signature of the Person Interpreting this Petition, if Other Than the Petitioner or Beneficiary.** If you used anyone as an interpreter to read the instructions and questions on this petition to you in a language in which you are fluent, the interpreter must fill out this section, provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the petition.  **Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner or Beneficiary.** This section must contain the signature of the person who completed your petition, if other than you, the petitioner. If the same individual acted as your interpreter **and** your preparer, that person should complete both **Part 7** and **Part 8.** If the person who completed this petition is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this petition **MUST** sign and date the petition. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your petition is an attorney or accredited representative, he or she may be obliged to also 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, along with your petition.  **…**  **What Documents Do You Need to Prove Eligibility and A Family Relationship?**  **…**  **2.** In all cases, submit a recently taken clear **photograph** of the family member for whom you are filing. The photograph must be a full frontal picture of your family member, and meet passport specifications. For more information on photographs, you may call the USCIS National Customer Service Center at **1-800-357-5283**. For TTY (dear or hard of hearing) call: **1-800-767-1833**.  **…**  **[page 5]**  **3. *Census record:***State or Federal census record showing name, place of birth, and date of birth, or the age of the person(s) listed.  [new]  **...** | **[page 3]**  **…**  If a passport or other travel document was used at the last admission to the United States, enter the number in the space provided even if the document is now expired. Provide the country of issuance and expiration date as well.  **Parts 1. - 2. Biographic Information.** Provide the biographic information requested. Providing this information as part of your petition may reduce the time you spend at your USCIS ASC appointment as described in the **Biometric Services Appointment** section of these Instructions.  **A. Ethnicity and Race.** Select the boxes that best describe your ethnicity and race.  **B. Categories and Definitions for Ethnicity and Race**  **(1) Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. (**NOTE:** This category is only included under Ethnicity in **Part 3.**, **Item Number 1.**)  **(2) American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.  **(3) Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.  **(4)** **Black or African American.** A person having origins in any of the black racial groups of Africa.  **(5) Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.  **(6) White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.  **C. Height.** Select the values that best match your height in feet and inches. For example, if you are five feet and nine inches, select “5” for feet and “09” for inches. Do not enter your height in meters or centimeters.  **D. Weight.** Enter your weight in pounds. If you do not know your weight or need to enter a weight under 30 pounds or over 699 pounds, enter “000.” Do not enter your weight in kilograms.  **E. Eye Color.** Select the box that best describes the color of your eyes.  **F. Hair Color.** Select the box that best describes the color of your hair.  **Part 6. Petitioner’s Statement, Contact Information, Declaration, Certification, and Signature.** Select the appropriate box to indicate whether you read this petition yourself or whether you had an interpreter assist you. If someone assisted you in completing the petition, select the box indicating that you used a preparer and/or interpreter. Further, you must sign and date your petition and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every petition MUST contain the signature of the petitioner. A stamped or typewritten name in place of a signature is not acceptable.  **Part 7. Beneficiary's Statement, Contact Information, Declaration, Certification, and Signature if in the United States.** Select the appropriate box to indicate whether you (the beneficiary) read this petition yourself or whether you had an interpreter assist you. If someone assisted you in completing the petition, select the box indicating that you used a preparer and/or interpreter. Further, you must sign and date the petition and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every petition **MUST** contain the signature of the beneficiary, if applicable. (Note: If the beneficiary is not currently in the United States, or is not 14 years of age or older, this section should be left blank.) A stamped or typewritten name in place of a signature is not acceptable.  **Part 8. Contact Information, Certification, and Signature of the Person Interpreting this Petition, if Other Than the Petitioner or Beneficiary.** If you used anyone as an interpreter to read the instructions and questions on this petition to you in a language in which you are fluent, the interpreter must fill out this section, provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the petition.  **Part 9. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner or Beneficiary.** This section must contain the signature of the person who completed your petition, if other than you, the petitioner. If the same individual acted as your interpreter **and** your preparer, that person should complete both **Part 8.** and **Part 9.** If the person who completed this petition is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this petition **MUST** sign and date the petition. