



Supplement 1, Listing of Adult Member of the Household

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-600A/I-600
Supplement 1
OMB No. 1615-0028
Expires 12/31/2021

► **START HERE - Type or print in black ink.** You, the applicant or petitioner, must complete Form I-600A/Form I-600, Supplement 1, for **EACH** adult member of your household 18 years of age or older. Do not complete this separate Supplement 1 for yourself or your spouse (if married).

Part 1. Information About an Adult Member of the Household

Provide the following information about the Adult Member of the Household.

1. Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

2. Other Names Used by the Adult Member of the Household (if any)

Provide all other names the adult member of the household has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 7. Additional Information**.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Adult Member of the Household's Contact Information

3. U.S. Mailing Address (if any)

In Care Of Name (if any)

Street Number and Name	Apt.	Ste.	Flr.	Number
<input style="width: 95%; height: 25px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 95%; height: 25px;" type="text"/>

City or Town	State	ZIP Code
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

4. Is the current U.S. mailing address the same as the adult member of the household's U.S. physical address? Yes No

If you answered "No," provide the U.S. physical address in **Item Number 5**. or an address abroad in **Item Number 6**., as appropriate.

5. U.S. Physical Address (if any)

Street Number and Name	Apt.	Ste.	Flr.	Number
<input style="width: 95%; height: 25px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 95%; height: 25px;" type="text"/>

City or Town	State	ZIP Code
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

6. Address Abroad (if any)

Street Number and Name	Apt.	Ste.	Flr.	Number
<input style="width: 95%; height: 25px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 95%; height: 25px;" type="text"/>

City or Town	State
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Province	Postal Code	Country
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Part 1. Information About an Adult Member of the Household (continued)

7. Daytime Telephone Number

8. Mobile Telephone Number (if any)

9. Email Address (if any)

Adult Member of the Household's Biographical Information

10. Date of Birth (mm/dd/yyyy)

11. City/Town/Village of Birth

12. State or Province of Birth

13. Country of Birth

14. Alien Registration Number (A-Number) (if any)

▶ A-

15. USCIS Online Account Number (if any)

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Duty of Disclosure

You, the applicant or petitioner, must answer each of the following questions. See the **Duty of Disclosure** section in the Form I-600A or Form I-600 Instructions concerning your ongoing duty to disclose information in response to these questions. If you answer "Yes" to any of these questions, provide a certified copy of the documentation showing the final disposition of each incident which resulted in arrest, indictment, conviction, and/or any other judicial or administrative action and a written statement giving details, including any mitigating circumstances about each arrest. The written statement must be signed by the adult member of the household under penalty of perjury under U.S. law. The statement should include the following:

If signed outside the United States: "I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that this statement is true and correct."

If signed within the United States (including territories, possessions, and commonwealths): "I declare (or certify, verify, or state) under penalty of perjury that this statement is true and correct."

The written statement must also show the date of each incident; place the incident occurred (city/town, state/province, country); name of the police department or other law enforcement administration or other entity involved; date of incarceration and name of facility, if applicable; and include your (the applicant's/petitioner's) name and A-Number (if any) at the top of each sheet. In your written statement, you should also provide a description of any type of counseling, rehabilitation, or other information that you and the adult member of the household would like considered in light of this history.

16. Has the adult member of the household **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.) 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 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

Part 2. Adult Member of the Household's Statement, Certification, Duty of Disclosure, and Signature

Notice to the Adult Member of the Household: By signing this Form I-600A/I-600, Supplement 1, you agree that U.S. Citizenship and Immigration Services (USCIS) may disclose to the applicant/petitioner or the applicant's/petitioner's adoption service providers, if applicable, information that USCIS may obtain about you that is relevant to the adjudication of the applicant's Form I-600A or petitioner's Form I-600, even if the Privacy Act, 5 USC 552a, might otherwise prevent disclosure of the information without your consent.

NOTE: If you, an adult member of the household, knowingly and willfully falsify or conceal a material fact or submit a false document in support of this Supplement 1, USCIS will deny the Form I-600A/I-600 filed for this case and may deny any other USCIS benefits requested by the prospective adoptive parents.

