# Registration for Classification as Refugee

**Department of Homeland Security**
U.S. Citizenship and Immigration Services

**USCIS**
**Form I-590**
OMB No. 1615-0068
Expires 08/31/2025

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## For DHS Use Only

| Port of Entry | Action Block | Photograph |
|---|---|---|
| | | |

**Alien Registration Number** *(A-Number)*
**A -**

**Resettlement Support Center (RSC) Case Number**

**U.S. Social Security Number** *(if any)*

**Action Block**

**RE-**

## Part 1. Information About You

**1.** Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name *(if applicable)*

**2.** Other Names Used *(if any)*; include maiden name, names by previous marriages, and all aliases.

**3.** Date of Birth *(mm/dd/yyyy)*

**4.** Sex ☐ Male ☐ Female

**5.** Place of Birth *(Country, City/Town/Village)*

**6.** Present Citizenship or Nationality

**7.** Ethnicity and/or Tribal Group

**8.** Religion *(if any)*

**9.** Language *(native)*

**10.** Other Languages that You Speak

**11.** Identity documents, e.g., passport, national identification card and/or UNHCR identification card. Provide your complete name and date of birth as shown on each document listed.

| Your Name As Shown on Document | Date of Birth on Document *(mm/dd/yyyy)* | Document Type | Document Number | Date of Issuance *(mm/dd/yyyy)* | Place of Issuance | Issuing Authority |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

## Part 2. Information About Your Parents

Provide the following information about your parents. Include living, deceased, biological, step and adoptive parents. *(Use continuation page, if necessary.)*

**1. Parent 1**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name *(if applicable)*

Date of Birth *(mm/dd/yyyy)* | Relationship to You | Country of Birth

Street Number & Name, City, Province, Postal Code, and Country (Present Location. If deceased, write "deceased.")

**2. Parent 2**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name *(if applicable)*

Date of Birth *(mm/dd/yyyy)* | Relationship to You | Country of Birth

Street Number & Name, City, Province, Postal Code, and Country (Present Location. If deceased, write "deceased.")

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## Part 3. Information About Your Background

**1.** Provide information about your residences during the past five years. List your present address first.

| Street Number and Name | City | Province or State | Country | From Month/Year | To Month/Year |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**2.** Provide information about the highest level of education that you completed, e.g., at university, college, trade or technical school, military academies, secondary or primary schools. *(Use continuation page, if necessary.)*

| Name of School | Location of School | Type of School or Course of Study | Title of Degree | From Month/Year | To Month/Year |
|---|---|---|---|---|---|
| | | | | | |

**3.** Provide information about your employment during the past five years. List your present or most recent employment first. *(Use continuation page, if necessary.)*

| Name of Employer | Address of Employer | Occupation | From Month/Year | To Month/Year |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

## Part 4. Military Service

Provide in chronological order information about **ALL** your military service and/or military-type training.
*(Use continuation page, if necessary.)*

☐ If none, check here and proceed to the section entitled "**Relative In The United States.**"

**1. Military Service**

| Military Service or Organization that Trained You | Country | Unit | Duty Location | Specialty (ex. Artillery, Infantry, Intelligence, etc.) | Highest Rank | Dates of Service (mm/dd/yyyy) | |
|---|---|---|---|---|---|---|---|
| | | | | | | From | To |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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## Part 5. Relative In The United States *(I have the following close relative in the United States.)*

**1. Relative**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name *(if applicable)*

Relationship to You

Street Number & Name, City or Town, State, and Zip Code

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## Part 6. Information About Your Marital Status

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Your Current Marital Status (check **ALL** that apply):

☐ Married *(Go to section entitled "Current Spouse")*
☐ Never married and not engaged *(Go to **Part 7**)*
☐ Divorced *(Go to section entitled "Former Spouse")*
☐ Unmarried but engaged to be married *(Go to section entitled "Fiancé")*
☐ Widowed *(Go to section entitled "Former Spouse")*
☐ Missing Spouse *(Go to section entitled "Current Spouse")*

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**1. Current Spouse**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name *(if applicable)*

Other Names Used by Spouse

My spouse ☐ will ☐ will not accompany me to the United States.

