

Department of Homeland Security

Part 1. Information About Attorney or Accredited Representative				
1.	U.S. Citizenship and Immigration Services (USCIS) Online Account	Number (if any)►		
Na	ame of Attorney or Accredited Representative			
2.	Family Name (Last Name) Given Name (First Name)	Tame) Middle	Name	
Ad	ddress of Attorney or Accredited Representative			
3.	Street Number and Name	Apt. Ste. F	r. Number	
	City or Town Province Postal Code	Cauntaria State	ZIP Code (USPS ZIP Code Lookup)	
		Country		
Со	ontact Information of Attorney or Accredited Represent	ntive	/1	
4.	Daytime Telephone Number 5.	Mobile Telephone Number	(if any)	

Part 2. Eligibility Information for Attorney or Accredited Representative

Select all applicable items.

Email Address (if any)

6.

1. A. I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need to provide information for more than three jurisdictions, use the space provided in **Part 8. Additional Information**.

Jurisdiction	Bar Number (if applicable)
Jurisdiction	Bar Number (if applicable)
Jurisdiction	Bar Number (if applicable)

7.

Fax Number (if any)

- **B.** I (select **only one** box) and an an subject to any order suspending, enjoining, restraining, disbarring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 8. Additional Information** to provide an explanation.
- C. Name of Law Firm or Organization (if applicable)

Part 2. Eligibility Information for Attorney or Accredited Representative (continued)

- 2. A. I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.
 - B. Name of Recognized Organization C. Date of Accreditation (mm/dd/yyyy)
- **3.** I am associated with

the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at their request.

- 4. A. I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record named in Part 1., Item Number 2., at the law firm named in Part 2., Item Number 1.C. on this form in accordance with the requirements in 8 CFR 292.1(a)(2).
 - B. Name of Law Student or Law Graduate

Part 3. Designated Paralegal for Limited Interaction with USCIS for Customer Service Purposes

Attorney or accredited representative of record in **Part 1.**, **Item Number 2.** to include the name of the designated paralegal working under the direct supervision of the attorney or accredited representative of record named in **Part 1.**, **Item Number 2.** and at the law firm or recognized organization named in **Part 2.**, **Item Number 1.C.** The attorney or accredited representative of record in **Part 1.**, **Item Number 2** and the client named in **Part 5.** of this form have specifically authorized the designated paralegal named in **Item Number 1.** below to engage in limited interaction with USCIS customer service channels as specified in the form instructions.

Name of Paralegal

 1. Family Name (Last Name)
 Given Name (First Name)
 Middle Name

Contact Information of Paralegal

2. Daytime Telephone Number
3. Mobile Telephone Number (if any)
4. Email Address (if any)

Part 4. Notice of Appearance as Attorney or Accredited Representative

If you need extra space to complete this section, use the space provided in **Part 8. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

- 1. A. U.S. Citizenship and Immigration Services (USCIS)
 - **B.** List the form numbers or specific matter in which appearance is entered.
- 2. A. U.S. Immigration and Customs Enforcement (ICE)
 - **B.** List the specific matter in which appearance is entered.

Par	•t 4.]	Notice of Appearance as Attorney or Accredited Representative (continued)			
3.	A.	U.S. Customs and Border Protection (CBP)			
	B.	List the specific matter in which appearance is entered.			
4.	Reco	eipt Number (if any)			
5.	I enter my appearance as an attorney or accredited representative at the request of the (select only one box):				
		Applicant Petitioner Requestor Beneficiary/Derivative Respondent			
D	4 🗖 1				
Part 5. Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)					
1.	Fam	ily Name (Last Name) Given Name (First Name) Middle Name			
2.	Nam	ne of Entity (if applicable) 3. Title of Authorized Signatory for Entity (if applicable)			
4.	Clie	nt's USCIS Online Account Number (if any) 5. Client's Alien Registration Number (A-Number) (if any)			
	►	► A-			
Client's Contact Information					
6.	Day	time Telephone Number (if any)			
8.	Ema	ail Address (if any)			

Client's Mailing Address

9.

NOTE: Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

Street Number and Name		Apt. Ste. Flr.	Number
City or Town		State	ZIP Code
Province	Postal Code Cour	ntry	

Part 6. Client's Consent to Representation and Signature

Consent to Representation and Release of Information

- 1. A. I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.
 - **B.** I have authorized the designated paralegal named in **Part 3.** of this form to engage in limited interaction with USCIS customer service channels. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named paralegal of any records pertaining to me related to the forms or specific matter listed in **Part 4.** of this form that appear in any USCIS system of records.

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and their attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections by submitting a new Form G-28 to USCIS.

- 2. A. I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.
 - **B.** I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

NOTE: If your notice contains a Form I-94, Arrival/Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, please select **Item Number 3**.

3. I request that USCIS send my notice containing Form I-94, Arrival/Departure Record, to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

4. Signature of Client or Authorized Signatory for an Entity Date of Signature (mm/dd/yyyy)

Part 7. Signature of Attorney, Accredited Representative, Law Student, or Law Graduate

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS, I acknowledge that I am subject to the disciplinary rules and procedures at 8 CFR 292.3, including, pursuant to 8 CFR sections 292.3(h)(3), 1003.108(c), authorizing/permitting publication of my name and findings of misconduct should I be subject to any public discipline. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1.	Signature of Attorney or Accredited Representative	Date of Signature (mm/dd/yyyy)		
2.	Signature of Law Student or Law Graduate	Date of Signature (mm/dd/yyyy)		

Part 8. Additional Information

If you need extra space to provide any additional information within this form, 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 form or attach a separate sheet of paper. Type or print your name 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.	Fam	ily Name (Last Name))	Given 1	Name	(First Name) Middle Name
2.	A. D.	Page Number	B.	Part Number	C.	Item Number
3.	A. D.	Page Number	В.	Part Number	C.	Item Number
4.	A. D.	Page Number	В.	Part Number	C c.	Item Number
5.	A. D.	Page Number	B.	Part Number	C.	Item Number
6.	A. D.	Page Number	B.	Part Number	C.	Item Number