

Request for a Certificate of Non-Existence

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form G-1566OMB No. 1615-0156
Expires 02/28/2026

► START HERE - Type or print in black ink. You may request information for one subject of record per form

Par	rt 1.	Certificate Request					
1.	Cei	rtificate Type (select only one):					
		Certificate of Non-Existence of Naturalization					
	☐ Certificate of Non-Existence of any U.S. Citizenship and Immigration Services (USCIS) records						
		Other (provide an explanation about the type of records about which you seek a Certificate of Non-Existence):					
2.	Nu	mber of Certificates Requested:					
Par	rt 2.	Information About Subject of Record					
Prov	ide t	he following information about the person for whom you are requesting a Certificate of Non-Existence.					
1.	Na	me					
	Far	mily Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
2.		ner Names Used (including maiden name, aliases, and nicknames). Providing other names or alternate spellings of the subject record's name may assist USCIS's search for relevant records.					
	Far	mily Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
		DDODITORIONI					
3.	Dat	te of Birth (mm/dd/yyyy)					
	A.	Is this an approximate date?					
	B.	If applicable, provide any additional dates of birth the subject of record may have used. This information may assist our					
		search for relevant records. Date 1 (mm/dd/yyyy) Date 2 (mm/dd/yyyy)					
4.	Co	untry of Birth					
5.	A.	Date of Entry into the United States (mm/dd/yyyy)					
	В.	Is this an approximate date?					
6.		Provide any Alien Registration Numbers (A-Number) that may be associated with the subject of record. An A-Number may					
		o be called a USCIS Number. A-					
7.		ovide any other identifying or reference numbers found on documents issued by USCIS or the former Immigration and turalization Service (INS).					

Pai	rt 2. Information About Subject of Record (continued)					
8.	Spouse's Name(s):						
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)				
9.	Children's Name(s):						
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)				
	L JK	AF					
Par	rt 3. Requestor Information						
1.	Requestor's Full Name Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)				
	Tallify Ivalie (East Ivalie)	Given ivalite (i list ivalite)	Whate Name (ii applicable)				
2.	Email Address:						
	Email Madress.						
3.	Mailing Address						
	Street Number and Name	Apt. Ste.	Flr. Number				
	PKUII						
	City or Town	State	ZIP Code				
	Province Pos	tal Code Country					
)//)/\\					
4.	Is a self-addressed, prepaid return envelope submitted	with your Form G-1566?	+				
⊣.	NOTE: USCIS will send Certificates to an international address only if a prepaid envelope with sufficient postage for international shipping is submitted with Form G-1566.						
	Yes, a return envelope is included						
	No, a return envelope is not included						

Part 4. Verification of Identity and Subject of Record Consent

- If the Subject of Record named in Part 1. is alive, they must sign in either Item Number 1. or 2.
- If you are both the Subject of Record and the requestor, you must sign in either Item Number 1. or 2.
- If the Subject of Record was born less than 100 years ago **and** is deceased, you must attach an obituary, death certificate, or other proof of death. The requestor named in **Part 3.** must provide a signature in **Item Number 8.**
- If the Subject of Record listed in **Part 2.** was born 100 years ago or more **and** is deceased, proof of death is **not** required. The requestor named in **Part 3.** must provide a signature in **Item Number 8.**

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Pai	rt 4. Verification of Identity and Subject of Consent (continued)
Dec	claration Under Penalty of Perjury
certi	ny signature, I consent to USCIS providing a Certificate of Non-Existence or a response to the requestor named in Part 3. I fy, swear, or affirm, under penalty of perjury under the laws of the United States of America, that the information in this request is plete, true, and correct.
1.	Signature Date of Signature (mm/dd/yyyy)
→	
No	tarized Affidavit of Identity
IMP	PORTANT: Do NOT sign and date below until the notary public provides instructions to you.
By n	ny signature, I consent to USCIS providing a Certificate of Non-Existence or a response to the requestor named in Part 3.
2.	Signature Date of Signature (mm/dd/yyyy)
3.	Subscribed and sworn to before me on this day ofin the year
4.	Daytime Telephone Number Daytime Telephone Number
5.	Signature of Notary 6. My Commission Expires on (mm/dd/yyyy)
Sul	bject of Record Deceased
7.	Subject of Record is deceased
Sig	nature of Requestor
By n	ny signature, I certify that I understand all of the information contained in this request is complete, true, and correct.
8.	Signature Date of Signature (mm/dd/yyyy)
	02/02/2024

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Part 5. Additional Information

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 top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

Fami	ily Name (Last Name)		Given	Name (First Name)	Middle Name (if applicable)
A-Nı	umber (if any) ► A-				
A.	Page Number B.	Part Number	C.	Item Number	
D.					
		D	R	AF	
A.	Page Number B.	Part Number	C.	Item Number	
D.		T			
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A.	Page Number B.	Part Number	C.	Item Number	
D.	PR	OI		UC	FION
A.	Page Number B.	Part Number	C.	Item Number	
D.		2/		7/2()24
A.	Page Number B.	Part Number	C.	Item Number	
D.					
	A-N A. D. A. A. A. A. A.	A. Page Number B. D. A. Page Number B.	A-Number (if any) A- A. Page Number B. Part Number D. A. Page Number B. Part Number	A-Number (if any) A- A. Page Number B. Part Number C. D. A. Page Number B. Part Number C.	A-Number (if any) A- A. Page Number B. Part Number C. Item Number D. A. Page Number B. Part Number C. Item Number D. A. Page Number B. Part Number C. Item Number D. A. Page Number B. Part Number C. Item Number D. A. Page Number B. Part Number C. Item Number C. Item Number C. Item Number C. Item Number D.

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