

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 02/28/2026

▶ 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					
Prov	Provide the following information about the Adult Member of the Household.				
1.	Family Name (Last Name)	Given Name (First Name)	M	iddle Name (if applicable)	
2.	Other Names Used by the Adult Member of the House	ehold (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)	M	iddle Name (if applicable)	
	PROD				
Adult Member of the Household's Contact Information					
3.	U.S. Mailing Address (if any)				
	In Care Of Name (if any)	9/20	17/		
	Street Number and Name	<i>// 4</i> /	Apt. Ste. Flr.	Number	
	City or Town		State	ZIP Code	
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)				
	In Care Of Name (if any)				
	Street Number and Name		Apt. Ste. Flr.	Number	
	City or Town		State	ZIP Code	

6.	Address Abroad (if any)		
	Street Number and Name	Apt. Ste. Flr. Number	
	City or Town	State	
	Province	Postal Code Country	
7.	Daytime Telephone Number	8. Mobile Telephone Number (if any)	
9.	Email Address (if any)		
4 7		D: 1: 17.6	
Ad	ult Member of the Household's	s Biographical Information	
10.	Date of Birth (mm/dd/yyyy)		
	City/Town/Village of Birth	State or Province of Birth	
11.			
11.			
11.	Country of Birth	-/29/2024	
11.12.	Country of Birth Alien Registration Number (A-Num	aber) (if any) 13. USCIS Online Account Number (if any)	

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.

Part 1. Information About an Adult Member of the Household (continued)			
Has the adult member of the household EVER, whether in or outside the United States:			
14.a. Been investigated, arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking violating any law or ordinance? (Answer "Yes" even if the record of the arrest, conviction, or or criminal history was expunged, sealed, pardoned, or the subject of any other amelioration. Do not traffic violations, except for violations for driving or operating a vehicle while intoxicated or we impaired by or under the influence of alcohol or other intoxicant.)	ther adverse not include		
14.b. Received a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action?	Yes No		
14.c. Received a suspended sentence, been placed on probation or parole, or in an alternative sentence rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication expungement of a criminal charge?			
14.d. Been the subject of any investigation at any time, even if closed or unsubstantiated, by any chil agency, court, or other official authority in any state or foreign country concerning the abuse or any child?			
Part 2. Adult Member of the Household's Certification, Duty of Disclosure, and	l Signature		
Notice to the Adult Member of the Household: By signing this Form I-600A/I-600, Supplement 1, yand Immigration Services (USCIS) may disclose to the applicant/petitioner or the applicant's/petition applicable, information that USCIS may obtain about you that is relevant to the adjudication of the appetitioner's Form I-600, even if the Privacy Act, 5 USC 552a, might otherwise prevent disclosure of toconsent. NOTE: If you, an adult member of the household, knowingly and willfully falsify or conceal a mater document in support of this Supplement 1, USCIS will deny the Form I-600A/I-600 filed for this case benefits requested by the prospective adoptive parents.	er's adoption service providers, if oplicant's Form I-600A or the information without your rial fact or submit a false		
Adult Member of the Household's Certification			
I certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and submitted with this supplement, I read and understand or, if interpreted by me in a language in which I am fluent by the interpreter listed in Part 6. , understood, all of the responses and information contained in, and submitted with, this supplement, and that all of the responses and the information are complete, true, and correct. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.			
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			
1. Adult Member of the Household's Signature	Date of Signature (mm/dd/yyyy)		

Part 3. Information About You, the Applicant/Petitioner			
1.	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
2.	Date of Birth (mm/dd/yyyy)	AFT	
3.	City/Town/Village of Birth	State or Province of Birth	
	Country of Birth	PEOR	
4.	Alien Registration Number (A-Number) (if any) ▶ A-	Daytime Telephone Number	
6.	Mobile Telephone Number (if any)	7. Email Address (if any)	
8.	USCIS Online Account Number (if any) •	UCTI	ON
Par	t 4. Applicant's/Petitioner's Certification,	and Signature	
docu	E: If you or any adult member of the household knownent with your Form I-600A/I-600, Supplement 1, Utility you request.		
App	licant's/Petitioner's Certification and Signa	ature	
my so under the ir that U	ify, under penalty of perjury, that I provided or authors applement, I read and understand or, if interpreted to estood, all of the responses and information contained afformation are complete, true, and correct. Furthermous USCIS may need to determine my eligibility for an innistration and enforcement of U.S. immigration law.	me in a language in which I am fluent by the in, and submitted with, my supplement, arore, I authorize the release of any information.	the interpreter listed in Part 5. , and that all of the responses and on from any and all of my records
1.	Applicant's/Petitioner's Signature		Date of Signature (mm/dd/yyyy)
D	4.5. I4		
	t 5. Interpreter's Contact Information, Co	, 3	
	adult member of the household and/or applicant/peti wing information about the interpreter.	itioner used an interpreter to read and comp	elete this supplement, provide the
Inte	rpreter's Full Name		
1.	Interpreter's Family Name (Last Name)	Interpreter's Given Name (I	First Name)
2.	Interpreter's Business or Organization Name		

Part 5. Interpreter's Contact Information, Certification, and Signature (continued)				
Inte	erpreter's Contact Information			
3.	Interpreter's Daytime Telephone Number 4. Interpreter's Mobile Telephone Number (if any)			
5.	Interpreter's Email Address (if any)			
Inte	erpreter's Certification and Signature			
I cer	tify, under penalty of perjury, that I am fluent in English and , and I			
petiti	interpreted every question on this supplement and interpreted to the adult member of the household's and/or applicant's/ioner's answers to the questions in that language, and the adult member of the household and/or applicant/petitioner informed methey understood every instruction, question, and answer on this supplement.			
6.	Interpreter's Signature Date of Signature (mm/dd/yyyy)			
	PRODICTION			
	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			
Pre	parer's Full Name			
1.	Preparer's Family Name (Last Name) Preparer's Given Name (First Name)			
2.	Preparer's Business or Organization Name			
Pre	parer's Contact Information			
3.	Preparer's Daytime Telephone Number 4. Preparer's Mobile Telephone Number (if any)			
5.	Preparer's Email Address (if any)			
Pre	parer's Certification and Signature			
their are c	tify, under penalty of perjury, that I prepared this supplement for the applicant/petitioner and/or adult member of the household at request and with express consent and that all of the responses and information contained in and submitted with this supplement omplete, true, and correct. The applicant/petitioner and/or adult member of the household reviewed the responses and information nformed me that they understand the responses and information in or submitted with this supplement.			
6.	Preparer's Signature Date of Signature (mm/dd/yyyy)			

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. 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 (if applicable)	
2.	A-Number (if any) ► A-			
3.	Page Number Part Number Item Number			
4	Page Number Page Number Itam Number	UCTI	ON	
4.	Page Number Part Number Item Number	9/202	4	
5.	Page Number Part Number Item Number			
6.	Page Number Part Number Item Number			

DHS Privacy Notice

AUTHORITIES: USCIS is collecting the information requested on this supplement, and the associated evidence, under the Immigration and Nationality Act (INA) 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 primary purpose for providing the requested information on 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. The Department of Homeland Security (DHS) uses the information you provide to grant or deny the immigration benefit the applicant/petitioner is seeking.

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 USCIS denying the underlying adoption-related application and/or petition.

ROUTINE USES: DHS may, where allowable under relevant confidentiality provisions, 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.