

Interagency Record of Request A, G, or NATO Dependent Employment Authorization or Change/Adjustment To/From A, G, or NATO Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-566 OMB No. 1615-0027 Expires 01/31/2027

FOR USCIS OFFICE ONLY			
Remarks:	A-Number:		
TO DE COMDIECEU DY AM	ney State Bar Number dicable) Attorney or Accredited Representative USCIS Online Account Number (if any)		
► START HERE - Type or print in black ink.			
Part 1. Information About You	Other Information		
NOTE: The person requesting employment authorization or change/adjustment of status provides the requested information.			
Full Legal Name	6. Country of Birth		
1.a. Family Name (Last Name) 1.b. Given Name	7. Country of Citizenship or Nationality		
(First Name) 1.c. Middle Name	8. Gender Male Female 9. Marital Status		
U.S. Mailing Address (USPS ZIP Code Lookup)			
2.a. In Care Of Name (if any)	Legally Separated Marriage Annulled Other		
2.b. Street Number and Name	10. Alien Registration Number (A-Number) (if any) ▶ A-		
2.c. Apt. Ste. Flr.	11. U.S. Social Security Number (SSN) (if any)		
2.d. City or Town2.e. State2.f. ZIP Code	12. Department of State (DOS) Personal Identification Number (PID)		
3. Is your current mailing address the same as your physical address? Yes No			
NOTE: If you answered "No" to Item Number 3., provide your physical address in Item Numbers 4.a 4.e.	14. Provide your relationship to the principal alien		
U.S. Physical Address	(if applicable).		
4.a. Street Number and Name 4.b. Apt. Ste. Flr.	Information About Your Last Arrival into the United States		
4.c. City or Town	15.a. Form I-94 Arrival-Departure Record Number (if any)		
4.d. State 4.e. ZIP Code			

Par	t 1. Information About You (continued)	6.	Marital Status
15.b.	Passport or Travel Document Number	•	Single Married Divorced Widowed
			Legally Separated Marriage Annulled
15.c.	Country That Issued Your Passport or Travel Document		Other
			DOS Personal Identification Number (PID)
15.d.	Expiration Date for Your Passport or Travel Document	Λ	
	(mm/dd/yyyy)	8.	USCIS Online Account Number (if any)
16.	Date of Your Last Arrival into the United States, On or		
	About (mm/dd/yyyy)	Infe	ormation About the Principal Alien's Last
17.	Your Current Immigration Status (for example, A-3	Arr	ival into the United States
	attendant, G-1 principal representative, NATO-2 other representative)	9.a.	Form I-94 Arrival-Departure Record Number (if any)
		1 1	
		9.b.	Passport or Travel Document Number
Par	t 2. Information About Principal Alien		
NOT	E: If you are the principal alien and submitting Form	9.c.	Country That Issued His or Her Passport or Travel
I-566	on your own behalf, do not complete this section.		Document
Prin	cipal Alien's Full Legal Name	9.4	Expiration Date for His or Her Passport or Travel
	Family Name	7.u.	Document (mm/dd/yyyy)
	(Last Name)		
1.b.	Given Name (First Name)	Par	et 3. Type of Request
1.c.	Middle Name] /1.	I am requesting (select only one box):
Priv	ncipal Alien's U.S. Physical Address		Employment Authorization
	•	1	(Proceed to Item Numbers 2.a 2.d.)
2.a.	Street Number and Name		Change/Adjustment of Status (Proceed to Item Numbers 3.a. - 3.b.)
2.b.	Apt. Ste. Flr.]	
2.c.	City or Town	Req	uests for Employment Authorization
		2.a.	I am a/an (select only one box):
2.d.	State 2.e. ZIP Code		Spouse Son or Daughter
Prin	cipal Alien's Other Information		Other Dependent Recognized by DOS
3.	Date Tour of Duty in the United States Expected to End	2.b.	If you selected "Son or Daughter," indicate your status if you are 21 years of age or older (select only one box).
	(mm/dd/yyyy)		Full-time, Post-secondary Student
4.	Job Title	٦	☐ Disabled Person
		2.c.	If you selected a status in Item Number 2.b. , provide
5.	Country of Citizenship or Nationality	٦	your age.
		2.d.	If you selected "Other Dependent Recognized by DOS," provide your category below.