Identity documents of spouse, e.g., passport, national identification card, UNHCR identification card. *(If more than one identity document, use continuation page.)*

| Spouse's Name As Shown on Document | Date of Birth on Document *(mm/dd/yyyy)* | Document Type | Document Number | Date of Issuance *(mm/dd/yyyy)* | Place of Issuance | Issuing Authority |
|---|---|---|---|---|---|---|
| | | | | | | |

## Part 6. Information About Your Marital Status *(continued)*

**Current Spouse** (continued)

Spouse's A-Number ► **A-**

RSC Case Number *(if different from yours)*

Date of Birth *(mm/dd/yyyy)*

Place of Birth *(Country, City/Town/Village)*

Present Citizenship or Nationality

Ethnicity and/or Tribal Group

Sex ☐ Male ☐ Female

Date of Marriage *(mm/dd/yyyy)*

Place of Marriage *(Country, City/Town/Village)*

Is your spouse's address the same as yours? ☐ Yes ☐ No

If you answered "No," provide your current spouse's present location/address. *If unknown, provide last known location and date.*

Street Number & Name, City or Town, Province, Postal Code, and Country

**2. Former Spouse**

Family Name *(Last Name)*

Given Name *(First Name)*

Middle Name *(if applicable)*

Other Names Used by Former Spouse

Date of Birth *(mm/dd/yyyy)*

Date of Marriage *(mm/dd/yyyy)*

Date Marriage Terminated *(mm/dd/yyyy)*

Check all that apply: ☐ Divorced ☐ Deceased ☐ Missing Date last seen *(mm/dd/yyyy)*

**3. Fiancé**

Family Name *(Last Name)*

Given Name *(First Name)*

Middle Name *(if applicable)*

Other Names Used by Fiancé

Date of Engagement *(mm/dd/yyyy)*

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## Part 7. Information About Your Children

Check all of the boxes below that apply to you:

☐ I have ____ (*number*) children (*include living, deceased, or missing)*

☐ I have no children *(Go to **Part 8**)*

☐ I am currently pregnant

List **ALL** children, from the oldest child to the youngest child. Include all biological, legally adopted, and step-children, regardless of age or marital status. Also include children who are now missing or deceased. *(Use continuation page, if necessary.)*

## Part 7. Information About Your Children *(continued)*

**1. Child 1**

This child is my *(check one)*: ☐ Son ☐ Daughter

This child is my *(check one)*: ☐ Biological Child ☐ Legally Adopted Child ☐ Step-Child

This child is *(check one)*: ☐ Living ☐ Deceased ☐ Missing

Will this child accompany you to the United States? ☐ Yes ☐ No

**Child's Complete Name**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name (*if applicable*)

Date of Birth *(mm/dd/yyyy)* | Place of Birth *(Country, City/Town/Village)*

**Provide the following information ONLY if this child is NOT a case member.**

Marital Status | If Married, Date of Marriage *(mm/dd/yyyy)* | Present Citizenship or Nationality

Current Address *(If unknown, provide last known location and date)*

**2. Child 2**

This child is my *(check one)*: ☐ Son ☐ Daughter

This child is my *(check one)*: ☐ Biological Child ☐ Legally Adopted Child ☐ Step-Child

This child is *(check one)*: ☐ Living ☐ Deceased ☐ Missing

Will this child accompany you to the United States? ☐ Yes ☐ No

**Child's Complete Name**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name (*if applicable*)

Date of Birth *(mm/dd/yyyy)* | Place of Birth *(Country, City/Town/Village)*

**Provide the following information ONLY if this child is NOT a case member.**

Marital Status | If Married, Date of Marriage *(mm/dd/yyyy)* | Present Citizenship or Nationality

