TABLE OF CHANGES – FORM

Form I-407, Record of Abandonment of Lawful Permanent Resident Status OMB Number: 1615-0130 05/31/2023

Reason for Revision: Revision

Project Phase: 30Day

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 07/31/2023 Edition Date 07/20/2021

| Current Page Number and Section | Current Text | Proposed Text |
|---------------------------------|--|--|
| Pages 1-2, | [Page 1] | [Page 1] |
| Part 1. Information About You | START HERE – Type or print in black ink. | START HERE – Type or print in black ink. |
| | Part 1. Information About You | Part 1. Information About You |
| | 1.a. Alien Registration Number (A-Number) | 1. Alien Registration Number (A-Number) |
| | 1.b. Your Name Exactly As It Appears On Your Permanent Resident Card | 2. USCIS Online Account Number (if any) |
| | 2. USCIS Online Account Number (if any) | 3. Your Name Exactly As It Appears On Your Permanent Resident Card |
| | Your Current Legal Name | 4. Your Current Legal Name |
| | 3.a. Family Name (Last Name)3.b. Given Name (First Name)3.c. Middle Name | Family Name (Last Name) Given Name (First Name) Middle Name |
| | Other Information | Other Information |
| | 4. Date of Birth (mm/dd/yyyy) | 5. Date of Birth (mm/dd/yyyy) |
| | 5. Country of Birth | 6. Country of Birth |
| | 6. Country of Citizenship or Nationality | 7. Country of Citizenship or Nationality |
| | 7. Date of Last Departure from the United States (mm/dd/yyyy) | 8. Date of Last Departure from the United States (mm/dd/yyyy) |
| | 8. State the reasons for abandoning lawful permanent resident status. | [Delete] |
| | Mailing Address Outside of the United States | 9. Mailing Address Outside of the United States |
| | 9.a. In Care Of Name (if applicable) | In Care Of Name (if applicable) |

9.b. Street Number and Name

9.c. Apt./Ste./Flr.

9.d. City or Town

9.e. Province or State

9.f. Postal Code

9.g. Country

10. Email Address (if any)

NOTE: If you are outside of the United States, we recommend that you provide your email address so we can contact you if needed.

Mailing Address Outside of the United States Written in the Language Where You Reside

11.a. In Care Of Name (if applicable)

11.b. Street Number and Name

11.c. Apt./Ste./Flr.

11.d. City or Town

11.e. Province or State

11.f. Postal Code

11.g. Country

[Page 2]

Documents Returned and Location of Submission

12.a. Permanent Resident Card Yes/No

12.b. If you did not return your Permanent Resident Card, select the reason why and select and complete the certification statement.

Lost

Stolen

Mutilated

Other

- **12.c.** [] I certify, under penalty of perjury under the laws of the United States of America that I no longer possess my Permanent Resident Card for the reasons stated in this form, which I signed on (mm/dd/yyyy)
- **12.d.** List other documents you returned (if any).
- **13.a.** [] I am submitting Form I-407 outside of the United States in-person.
- **13.b.** [] I am submitting Form I-407 outside of the United States by mail.
- **13.c.** [] I am submitting Form I-407 at a U.S. Port of Entry.
- **13.d.** [] I am submitting Form I-407 from inside the United States to document that I abandoned my lawful permanent resident (LPR) status in the past. I already abandoned my prior LPR status by leaving the United States intending to

Street Number and Name

Apt./Ste./Flr.

City or Town

Province or State

Postal Code

Country

10. Email Address (if any)

NOTE: If you are outside of the United States, we recommend that you provide your email address so we can contact you if needed.

[Delete]

[Page 2]

Documents Returned and Location of Submission

11. Have you returned your Permanent Resident Card?

Yes/No

12. If you did not return your Permanent Resident Card, select the reason why and select and complete the certification statement.

Lost

Stolen

Mutilated

Other

- **13.** [] I certify, under penalty of perjury under the laws of the United States of America that I no longer possess my Permanent Resident Card for the reasons stated in this form, which I signed on (mm/dd/yyyy)
- **14.** List other documents you returned (if any).
- **15.** [] I am submitting Form I-407 from outside of the United States in-person.
- **16.** [] I am submitting Form I-407 from outside of the United States by mail.
- **17.** [] I am submitting Form I-407 at a U.S. Port of Entry.
- **18.** [] I am submitting Form I-407 from inside the United States to document that I abandoned my lawful permanent resident (LPR) status in the past. I already abandoned my prior LPR status by leaving the United States intending to

make my permanent home abroad. I did not retain my LPR status. I have since returned to the United States through a port of entry by being admitted as a nonimmigrant or by being paroled.