Form I-566 Edition 01/23/24 Page 2 of 7

Par	rt 3. Type of Request (continued)	Requestor's Certification and Signature
Requests for Change/Adjustment of Status 3.a. I am requesting a/an (select only one box): Change of Nonimmigrant Status TO A, G, or NATO Change of Nonimmigrant Status FROM A, G, or NATO Adjustment of Status Under Immigration and Nationality Act (INA) Section 247(a) from Immigrant to A or G Nonimmigrant		I certify, under penalty of perjury, that I provided or authorial of the responses and information contained in and submit with my request, I read and understand or, if interpreted to in a language in which I am fluent by the interpreter listed in Part 5., understood, all of the responses and information
	Adjustment of Status from A, G, or NATO Nonimmigrant to Immigrant Adjustment of Status Under 8 U.S.C. 1255b 13 of the Act of September 11, 1957) from G-1, or G-2 Nonimmigrant to Lawful Perm Resident	and persons where necessary for the administration and enforcement of U.S. immigration law. 4.a. Requestor's Signature
3.b.	If you selected "Change of Nonimmigrant Statu FROM "A, G, or NATO," provide the specific below.	
	TE: Form I-566 is not required if you have change is, or NATO nonimmigrant status to asylum (protects).	
1	rt 4. Requestor's Contact Information, rtification, and Signature	1.b. Interpreter's Given Name (First Name)2. Interpreter's Business or Organization Name
Req	questor's Contact Information	
	vide your daytime telephone number, mobile telepaber (if any), and email address (if any).	Interpreter's Contact Information
1.	Requestor's Daytime Telephone Number	3. Interpreter's Daytime Telephone Number
2.	Requestor's Mobile Telephone Number (if any)	4. Interpreter's Mobile Telephone Number (if any)
3.	Requestor's Email Address (if any)	5. Interpreter's Email Address (if any)

Form I-566 Edition 01/23/24 Page 3 of 7

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

Interpreter's Certification and Signature

I certify, under penalty or perjury, that I am fluent in English and and I have interpreted every question on the request and Instructions and interpreted the requestor's answers to the questions in that language, and the requestor informed me that they understood every instruction, question, and answer on the request. 6.a. Interpreter's Signature **6.b.** Date of Signature (mm/dd/yyyy) Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Request, if Other Than the Requestor Preparer's Full Name Preparer's Family Name (Last Name) Preparer's Given Name (First Name) Preparer's Business or Organization Name (if any) 2. Preparer's Contact Information Preparer's Daytime Telephone Number Preparer's Mobile Telephone Number (if any)

Preparer's Certification and Signature

I certify, under penalty of perjury, that I prepared this request for the requestor at their request and with express consent and that all of the responses and information contained in and submitted with the request are complete, true, and correct and reflects only information provided by the requestor. The requestor reviewed the responses and information and informed me that they understand the responses and information in or submitted with the request.

6.a.	Preparer's Signature			
6.b.	Date of Signature (mm/dd/yyyy)			

3. 4.

5. Preparer's Email Address (if any)

Form I-566 Edition 01/23/24 Page 4 of 7

Part 7. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
If you need extra space to provide any additional information within this request, 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 request or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the	5.d.					
top of each sheet; indicate the Page Number , Part Number , and Item Number to which your answer refers; and sign and date each sheet.	Λ	ET				
1.a. Family Name (Last Name)	A	-				
1.b. Given Name (First Name)						
1.c. Middle Name	Г		Γ			
2. A-Number (if any) ► A-	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
3.a. Page Number 3.b. Part Number 3.c. Item Number	6.d.					
3.d. PRODI](H				
01/30)/	20	2	24		
	7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
4.a. Page Number 4.b. Part Number 4.c. Item Number	7.d.					
4.d.						
		NOTE TO ALI				
				The agencies a l complete thes		