Adult Member of the Household's Statement

1. Adult Member of the Household'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 supplement and my answer to every question.
- B.** The interpreter named in **Part 5.** has read to me every question and instruction on this supplement and my answer to every question, in , a language in which I am fluent, and I understood everything.

2. Adult Member of the Household's Statement Regarding the Preparer (if applicable)

- At my request, the preparer named in **Part 6.**, , prepared this supplement for me based only upon information I provided or authorized.

Adult Member of the Household'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 the suitability and eligibility of the applicant or petitioner as an adoptive parent.

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

Adult Member of the Household's Duty of Disclosure

I understand the ongoing duty to disclose information concerning any change of circumstance, as described in the Form I-600A and/or Form I-600 Instructions, and I agree to notify the applicant, petitioner, home study preparer, and USCIS of any new information that I am required to disclose.

Adult Member of the Household's Signature

3. Adult Member of the Household's Signature

Date of Signature (mm/dd/yyyy)

	<input type="text"/>	<input type="text"/>
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Part 3. Information About You, the Applicant/Petitioner

1. Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Date of Birth (mm/dd/yyyy)	3. City/Town/Village of Birth	
<input type="text"/>	<input type="text"/>	
4. State or Province of Birth	5. Country of Birth	
<input type="text"/>	<input type="text"/>	
6. A-Number (if any)	7. Daytime Telephone Number	
▶ A- <input type="text"/>	<input type="text"/>	
8. Mobile Telephone Number (if any)	9. Email Address (if any)	
<input type="text"/>	<input type="text"/>	
10. USCIS Online Account Number (if any)		
▶ <input type="text"/>		

Part 4. Applicant's/Petitioner's Statement, Certification, and Signature

NOTE: If you or any adult member of the household knowingly and willfully falsify or conceal a material fact or submit a false document with your Form I-600A/I-600, Supplement 1, USCIS will deny your Form I-600A or Form I-600 and may deny any USCIS benefit you request.

Applicant's/Petitioner's Statement

- Applicant's/Petitioner's Statement Regarding the Interpreter (Select the box for either **Item A.** or **B.**)
 - I can read and understand English, and I have read and understand every question and instruction on this supplement and my answer to every question.
 - The interpreter named in **Part 5.** read to me every question and instruction on this supplement and my answer to every question in , a language in which I am fluent, and I understood everything.
- Applicant's/Petitioner's Statement Regarding the Preparer (if applicable)
 At my request, the preparer named in **Part 6.**, , prepared this supplement for me based only upon information I provided or authorized.

Part 4. Applicant's/Petitioner's Statement, Certification, and Signature (continued)

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

Applicant's/Petitioner's Signature

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

Part 5. Interpreter's Contact Information, Certification, and Signature

If the adult member of the household and/or applicant/petitioner used an interpreter to read and complete this supplement, 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)

Interpreter'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

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

6. Interpreter's Email Address (if any)

Part 5. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in **Parts 2. and 4., Item B. in Item Number 1.**, and I have read to this adult member of the household and/or applicant/petitioner in the identified language every question and instruction on this supplement and his or her answer to every question. The adult member of the household and applicant/petitioner informed me that he or she understands every instruction, question, and answer on the supplement, including the **Adult Member of the Household's Certification** and the **Applicant's/Petitioner's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature Date of Signature (mm/dd/yyyy)

Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Supplement, If Other Than the Applicant/Petitioner or Adult Member of the Household

If you, the applicant/petitioner or adult member of the household used a preparer to complete this supplement, provide the following information about the preparer.