Certification

I knowingly, willingly, and affirmatively declare that I currently have no intention of residing permanently in the United States, and that by signing and submitting this form, I intend to record the fact that I have knowingly and willingly abandoned my LPR status in the United States. I have reviewed the form and its instructions, and I have been informed of and I understand my rights to a hearing before an immigration judge about whether I have abandoned my LPR status in the United States. By signing and submitting this form, I knowingly, willingly, and affirmatively waive my rights to such a hearing.

OR

I knowingly, willingly, and affirmatively declare that I already abandoned my prior lawful permanent resident (LPR) status by leaving the United States intending to make my permanent home abroad and I did not retain my LPR status. I have since returned to the United States through a Port of Entry by being admitted as a nonimmigrant or by being paroled. I declare that I am submitting this Form I-407 to document that I abandoned my prior LPR status. I have reviewed the form and its instructions, and I have been informed, and I understand, that had I not previously abandoned my LPR status, that I would have a right to seek a hearing before an immigration judge to contest the abandonment of my LPR status. By signing and submitting this form, I knowingly, willingly, and affirmatively waive my rights, if any, to such a hearing.

AND/OR

Consent of Parent, Custodial Parent, or Legal Guardian to Submit Form I-407 for Incapacitated Adult or Minors 14 Years of Age and Younger (if applicable)

I confirm that I am the parent, custodial parent, or duly appointed legal guardian for the individual identified in **Part 1.** of this form. As the parent or legal guardian of this individual, I consent to the alien minor's/incapacitated adult's submission of this form.

14.a. Your Signature (or signature of the parent, custodial parent, or legal guardian, if

make my permanent home abroad. I did not retain my LPR status. I have since returned to the United States through a port of entry by being admitted as a nonimmigrant or by being paroled.

Certification

I knowingly, willingly, and affirmatively declare that I currently have no intention of residing permanently in the United States, and that by signing and submitting this form, I intend to record the fact that I have knowingly and willingly abandoned my LPR status in the United States. I have reviewed the form and its instructions, and I have been informed of and I understand my rights to a hearing before an immigration judge about whether I have abandoned my LPR status in the United States. By signing and submitting this form, I knowingly, willingly, and affirmatively waive my rights to such a hearing.

OR

I knowingly, willingly, and affirmatively declare that I already abandoned my prior LPR status by leaving the United States intending to make my permanent home abroad and I did not retain my LPR status. I have since returned to the United States through a Port of Entry by being admitted as a nonimmigrant or by being paroled. I declare that I am submitting this Form I-407 to document that I abandoned my prior LPR status. I have reviewed the form and its instructions, and I have been informed, and I understand, that had I not previously abandoned my LPR status. I would have a right to seek a hearing before an immigration judge to contest the abandonment of my LPR status. By signing and submitting this form, I knowingly, willingly, and affirmatively waive my rights, if any, to such a hearing.

AND/OR

Consent of Parent, Custodial Parent, or Legal Guardian to Submit Form I-407 for Incapacitated Adult or Minors 14 Years of Age and Younger (if applicable)

I confirm that I am the parent, custodial parent, or duly appointed legal guardian for the individual identified in **Part 1.** of this form. As the parent or legal guardian of this individual, I consent to the alien minor's/incapacitated adult's submission of this form.

19. Your Name (or name of parent, custodial parent, or legal guardian, if applicable)

| | applicable) 14.b. Your Name (or name of parent, custodial parents, or legal guardian, if applicable) 14.c. Date of Signature (mm/dd/yyyy) | 20. Your Signature (or signature of the parent, custodial parent, or legal guardian, if applicable) Date of Signature (mm/dd/yyyy) |
|---|--|---|
| | NOTE: Signing this form is voluntary. U.S. law does not require you to complete, sign, or submit this form. You may request a hearing before an immigration judge if you disagree with a Department of Homeland Security (DHS) allegation that you have abandoned your lawful permanent residence. | NOTE: Submission of Form I-407 is voluntary. U.S. law does not require you to complete, sign, or submit this Form I-407. You may request a hearing before an immigration judge if you disagree with a U.S. Department of Homeland Security (DHS) claim that you have abandoned your lawful permanent resident status. |
| | If signed by a parent, custodial parent, or legal guardian, submit evidence to show parental, custodial parental, or legal guardianship responsibility of the minor or incapacitated adult. | If signed by a parent, custodial parent, or legal guardian, submit evidence to show parental, custodial parental, or legal guardianship responsibility of the minor or incapacitated adult. |
| Page 3, | [Page 3] | [Page 3] |
| Part 2. Interpreter's Contact Information, Certification, and | Part 2. Interpreter's Contact Information, Certification, and Signature | Part 2. Interpreter's Contact Information, Certification, and Signature |
| Signature | Provide the following information about the interpreter. | If you used anyone as an interpreter to read the Instructions and questions on this form to you in a language in which you are fluent, the interpreter must fill out this section and sign and date the form. |
| | Interpreter's Full Name 1.a. Interpreter's Family Name (Last Name) 1.b. Interpreter's Given Name (First Name) 2. Interpreter's Business or Organization Name (if any) | <i>Interpreter's Full Name</i> 1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name) 2. Interpreter's Business or Organization Name |
| | | |
| | Interpreter's Mailing Address 3.a. Street Number and Name 3.b. Apt./Ste./Flr. [Fillable field] 3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country | [Delete] |