Current Address *(If unknown, provide last known location and date)*

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## Part 7. Information About Your Children *(continued)*

**3. Child 3**

This child is my *(check one)*: ☐ Son ☐ Daughter

This child is my *(check one)*: ☐ Biological Child ☐ Legally Adopted Child ☐ Step-Child

This child is *(check one)*: ☐ Living ☐ Deceased ☐ Missing

Will this child accompany you to the United States? ☐ Yes ☐ No

**Child's Complete Name**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name (*if applicable*)

Date of Birth *(mm/dd/yyyy)* | Place of Birth *(Country, City/Town/Village)*

**Provide the following information ONLY if this child is NOT a case member.**

Marital Status | If Married, Date of Marriage *(mm/dd/yyyy)* | Present Citizenship or Nationality

Current Address *(If unknown, provide last known location and date)*

**4. Child 4**

This child is my *(check one)*: ☐ Son ☐ Daughter

This child is my *(check one)*: ☐ Biological Child ☐ Legally Adopted Child ☐ Step-Child

This child is *(check one)*: ☐ Living ☐ Deceased ☐ Missing

Will this child accompany you to the United States? ☐ Yes ☐ No

**Child's Complete Name**

Family Name *(Last Name)* | Given Name *(First Name)* | Middle Name (*if applicable*)

Date of Birth *(mm/dd/yyyy)* | Place of Birth *(Country, City/Town/Village)*

**Provide the following information ONLY if this child is NOT a case member.**

Marital Status | If Married, Date of Marriage *(mm/dd/yyyy)* | Present Citizenship or Nationality

Current Address *(If unknown, provide last known location and date)*

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## Part 8. Information About Your Request For Refugee Status *(Use continuation page, if necessary.)*

**1.** What was the date and travel route when you first fled your country of citizenship/nationality, or if you are stateless, your country of last habitual residence?

**Part 8. Information About Your Request For Refugee Status** *(continued) (Use continuation page, if necessary.)*

**2.** Why did you first flee your country of citizenship/nationality, or if you are stateless, the country of your last habitual residence?

**3.** Have you **EVER** returned to your country? ☐ Yes ☐ No

If "Yes," when and why did you return?

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**Part 9. Additional Information About Your Request For Refugee Status** *(Use continuation page, if necessary.)*

**1.** Have you **EVER** been fingerprinted by the U.S. government or the authorities of any other country?

☐ Yes *(explain below)* ☐ No

**2.** Do you now hold, or have you **EVER** held, or have you **EVER** applied for, permanent residence, other permanent status, or citizenship/nationality, in any country other than your country of citizenship *(or if you are stateless, the country of your last habitual residence)*?

☐ Yes *(explain below)* ☐ No

**3.** Have you **EVER** been to the United States? ☐ Yes ☐ No

If "Yes," provide the information requested in the table below for each trip to the United States.

| Date of Entry *(mm/dd/yyyy)* | Place of Entry | Status | Visa Number | A-Number | Date of Exit *(mm/dd/yyyy)* | Place of Exit |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

## Part 9. Additional Information About Your Request For Refugee Status *(continued) (Use continuation page, if necessary.)*

**4.** List your present and past membership in - or affiliation with - **ALL** political, professional, or social organizations or groups, such as, but not limited to: student groups, labor unions, religious organizations, civil patrols, human rights groups, media organizations, funds, foundations, or societies. Include the name(s) of organization(s), location(s), dates of membership, as well as the purpose, character and nature of the organization(s). Include ranks held, promotions received, honors/recognitions given, regular duties, and dues paid.

☐ If none, check here.

**5.** Have you **EVER** been charged with a violation of law? ☐ Yes ☐ No

If "Yes," provide details of all violations of law below, including: date, place, nature of charges, and final disposition, for each incident.

