**TABLE OF CHANGES – FORM**

**Form G-1515, Civics and Citizenship Toolkit Registration Form**

**OMB Number: 1615-0120**

**Expires 12/31/2020**

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| Legend for Proposed Text:   * Black font = Current text * Red font = Changes   Expires 12/31/2020  Edition Date 02/04/2019 |

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| --- | --- | --- |
| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1, title of form** | Register for a free copy of the Civics and Citizenship Toolkit | **[page 1]**  Register for a FREE Civics and Citizenship toolkit |
| **Page 1, Eligibility Requirements** | Eligibility Requirements | **[page 1]**  No changes |
| **Page 1, Eligibility Requirements (bulleted items)** | * All eligible organizations must register to receive a free copy of the Toolkit. * Registration is limited to immigrant-serving organizations in the United States. | **[page 1]**   * Immigrant-serving organizations in the United States only. * Eligible organizations must register to receive a free Toolkit. * Eligible organizations are limited to receiving one free Toolkit. |
| **Page 1, Example of eligible organizations include:** | * Community-based organizations or nongovernmental organizations that work with immigrants * K-12 schools, adult education centers, community colleges, universities, and other educational institutions * Ethnic or home country organizations * Libraries: K-12, public, academic, etc. * Faith-based organizations * Volunteer groups * Civic and service clubs * Other organizations that provide educational resources to immigrants | **[page 1]**   * Community-based organizations or nongovernmental organizations that work with immigrants * K-12 schools, adult education centers, community colleges, universities, and other educational institutions * Government agency (federal, state, local) * Ethnic or home country organizations * Libraries * Faith-based organizations * Volunteer groups * Civic and service clubs * Other organizations that provide educational resources to immigrants, including museums |
| **Page 1, first paragraph under the section entitled, Example of eligible organizations include:** | Registration is subject to review to ensure eligibility. If eligible, organizations will receive one copy of the Toolkit on a first-come, first-served basis. Resources are limited. See below for information on purchasing additional copies. Registration will be open while supplies last. | **[page 1]**  No changes |
| **Page 1 and 2, PERSONAL REQUESTS BY INDIVIDUALS WILL NOT BE ACCEPTED.** | **PERSONAL REQUESTS BY INDIVIDUALS WILL NOT BE ACCEPTED.** For personal requests visit the [U.S. Government Bookstore](http://bookstore.gpo.gov/products/sku/027-002-00575-9?ctid=146). | **[page 1 and 2]**  **USCIS WILL NOT ACCEPT PERSONAL REQUESTS FROM INDIVIDUALS.** For personal requests, or to purchase additional copies, visit the [U.S. Government Bookstore](http://bookstore.gpo.gov/products/sku/027-002-00575-9?ctid=146). |
| **Page 2 (a new line has been added under the section above)** | **N/A** | **[page 2]**  Please make sure to enter your organization’s correct mailing address on the registration form to receive your toolkit. |
| **Page 2, \*Required fields** | \*Required fields | **[page 2]**  \*Required Fields |
| **Page 2, Name of Organization\* (fillable field)** | Name of Organization\* | **[page 2]**  No changes |
| **Page 2, Type of Organization\* (fillable field)** | Type of Organization  (drop down menu)   * Please select one * Community and/or fait-based organization * Educational institution * Government agency (federal, state, local) * Library * Refugee resettlement program * Volunteer service/civic organization * other | **[page 2]**  Type of Organization\*  (drop down menu)   * Community-based organization or nongovernmental organization * K-12 school or other educational institution * Government agency (federal, state, local) * Ethnic or home country organization * Library * Faith-based organization * Volunteer group * Civic and/or service clubs * Other |
| **Page 2, If you selected ‘other’, please specify (drop down menu)** | If you selected “other,” please specify | **[page 2]**  No changes |
| **Page 2, First Name\* (fillable field)** | First Name\* | **[page 2]**  No changes |
| **Page 2, Last Name\* (fillable field)** | Last Name\* | **[page 2]**  No changes |
| **Page 2, Title (fillable field)** | Title | **[page 2]**  No changes |
| **Page 2, Email\* (fillable field)** | Email\* | **[page 2]**  No changes |
| **Page 2, Organization Phone\***  **(Format: 5551234567)** | Organization Phone\*  (Format: 5551234567) | **[page 2]**  No changes |
| **Page 2, Phone Ext. (fillable field)** | Phone Ext. | **[page 2]**  No changes |
| **Page 2, Organization Street 1\* (fillable field)** | Organization Street 1\* | **[page 2]**  No changes |
| **Page 2, Organization Street 2 (fillable field)** | Organization Street 2 | **[page 2]**  No changes |
| **Page 2, Organization City\* (fillable field)** | Organization City\* | **[page 2]**  No changes |
| **Page 2, Organization State\***  **(Drop down menu)**  **Please select a State** | Organization State\*  (Drop down menu)  Please select a state | **[page 2]**  No changes |