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your petition is an attorney or accredited representative, he or she may be obliged to also 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, along with your petition.  **…**  **What Documents Do You Need to Prove Eligibility and A Family Relationship?**  **…**  **2.** In all cases, submit a recently taken clear **photograph** of the family member for whom you are filing. The photograph must be a full frontal picture of your family member, and meet passport specifications. For more information on photographs, you may call the USCIS Contact Center at **1-800-357-5283**. For TTY (dear or hard of hearing) call: **1-800-767-1833**.  **…**  **[page 5]**  **3. *Census record:***State or Federal census record showing name, place of birth, and date of birth, or the age of the person(s) listed.  **4.** ***For parent-child relationships:***  USCIS may require that the petitioner submit other evidence of the claimed familial relationship such as deoxyribonucleic acid (DNA) testing.  USCIS will only accept test results from laboratories accredited by the AABB (formerly the American Association of Blood Banks).  A list of laboratories can be viewed at [**www.aabb.org/sa/facilities/Pages/RTestAccrFac.aspx**](http://www.aabb.org/sa/facilities/Pages/RTestAccrFac.aspx).  **...** |
| **Page 5,**  **Biometrics (Fingerprints and Photographs)** | **[page 5]**  **Biometrics (Fingerprints and Photographs)**  Identity, background, and security checks are required on your alien relative before he or she may be granted derivative asylum or refugee status. For example, USCIS must check the records of the U.S. Federal Bureau of Investigation (FBI) and other information, including all relevant databases of the U.S. Government before derivative asylum or derivative refugee status may be granted to your relative. To facilitate these checks, USCIS may require your alien relative to provide biometrics. Where applicable, this means that if your relative is 14 years of age or over, he or she must be fingerprinted and photographed. Your alien relative will be given instructions on how to complete this requirement. If your alien relative is living in the United States and is subject to biometrics collection, he or she will be notified in writing of the appointment time and the location of the Application Support Center (ASC), or the designated Law Enforcement Agency where he or she must go to be fingerprinted and photographed. If your relative is living outside of the United States, he or she will be given instructions, if applicable, for fingerprinting and photographs by DHS, the Department of State (DOS), or Overseas Processing Entities (OPEs) (that is, organizations who assist the U.S. government).  Your relative's unexcused failure to appear for a scheduled appointment or to provide biometrics where required, including fingerprints and photographs, or to provide other biographical information within the time allowed may result in the denial of your Form I-730. | **[page 5]**  **Biometric Services Appointment.** Every individual who is an applicant, petitioner, derivative, beneficiary, or sponsor of an immigration benefit request or other request submitted to USCIS is required to submit biometrics unless USCIS waives or exempts the requirement.  You and your alien relative will be notified of the time and place of your appointment if you or they must appear and you will each be provided requirements for rescheduling if necessary. If you or your alien relative fail to submit any biometrics as required, USCIS may deny your application, petition, or request.  DHS may store the biometrics submitted by an individual and use or reuse biometrics to conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), verify identity, produce documents, determine eligibility for immigration and naturalization benefits, or to perform any other functions necessary for administering and enforcing immigration and naturalization laws, and any other law within DHS authority.  If you are required to provide biometrics, at your appointment you must sign an oath reaffirming that:   1. You provided or authorized all information in the application; 2. You reviewed and understood all of the information contained in, and submitted with, your application; and 3. All of this information was complete, true, and correct at the time of filing. |
| **Page 6, Where To File?** | **[page 6]**  **Where To File?**  Please see our website at [www.uscis.gov/I-730](http://www.uscis.gov/I-730) or call the USCIS National Customer Service Center at **1-800-375-5283** for the most current information about where to file this benefit request. For TTY (deaf or hard of hearing) call: **1-800-767-1833**. | **[page 6]**  **Where To File?**  Please see our website at [www.uscis.gov/I-730](http://www.uscis.gov/I-730) or call the USCIS Contact Center at **1-800-375-5283** for the most current information about where to file this benefit request. For TTY (deaf or hard of hearing) call: **1-800-767-1833**. |
| **Pages 6,**  **Interview Process** | **[page 6]**  **Interview Process**  **If your alien relative is living in the United States**, USCIS may request that he or she appear for an interview. A written notice of the date, time, and place (address) of the scheduled interview will be sent to your relative. (In addition to your alien relative, you, the petitioner, may be asked to appear for an interview.) See 8 CFR Section 103.2(a)(9). (“[A] petitioner... [or] a beneficiary...may be required to appear...for an interview.”). Your alien relative generally will be required to appear at an ASC for biometrics collection before the interview will take place (See Biometrics (Fingerprints and Photographs) section of the instructions).  **…** | **[page 6]**  **Interview Process**  **If your alien relative is living in the United States**, USCIS may request that he or she appear for an interview. A written notice of the date, time, and place (address) of the scheduled interview will be sent to your relative. |