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## Part 10. Certification Of The Registrant, Interpreter, And Preparer

### *Registrant (Applicant) Certification*

**NOTE**: Select the box for either **Item A.** or **B.** in **Item Number 1.** If applicable, select the box for **Item Number 2.**

**1. Registrant's Statement Regarding Interpreter**

**A.** ☐ I can read and understand English, and have read and understand every question and instruction on this form, as well as my answer to every question.

**B.** ☐ The interpreter named below has read to me every question and instruction on this form, as well as my answer to every question, in _____, a language in which I am fluent. I understand every question and instruction on this form as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above.

**2. Registrant's Statement Regarding Preparer**

☐ I have requested the services of and consented to _____, who ☐ is ☐ is not an attorney or accredited representative, preparing this form for me.

**3. Registrant (Applicant) Certification**

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that U.S. Citizenship and Immigration Services (USCIS) may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this form, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration of U.S. immigration laws.

I certify, under penalty of perjury, that the information in my form and any document submitted with my form were provided by me and are complete, true, and correct.

**A.** Registrant's (Applicant's) Signature _____ Date of Signature *(mm/dd/yyyy)* _____

## Part 10. Certification Of The Registrant, Interpreter, And Preparer *(continued)*

**B.** Telephone Number *(if any)*

**C.** E-mail Address *(if any)*

### *Interpreter Certification*

Provide the following information concerning the interpreter:

**5. Interpreter's Name and Contact Information**

**A.** Interpreter's Family Name *(Last Name)* | Interpreter's Given Name *(First Name)*

**B.** Interpreter's Business or Organization Name | Address | Telephone Number | E-mail Address

**6. Interpreter's Certification and Signature**

**I certify that:**

I am fluent in English and the same language provided in **Part 10.**, **Item B.** in **Item Number 1.**; I have read to this registrant every question and instruction on this form, as well as the answer to every question, in the language provided in **Part 10.**, **Item B.** in **Item Number 1.**; and the registrant has informed me that he or she understands every instruction and question on the form, as well as the answer to every question, and the registrant verified the accuracy of every answer.

Interpreter's Signature | Date of Signature *(mm/dd/yyyy)*

Additional Interpreter's Signature *(if applicable)* | Date of Signature *(mm/dd/yyyy)*

### *Preparer Certification*

Provide the following information concerning the preparer:

**7. Preparer's Name and Contact Information**

**A.** Preparer's Family Name *(Last Name)* | Preparer's Given Name *(First Name)*

**B.** Preparer's Business or Organization Name | Address | Telephone Number | Fax Number | E-mail Address

**8. Preparer's Statement, Certification, and Signature**

By my signature, I certify, swear or affirm, under penalty of perjury, that I prepared this form on behalf of, at the request of, and with the express consent of the registrant (applicant). I completed the form based only on responses the registrant (applicant) provided to me. After completing the form, I reviewed it and all of the registrant's (applicant's) responses with the registrant (applicant), who agreed with every answer on the form. If the registrant (applicant) supplied additional information concerning a question on the form, I recorded it on the form.

Preparer's Signature | Date of Signature *(mm/dd/yyyy)*

Additional Preparer's Signature *(if applicable)* | Date of Signature *(mm/dd/yyyy)*

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## Part 11. Admissibility

**1.** Have you **EVER** been arrested or have you **EVER** committed, or helped someone else commit, any crimes? ☐ Yes ☐ No

If "Yes," have you **EVER**:

**A.** Knowingly committed any crime *(excluding traffic violations)* for which you have not been arrested? ☐ Yes ☐ No

**B.** Been arrested, cited, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance *(excluding traffic violations)*? ☐ Yes ☐ No

**C.** Been the beneficiary of a pardon, amnesty, rehabilitation decree or other act of clemency or similar action? ☐ Yes ☐ No

**D.** Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? ☐ Yes ☐ No

**E.** Illegally trafficked *(illegally transported, traded, dealt, or sold)* in any illegal narcotic or other controlled substance, or knowingly assisted, abetted or conspired in the illicit trafficking of any such substance? ☐ Yes ☐ No

**F.** Engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling? ☐ Yes ☐ No

**G.** Knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States illegally? ☐ Yes ☐ No

**H.** Within the past 10 years, been a prostitute or procured anyone for prostitution? ☐ Yes ☐ No

*Provide details of all violations of law on continuation page, if not previously recorded in **Part 9** of this form, including: date, place, nature of charges, and final disposition, for each incident.*

**2.** Have you **EVER** been to the United States? ☐ Yes ☐ No

If "No," proceed to **Item Number 3.** below.

