**TABLE OF CHANGES – INSTRUCTIONS**

**Instructions for Form I-191, Application for Relief Under Former Section 212(c) of the Immigration and Nationality Act (INA)**

**OMB Number: 1615-0016**

**06/27/2023**

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| **Reason for Revision: Limited REV****Project Phase: OMBReview**Legend for Proposed Text:* Black font = Current text
* Red font = Changes

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Pages 5-10,****Specific Instructions** | **[Page 5]****Specific Instructions****…****[Page 8]****Part 6.** **Information About Your Family****Item Numbers 1.** - **51.** Provide information about your spouse, **all** children, and your parents, including his or her current legal name, A-number, USCIS online account number, date of birth, country of birth, country of citizenship or nationality, and physical address. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information**.**…****Part 9. Applicant’s Statement, Contact Information, Certification, and Signature**Select the appropriate box to indicate whether you read this application yourself or whether you had an interpreter assist you. If someone assisted you in completing the application, select the box indicating that you used a preparer. Further, you must sign and date your application and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every application **MUST** contain the signature of the applicant (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.**Part 10. Interpreter’s Contact Information, Certification, and Signature**If you used anyone as an interpreter to read the Instructions and questions on this application 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 application.**Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant**This section must contain the signature of the person who completed your application, if other than you, the applicant. If the same individual acted as your interpreter **and** your preparer, that person should complete both **Part 10.** and **Part 11.** If the person who completed this application 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 application **MUST** sign and date the application. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your application is an attorney or accredited representative, he or she may also need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your application.**…** | **[Page 5]****Specific Instructions****…****[Page 8]****Part 6.** **Information About Your Family****Item Numbers 1.** - **56.** Provide information about your spouse, **all** children, and your parents, including their current legal name, A-number, USCIS online account number, date of birth, country of birth, country of citizenship or nationality, and physical address. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information**.**…****Part 9. Applicant’s Contact Information, Certification, and Signature** You must sign and date your application and, if applicable, provide your daytime telephone number, mobile telephone number, and email address. The signature of a parent or legal guardian, if applicable, is acceptable. A stamped or typewritten name in place of a signature is not acceptable. **Part 10. Interpreter’s Contact Information, Certification, and Signature** If you used anyone as an interpreter to read the Instructions and questions on this application to you in a language in which you are fluent, the interpreter must fill out this section and sign and date the application.**Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant**The person who completed your application, if other than the applicant, must sign this section. If the same individual acted as your interpreter and your preparer, then that person should complete both **Part 10.** and **Part 11.** A stamped or typewritten name in place of a signature is not acceptable. **…** |
| **Pages 10-11,****What Is the Filing Fee?** | **[Page 10]****What Is the Filing Fee?** **…****NOTE:** By completing this transaction, you agree that you have paid for a government service and that the filing fee, biometric services fee and all related financial transactions are final and not refundable, regardless of any action USCIS or the Immigration Court takes on an application, petition or request, or how long USCIS takes to reach a decision. **DO NOT MAIL CASH.** You must submit all fees in the exact amounts.**NOTE:** The filing fee [and biometric services fee] are not refundable, regardless of any action USCIS takes on this application. **DO NOT MAIL CASH.** You must submit all fees in the exact amounts.**…** | **[Page10]****What Is the Filing Fee?** **…****NOTE:** By completing this transaction, you agree that you have paid for a government service and that the filing fee, biometric services fee and all related financial transactions are final and not refundable.**NOTE:** The filing fee and biometric services fee are not refundable, regardless of any action USCIS takes on this application. **DO NOT MAIL CASH.** You must submit all fees in the exact amounts.**…** |
| **Pages 12-13,****DHS Privacy Notice** | **[Page 12]****DHS Privacy Notice****…****DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision in your case or result in denial of your application.**[Page 13]****ROUTINE USES:** DHS may, where allowable under relevant confidentiality provisions, share the information you provide on this application 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-007 - Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-016a Computer Linked Application Information Management System and Associated Systems] 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 12]****DHS Privacy Notice****…****DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result in denial of your application.**[Page 13]****ROUTINE USES:** DHS may where allowable under relevant confidentiality provisions, share the information you provide on this application 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 of Records, DHS/USCIS-007 Benefits Information System, and DHS/USCIS-018 Immigration Biometric and Background Check] and the published privacy impact assessments [DHS/USCIS/PIA-016(a) Computer Linked Application Information Management System and Associated Systems] 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 13,****Paperwork Reduction Act** | **[Page 13]****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 Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 1 hour and 30 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application, preparing statements, attaching necessary documentation, and submitting the application. The collection of biometrics is estimated to require 1 hours and 10 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, Office of Policy and Strategy, Regulatory Coordination Division, 5900 Capital Gateway Drive, Mail Stop #2140, Camp Springs, MD 20588-0009; OMB No. 1615-0016. **Do not mail your completed Form I-191 to this address.** | **[Page 13]****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 Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 1 hour and 23 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application, preparing statements, attaching necessary documentation, and submitting the application. The collection of biometrics is estimated to require 1 hours and 10 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, Office of Policy and Strategy, Regulatory Coordination Division, 5900 Capital Gateway Drive, Mail Stop #2140, Camp Springs, MD 20588-0009; OMB No. 1615-0016. **Do not mail your completed Form I-191 to this address.** |