Preparer'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)

Preparer's Mailing Address

3. Street Number and Name Apt. Ste. Flr. Number
City or Town State ZIP Code
Province Postal Code Country

Preparer's Contact Information

4. Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)
6. Preparer's Email Address (if any)

Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Supplement, If Other Than the Applicant/Petitioner or Adult Member of the Household (continued)

Preparer's Statement

7. A. I am not an attorney or accredited representative but have prepared this supplement on behalf of the adult member of the household and/or applicant/petitioner and with the adult member of the household's and/or applicant's/petitioner's consent.
- B. I am an attorney or accredited representative and my representation of the adult member of the household and/or applicant/petitioner in this case extends does not extend beyond the preparation of this supplement.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this supplement at the request of the applicant/petitioner and/or adult member of the household. The applicant/petitioner and adult member of the household then reviewed this completed supplement and informed me that he or she understands all of the information contained in, and submitted with, this supplement, including the **Adult Member of the Household's Certification** and the **Applicant's/Petitioner's Certification**, and that all of this information is complete, true, and correct. I completed this supplement based only on information that the applicant/petitioner and/or adult member of the household provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature Date of Signature (mm/dd/yyyy)
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Part 7. Additional Information

If you need extra space to provide any additional information within this supplement, 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 supplement 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

2. A-Number (if any) ▶ A-

3. A. Page Number B. Part Number C. Item Number

D. _____

4. A. Page Number B. Part Number C. Item Number

D. _____

5. A. Page Number B. Part Number C. Item Number

D. _____

6. A. Page Number B. Part Number C. Item Number

D. _____

DHS Privacy Notice

AUTHORITIES: The information requested on this supplement, and the associated evidence, is collected under the Immigration and Nationality Act sections 101(b)(1)(F), 201, and 204, and 8 CFR sections 204.3, 204.301, and 204.311.

PURPOSE: This supplement must be completed for every adult member of the household, other than the applicant/petitioner and spouse (if married). USCIS may request submission of this supplemental form for additional individuals. The purpose of this supplement is to collect information on any individual who has the same residence as the applicant/petitioner and is 18 years of age or older on or before the date the applicant/petitioner files Form I-600A or Form I-600, any household member who has not yet turned 18 years of age before the applicant/petitioner files Form I-600A or Form I-600, and any individual who does not actually live at the same residence as the applicant/petitioner, but whose presence USCIS deems relevant to determine the applicant/petitioner's suitability to adopt. USCIS will determine suitability by conducting background and security checks on adult household members to assist in assessing the suitability of the applicant/petitioner.

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 the underlying adoption-related application and/or petition.

ROUTINE USES: The Department of Homeland Security (DHS) may share the information you provide on this supplement 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-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-005 - Inter-Country Adoptions Security] and the published privacy impact assessments [DHS/USCIS/PIA-007(b) Domestically Filed Intercountry Adoptions Applications and Petitions and DHS/USCIS/PIA-051 Case and Activity Management for International Operations] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

PRIVACY ACT WAIVER: Except as permitted by the Privacy Act, 5 USC 552a, applicable routine uses, and information related to adult members of your household as noted below, USCIS may not disclose or give access to any information or record relating to any applicant/petitioner, spouse (if married), or adult member of your household to any individual or entity other than that person, including but not limited to an accredited agency, approved person, exempted provider, supervised provider, or other adoption service provider, unless you give written consent.

If you want to give consent for USCIS to disclose information about your case to an individual or entity, you must complete Form I-600A/I-600, Supplement 2, Consent to Disclose Information. You are not required to give this consent to file Form I-600.

NOTICE TO ADULT MEMBERS OF THE HOUSEHOLD: You are not the prospective adoptive parent who is filing Form I-600A application or Form I-600 petition. As an adult member of the prospective adoptive parent's household, however, information about you may be relevant to the adjudication of the prospective adoptive parent's Form I-600A or Form I-600. Under 8 CFR 103.2(b)(16), the prospective adoptive parent is entitled to review any information that may be used to deny a Form I-600A or Form I-600. By signing the Form I-600A/Form I-600, Supplement 1, you consent to USCIS disclosing to the prospective adoptive parents, adoption service provider, home study preparer, if applicable, and any individual or entity identified by the prospective adoptive parent, if applicable, information that USCIS may obtain about you that is relevant to the adjudication of the prospective adoptive parent's Form I-600 or Form I-600A, even if the Privacy Act, 5 USC 552a, might otherwise prevent disclosure of the information to the prospective adoptive parents.