If "Yes," have you **EVER**:

**A.** Been subject to deportation or removal from the United States? ☐ Yes ☐ No

**B.** Voted illegally in the United States? ☐ Yes ☐ No

**C.** Been a citizen of the United States who has renounced that citizenship to avoid taxation? ☐ Yes ☐ No

**D.** Left the United States to avoid being drafted into the U.S. armed forces? ☐ Yes ☐ No

**E.** Been subject to a civil document fraud final order for violating section 274C of the Immigration and Nationality Act of the United States? ☐ Yes ☐ No

**3.** Have you **EVER** applied for a U.S. immigration benefit, such as a visa, refugee status, or asylum? ☐ Yes ☐ No

If "Yes," provide information below

| Date *(mm/dd/yyyy)* | Location | Type of Immigration Benefit | Status *(status granted or denied)* | Were you the principal applicant? |
|---|---|---|---|---|
| | | | | ☐ Yes ☐ No |
| | | | | ☐ Yes ☐ No |

**4.** Are you now withholding custody of a United States citizen child from a person granted custody of the child? ☐ Yes ☐ No

**5.** Have you **EVER**:

**A.** Engaged in, conspired to engage in, or incited, sabotage, kidnapping, political assassination, hijacking, or any other form of terrorist activity? ☐ Yes ☐ No

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## Part 11. Admissibility *(continued)*

**B.** Solicited membership or funds for, or **EVER** voluntarily assisted or provided any type of material support to, any person or organization that has **EVER** engaged in or conspired to engage in sabotage, kidnapping, political assassination, hijacking, or any other form of terrorist activity? ☐ Yes ☐ No

**C.** Provided support, including housing, transportation, communications, funds, documents, weapons or training for any person or organization that has **EVER** engaged in or conspired to engage in sabotage, kidnapping, assassination, hijacking, or any other form of terrorist activity? ☐ Yes ☐ No

**D.** Been a representative or member of any terrorist organization or a member of a group that endorses terrorist activity? ☐ Yes ☐ No

**6.** If married, has your spouse **EVER** engaged in terrorist activity or been a member of a terrorist organization? ☐ Yes ☐ No ☐ N/A

**7.** If you are under 21 years of age, has your parent **EVER** engaged in terrorist activity or been a member of a terrorist organization? ☐ Yes ☐ No ☐ N/A

**8.** While in the United States, do you intend to engage in:

**A.** Espionage? ☐ Yes ☐ No

**B.** Terrorism or any activity, a purpose of which is opposition to, or the control or overthrow of the Government of the United States, by force, violence or any other unlawful means? ☐ Yes ☐ No

**C.** Any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information? ☐ Yes ☐ No

**D.** Polygamy (simultaneous marriage to more than one spouse)? ☐ Yes ☐ No

**E.** Prostitution? ☐ Yes ☐ No

**9.** Have you **EVER** been a member of, or in any way affiliated with, the Communist party or any other totalitarian party? ☐ Yes ☐ No

If "Yes:"

| Your affiliation/level of membership | Beginning Date *(mm/dd/yyyy)* | Ending Date *(mm/dd/yyyy)* |
|---|---|---|
| | | |

**10.** Have you **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

**A.** Acts involving torture or genocide? ☐ Yes ☐ No

**B.** Killing any person? ☐ Yes ☐ No

**C.** Intentionally and severely injuring any person? ☐ Yes ☐ No

**D.** Engaging in any kind of sexual contact or relations with any person who was being forced or threatened? ☐ Yes ☐ No