Interpreter's Certification and Signature

I certify, under penalty of perjury, that I am fluent in English and [Fillable language field], and I have interpreted every question on this

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and [Fillable Field], and I

have read to this respondent in the identified

| | language every question and instruction on this form and his or her answer to every question. The respondent informed me that he or she understands every instruction, question, and answer on the form, including the Certification and the Consent of Parent, Custodial Parent, or Legal Guardian to Submit Form I-407 for Incapacitated Adult or Minors 14 Years of Age and Younger (if applicable), and has verified the accuracy of every answer. Interpreter's Signature 7.a. Interpreter's Signature 7.b. Date of Signature (mm/dd/yyyy) | form and Instructions and interpreted the applicant's answers to the questions in that language, and the form informed me that they understood every instruction, question, and answer on the form. 6. Interpreter's Signature Date of Signature (mm/dd/yyyy) |
|---------|--|---|
| [Nov.:] | | [Page 3] |
| [New] | [New] | Part 3. Contact Information, Declaration, and Signature of the Person Preparing this Form, if Other Than the Legal Permanent Resident (LPR) |
| | | The person who completed your form, 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 2. and Part 3. A stamped or typewritten name in place of a signature is not acceptable. |
| | | Preparer's Full Name 1. Preparer's Family Name (Last Name) Preparer's Given Name (First Name) 2. Preparer's Business or Organization Name |
| | | <i>Preparer's Contact Information</i> 3. Preparer's Daytime Telephone Number 4. Preparer's Mobile Telephone Number (if any) 5. Preparer's Email Address (if any) |
| | | Preparer's Certification and Signature |
| | | I certify, under penalty of perjury, that I prepared this form for the applicant at their request and with express consent and that all of the responses and information contained in and submitted with the form are complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that they understand the responses and information in or submitted with the form. |
| | | 6. Preparer's Signature Date of Signature (mm/dd/yyyy) |

Page 3, Part 3. For Government Use Only

[Page 3]

Part 3. For Government Use Only

Instructions to the U.S. government official: Select **Item Number 1.** if you interviewed the individual identified in **Part 1.** If you did not, select **Item Number 2.** Sign the form and provide other information requested.

- **1.** [] I certify that I personally interviewed the individual identified in **Part 1.**, who has signed this Form I-407, and that I advised the individual of the hearing rights specified in the Instructions. The individual stated that he or she fully understands the effect of signing this Form I-407. I further certify that, if an interpreter was used, I confirmed that the individual understood the interpreter.
- **2.** [] I certify that I reviewed this Form I-407, which was submitted by mail as indicated in **Part 1. Item Number 13.b.** Based on the completed information, signature, and any attached documentation, the individual identified in **Part 1.** has declared that he or she fully understands the effect of submitting this Form I-407.
- **3.** A copy of the signed Form I-407 was provided to this individual. Yes

U.S. Government Official Information

- **4.a.** Name of U.S. Government Official **4.b.** Signature of U.S. Government Official (sign in ink or use signature stamp)
- **4.c.** Title of U.S. Government Official
- **4.d.** Name of DHS Component, if signed by a DHS Official
- **4.e.** Date of Signature (mm/dd/yyyy)

Part 4. For Government Use Only

Instructions to the U.S. government official: Select **Item Number 1.** if you interviewed the individual identified in **Part 1.** If you did not, select **Item Number 2.** Sign the form and provide other information requested.

- **1.** [] I certify that I personally interviewed the individual identified in **Part 1.**, who has signed this Form I-407, and that I advised the individual of the hearing rights specified in the Instructions. The individual stated that they fully **understand** the effect of signing this Form I-407. I further certify that, if an interpreter was used, I confirmed that the individual understood the interpreter.
- 2. [] I certify that I reviewed this Form I-407, which was submitted by mail as indicated in **Part 1. Item Number 16.** Based on the completed information, signature, and any attached documentation, the individual identified in **Part 1.** has declared that they fully understand the effect of submitting this Form I-407.
- **3.** A copy of the signed Form I-407 was provided to this individual. Yes

U.S. Government Official Information

4. Name of U.S. Government Official Signature of U.S. Government Official (sign in ink or use signature stamp) Title of U.S. Government Official Name of DHS Component, if signed by a DHS Official Date of Signature (mm/dd/yyyy)