Form I-566 Edition 01/23/24 Page 5 of 7

FOR OFFICIAL USE ONLY

Part 8. Certification by Diplomatic Mission,

1	ernational Organization, NATO/HQ SACT,		
or I	NATO Member State	8.b	Date of Signature (mm/dd/yyyy)
	TE: Certifying officer or official must have this mation and page to complete process. I certify that the information provided in Parts 1., 2., and 3. of this Form I-566 is true and correct to the best of my knowledge and according to our official records.	Or Sta	dress of Diplomatic Mission, International ganization, NATO/HQ SACT, or NATO Member ate Name of Diplomatic Mission, International Organization
2.a.	I further certify that the requestor's eligibility for employment authorization was verified under the provisions of a (select only one box): Bilateral Agreement Bilateral De facto Arrangement G-4 Regulations	9.b. 9.c. 9.d.	NATO/HQ SACT, or NATO Member State Street Number and Name Apt. Ste. Flr. City or Town
Addi	itional Information About Agreement or Arrangement	9.e.	State 9.f. ZIP Code
2.b.	Name of the Country With Which the Agreement or Arrangement was Made	9.g.	
2.c.	Select all applicable boxes.	9.h	Postal Code
	☐ Without a Numerical Limit	9.i.	Country
For (With a Numerical Limit and This Requestor is Within the Limit Change/Adjustment of Status)/	2024
3.a.	I further certify that the principal alien is being		Official Seal
J.a.	offered the following position:]	
3.b.	DOS Notification Date (mm/dd/yyyy)		
Cer	tifying Official's Information		
4.a.	Certifying Official's Last Name		
4.b.	Certifying Official's First Name		
5.	Certifying Official's Title]	
6.	Certifying Official's Daytime Telephone Number]	
7.	Certifying Official's Email Address (if any)]	

Certifying Official's Signature

8.a. Certifying Official's Signature

Page 6 of 7 Form I-566 Edition 01/23/24

FOR OFFICIAL USE ONLY

Part 9. DOS, NATO/HQ SACT, and/or DOS **USUN Information 1.a.** Recommendation from DOS, NATO/HQ SACT, and/or DOS USUN Grant Request Deny Request For Change/Adjustment of Status only: **1.b.** If you selected "Deny Request," provide the reasons for the recommendation. 2. Date of Recommendation (mm/dd/yyyy) 3. Office Providing Recommendation DOS OFM DOS Protocol DOS Visa DOS USUN Host Country

Signature and Contact Information for Recommending Official

4.a.	Recommending Official's Signature
4.b.	Recommending Official's Daytime Telephone Number

FOR OFFICIAL USE ONLY

Par	Part 10. USCIS Information				
1 ai	eart 10. USCIS information				
•	ormation About USCIS Immigration Services icer (ISO)				
1.	ISO's Identification Number				
	- 1				
2.	USCIS Office				
3.	Office Telephone Number (including area code)				
In f	ormation About USCIS Action Taken on This				
U	uest				
4.	Where was USCIS decision sent?				
	DOS OFM DOS Protocol DOS Visa				
	☐ NATO/HQ SACT ☐ DOS USUN Host Country				
	NOTE: If the requestor filed under 8 U.S.C. 1255b ("Section 13"), advise USCIS of findings.				
5.a.	Decision for Change/Adjustment of Status				
/	Granted Denied				
5.b.	Date of Decision (mm/dd/yyyy)				
5.c.	If you selected "Granted," provide the new status below.				
6.a.	Decision for Employment Authorization Request				
	Granted Denied				
6.b.	Date of Decision (mm/dd/yyyy)				
6.c.	Employment Authorization Valid Until (mm/dd/yyyy)				
6.d.	Classification				
7.a.	Were DOS, NATO/HQ SACT, and/or DOS USUN Host				
	Country notified? Yes No				

7.b. Date of Notification (mm/dd/yyyy)

Form I-566 Edition 01/23/24 Page 7 of 7