**E.** Limiting or denying any person's ability to exercise religious beliefs? ☐ Yes ☐ No

**11.** Have you **EVER**:

**A.** Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia or insurgent organization? ☐ Yes ☐ No

**B.** Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? ☐ Yes ☐ No

**C.** Been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? ☐ Yes ☐ No

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## Part 11. Admissibility *(continued)*

**D.** Assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person? ☐ Yes ☐ No

**E.** Received any type of military, paramilitary, or weapons training? ☐ Yes ☐ No

**12.** Have you **EVER**:

**A.** Recruited, enlisted, conscripted, or used any person under age 15 to serve in or help an armed force or group? ☐ Yes ☐ No

**B.** Used any person under age 15 to take part in hostilities, or to help or provide services to people in combat? ☐ Yes ☐ No

**13.** Have you, by fraud or willful misrepresentation of a material fact, **EVER** sought to procure, or procured, a visa, other documentation, or entry into the United States or any other immigration benefit? ☐ Yes ☐ No

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## Do not write below this line. For Government use only.

**THIS SECTION IS TO BE COMPLETED ONLY IN THE PRESENCE OF THE U.S. GOVERNMENT OFFICIAL RESPONSIBLE FOR ADJUDICATING THIS REGISTRATION.**

I, the undersigned, do swear or affirm that I know the contents of this registration subscribed by me, including any attached documents, and that they are true to the best of my knowledge, and that corrections numbered ____ to ____ were made by me or at my request. Each and every question and instruction on this form was read to me in _____, a language in which I am fluent. I understand each and every question and instruction on this form, as well as my answer to each question. I agree to report any changes in family composition, such as births, deaths, marriages, divorces and engagements, to the U.S. Government via the Resettlement Support Center.

_____

*(True and Complete Signature of Registrant)*

OPTIONAL: I authorize USCIS to release information contained in or pertaining to my application for refugee status to the U.N. High Commissioner for Refugees, other U.S. Government agencies, and other resettlement countries. I understand that no information regarding my refugee claim will be shared with the government of the country from which I am seeking refuge. I understand that I am not required to sign this waiver, and I do so voluntarily.

_____

*(True and Complete Signature of Registrant)*

Subscribed and sworn to before me by the above named registrant at _____ on _____

*(Location)* *(Date, mm/dd/yyyy)*

RE-INTERVIEW *(if applicable)*: I, the undersigned, hereby reaffirm the contents of this registration and my answers to every question on this form, as well as the answers I have provided in my interview on this date.

_____

*(True and Complete Signature of Registrant)*

Subscribed and sworn to before me by the above named registrant at _____ on _____

*(Location)* *(Date, mm/dd/yyyy)*

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**Interpreter's Certification and Signature**

**I certify that: I am fluent in English the same language provided in Part 10., Item B.** in **Item Number 1.**; I have read to this registrant every question and instruction on this form, as well as the answer to every question, in the language provided in **Part 10., Item B.** in **Item Number 1.**; and the registrant has informed me that he or she understands every instruction and question on the form, as well as the answer to every question, and the registrant verified the accuracy of every answer.

**1.** Name of Interpreter

**2.** Signature of Interpreter

**3.** Name of Interpreter *(Re-interview)*

**4.** Signature of Interpreter *(Re-interview)*

**Interviewing Officer Signature**

**5.** Name, Title, and Signature of Interviewing Officer

**6.** Name, Title, and Signature of Interviewing Officer *(Re-interview)*

## Part 12. Additional Information About Your Registration for Classification as Refugee Continuation Sheet

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 to complete and file with this form or attach a separate sheet of paper. Include your name, your Alien Registration Number (A-Number) *(if any)* and RSC Case 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.a.** Page Number | **1.b.** Part Number | **1.c.** Item Number