| **Page 2, Organization ZIP Code\* (fillable field)** | Organization ZIP Code\* | **[page 2]**  No changes |
| **Page 2,+4 Code (fillable field)** | +4 Code | **[page 2]**  No changes |
| **Page 3, Organization Website**  **Please enter the full URL. Format:** [**http://www.yoursite.com**](http://www.yoursite.com) **OR https://www.yoursite.com** | Organization Website  Please enter the full URL. Format: <http://www.yoursite.com> OR https://www.yoursite.com | **[page 3]**  No changes |
| **Page 3,**   **Please check this box if you do NOT want U.S. Citizenship and Immigration Services (USCIS) to contact you in the future about its citizenship-related products, resources, and training opportunities. Please contact us at citizenshipproducts@uscis.dhs.gov if you have registered with our site previously and would like to be removed from our mailing list. NOTE: If you do not check the box, USCIS will contact you in the future about its citizenship-related products, resources, and training opportunities.** | Please check this box if you do NOT want U.S. Citizenship and Immigration Services (USCIS) to contact you in the future about its citizenship-related products, resources, and training opportunities. Please contact us at citizenshipproducts@uscis.dhs.gov if you have registered with our site previously and would like to be removed from our mailing list. NOTE: If you do not check the box, USCIS will contact you in the future about its citizenship-related products, resources, and training opportunities. | **[page 3]**  Please contact us at citizenshipproducts@uscis.dhs.gov if you have specific questions about your Toolkit registration. |
| **Page 3, REGISTER (button)** | REGISTER (button) | **[page 3]**  No changes |
| **Page 3, Purchasing Information** | **Purchasing Information**  Additional Toolkits may be purchased from the [U.S. Government Bookstore](http://bookstore.gpo.gov/products/sku/027-002-00575-9?ctid=146). There are no restrictions to purchase the Toolkit. Interested individuals or organizations that do not qualify to receive a free Toolkit may purchase a copy instead. | **[page 3]**  You may purchase additional toolkits from the [U.S. Government Bookstore](http://bookstore.gpo.gov/products/sku/027-002-00575-9?ctid=146). There are no restrictions to purchase the toolkit. If you do not qualify to receive a free toolkit, you may purchase one instead. |
| **Page 3, Privacy Act Statement** | Privacy Act Statement **AUTHORITY:** The information requested on this form is collected pursuant to § 451(f)(2) of the Homeland Security Act of 2002, Public Law 107-296.  **PURPOSES:** The primary purpose for providing the requested information on this form is to request a copy of the Civics and Citizenship Toolkit. Contact information may also be used to provide information regarding USCIS citizenship-related products, resources, and training opportunities.  **DISCLOSURE:** The information you provide is voluntary; however, failure to provide full contact information may prevent USCIS from sending you a copy of the Civics and Citizenship Toolkit.  **ROUTINE USES:** The information will be used by and disclosed to DHS personnel and contractors or other agents who need the information to fulfill orders and to deliver future updates regarding USCIS citizenship-related products, resources, and training opportunities. This includes using the information as necessary and authorized by the routine uses published in DHS/All-002 Department of Homeland Security Mailing and Other Lists System of Records, available at [www.dhs.gov/privacy](http://www.dhs.gov/topic/privacy) | **[page 3]**  **Privacy Act Statement**  **AUTHORITY:** The information requested on this form is collected under Homeland Security Act of 2002 Section 451(f)(2).  **PURPOSE:** The primary purpose for providing the requested information on this form is to request a copy of the Civics and Citizenship Toolkit and to enable DHS to deliver future updates regarding citizenship-related products, resources, and training opportunities. DHS uses the information to provide you with a toolkit.  **DISCLOSURE:** The information you provide is voluntary; however, failure to provide full contact information may prevent DHS from sending you a copy of the Civics and Citizenship Toolkit.  **ROUTINE USES:** DHS may share the information you provide with DHS personnel and contractors or other agents who need the information to send you a Civics and Citizenship Toolkit and to deliver future updates regarding USCIS citizenship-related products, resources, and training opportunities. DHS follows approved routine uses described in the associated published system of records notice [DHS/ALL-002 DHS Mailing and Other Lists System] and the published privacy impact assessment [DHS/ALL/PIA-006 Department of Homeland Security General Contact Lists], which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). |
| **Page 3, Paperwork Reduction Act** | **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 10 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comment 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 Products Division, Office of the Executive Secretariat, 20 Massachusetts Ave., N.W., Washington, DC 20529-2020. **Do not mail your application to this address.** |  |