| **Page 6,**  **Penalties** | **[page 6]**  **…**  **2.** Title 18, United States Code, Section 1001, states that whoever willfully and knowingly falsifies a material fact, makes a false statement, or makes use of a false document will be fined up to $10,000 or imprisoned up to five years, or both.  **What Is Our Authority for Collecting This Information?**  USCIS requests the information on Form I-730 to carry out the immigration laws contained in Title 8, United States Code, Sections 1157(c)(2) and 1158(b)(3). USCIS needs this information to determine whether a person is eligible for immigration benefits. The information you provide and the information provided by your relative beneficiary, including biometrics, may also be disclosed to other Federal, State, local, and foreign law enforcement and regulatory agencies during the course of the investigation by USCIS or for other lawful purposes, subject to applicable confidentiality provisions. You do not have to give this information. However, if you refuse to give some or all of it, your petition may be denied.  **…** | **[page 6]**  **…**  **2.** Title 18, United States Code, Section 1001, states that whoever willfully and knowingly falsifies a material fact, makes a false statement, or makes use of a false document will be fined up to $10,000 or imprisoned up to five years, or both.  [deleted]  **…** |
| **Page 7, USCIS Privacy Act Statement** | **[page 7]**  **USCIS Privacy Act Statement**  **AUTHORITIES:** The information requested on this benefit petition, and the associated evidence, is collected pursuant to Sections 103 [8 U.S.C. 1103], 208(b)(3), 207(c), and 290 [8 U.S.C. 1103] of the Immigration and Nationality Act, as amended.  **PURPOSE:** The primary purpose for providing the requested information on this benefit petition is to determine if you have established eligibility for certain family members to obtain derivative refugee or asylee status. USCIS will use the information you provide to grant or deny the benefit sought on behalf of a relative. The form allows Principal Refugees and Asylees to petition for their spouse and children. In short, if the petitioner has been admitted to the United States as a principal refugee or if he/she was granted status in the United States as a principal asylee within the previous two years, the petitioner may file a Form I-730 to request follow-to-join benefits for his/her spouse and/or unmarried children under 21 years of age only.  **DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of your benefit request.  **ROUTINE USES:** The information you provide on this benefit petition may be shared with other federal, state, local, and foreign government agencies and authorized organizations in accordance with approved routine uses, as described in the associated published system of records notices DHS/USCIS-007 – Benefit Information System and DHS/USCIS/ICE/CBP-001 – Alien File, Index, and National File Tracking System of Records, which can be found at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security. | **[page 7]**  **DHS Privacy Notice**  **AUTHORITIES:** The information requested on this benefit petition, and the associated evidence, is collected under the Immigration and Nationality Act, 8 United States Code sections 1103,1158, 1225, 1228, and Title II of Public Law 105-100.  **PURPOSE:** The primary purpose for providing the requested information on this petition is for a refugee or asylee to request follow-to-joint benefits for her/her spouse and/or unmarried children under 21 years of age. DHS uses the information you provide to grant or deny the immigration benefit you are seeking.  **DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), may delay a final decision or result in denial of your petition.  **ROUTINE USES:** DHS may, where allowable under relevant confidentiality provision, share the information you provide on this petition and any additional requested evidence with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS/ICE/CBP-001 Alien File, Index, and National File Tracking System, DHS/USCIS-017 Refugee Case Processing and Security Screening Information System of Records, DHS/USCIS-010 Asylum Information and Pre-screening System, and DHS/USCIS-018 Immigration Biometric and Background Check] and the published privacy impact assessments [DHS/USCIS/PIA-016a Computer Linked Application Information Management System and Associated Systems and DHS/USCIS/PIA-051 Case and Activity Management for International Operations] which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security. |
| **Page 8,**  **Paperwork Reduction Act** | **[page 8]**  **Paperwork Reduction Act**  An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 40 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the petition, attaching necessary documentation, and submitting the petition. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140. OMB No. 1615-0037. **Do not mail your completed Form I-730 to this address.** | **[page 8]**  **Paperwork Reduction Act**  An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 40 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the petition, attaching necessary documentation, and submitting the petition. The collection of biometrics is estimated to require 3 hours and 40 minutes. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140. OMB No. 1615-0037. **Do not mail your completed Form I-730 to this address.** |