**1.d.**

**2.a.** Page Number | **2.b.** Part Number | **2.c.** Item Number

**2.d.**

**3.a.** Page Number | **3.b.** Part Number | **3.c.** Item Number

**3.d.**

**4.a.** Page Number | **4.b.** Part Number | **4.c.** Item Number

**4.d.**

Registrant's (Applicant's) Signature | Date of Signature *(mm/dd/yyyy)*

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## Instructions

**How To Fill Out Form I-590**

**1.** Type or print legibly in black ink.

**2.** If you need extra space to complete any item within this form, use the space provided in **Part 12. Additional Information About Your Registration for Classification as Refugee Continuation Sheet.** Type or print the registrant's name and Alien Registration Number (A-Number) *(if any)* and Resettlement Support Center ("RSC") Case Number *(if any)* at the top of each continuation sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which the answer refers.

**3.** Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks, "Provide the name of your current spouse"), type or print "N/A," unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, "How many children do you have" or "How many times have you departed the United States"), type or print "None," unless otherwise directed.

**4.** If you do not completely fill out this form or fail to submit required documents listed in the Instructions and your biometrics, if required, processing of your request will be delayed, and USCIS may reject, close, or deny your form.

**5.** **Signature.** Each form must be properly signed. For all signatures on this form, USCIS will not accept a stamped or typewritten name in place of a signature. If you are under 14 years of age, your parent or legal guardian may sign the form on your behalf. A legal guardian may also sign for a mentally incompetent person.

**6.** **Biometrics.** You may be required, to provide fingerprints, photograph, and/or additional signature to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records. You will be informed when and where you will need to provide these biometrics. If you fail to provide these biometrics as requested, USCIS may reject, close, or deny your form.

**7.** **Requests for More Information.** We may request that you provide more information or evidence to support your form. You may submit legible photocopies of documents requested, unless the Instructions specifically state that you must submit an original document. USCIS may request an original document at the time of filing or at any time during processing of your form. If you submit original documents when not required, the documents may be destroyed or remain a part of the record, and USCIS will not automatically return them to you.

**8.** **Translations.** If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English. The certification must also include the translator's signature, printed name, the signature date, and the translator's contact information.

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**Submission of Form** - The RSC with jurisdiction in the registrant's region shall assist the registrant in the completion and submission of Form I-590, Registration for Classification as Refugee.

**Registration -** A separate Form I-590 is required for each registrant. Form I-590 on behalf of a child under 14 years of age may be submitted by the parent or guardian.

## DHS Privacy Notice

**AUTHORITIES:** The information requested on this application, and the associated evidence, is collected pursuant to 8 U.S.C. 1522(b) and 8 U.S.C. 1157.

**PURPOSE:** The primary purpose for providing the requested information on this application is to determine eligibility for refugee classification and resettlement in the United States. DHS uses the information you provide to grant or deny the immigration benefit you are 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 the denial of your application.

**ROUTINE USES:** DHS may, where allowable under relevant confidentiality provisions, share the information you provide on this application 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/ICE/CBP-001 - Alien File, Index, and National File Tracking System, DHS/USCIS-017 - Refugee Case Processing and Security Screening Information, DHS/USCIS-018 - Immigration Biometric and Background Check and the STATE-59 - Refugee Case Records] and as described in the Privacy Impact Assessments [DHS/USCIS/PIA-068 Refugee Case Processing and Security Vetting PIA and DOS Refugee Processing Center - General Support System (RPC - GSS)], which can be found at **www.dhs.gov/privacy** and **www.state.gov**. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

## Paperwork Reduction Act

An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for Form I-590 is estimated at 3 hours for gathering information; 20 minutes (.33 hours) for submitting biometric information; 1 hour for review the request; and 2 hours for collecting DNA evidence *(if applicable)*. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Office of Policy and Strategy, Regulatory Coordination Division, 5900 Capital Gateway Drive, Mail Stop #2140, Camp Springs, MD 20588-0009; OMB No 1615-0068. **Do not mail your completed Form I-590 to this address.**

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