

Record of Abandonment of Lawful Permanent Resident Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-407 OMB No. 1615-0130 Expires 05/31/2021

START HERE - Type or print in black ink.

START HERE - Type or print in black ink.			Mailing Address Outside of the United States					
Part 1. Information About You			In Care Of Name (if applicable)					
1.a.	Alien Registration Number (A-Number) ▶ A-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	an care of traine (in apparent)					
		9.b.	Street Number and Name					
1.b.	Your Name Exactly As It Appears On Your Permanent Resident Card							
		9.c.	Apt. Ste. Flr.					
2.	USCIS Online Account Number (if any)	9.d.	City or Town					
You	r Current Legal Name	9.e.	Province or State					
3.a.	Family Name	o e	Postal Code					
3.b.	(Last Name) Given Name	9.f.	Postal Code					
	(First Name)	9.g.	Country					
3.c.	Middle Name							
0.1	T 2	10.	Email Address (if any)					
Oth	er Information							
4.	Date of Birth (mm/dd/yyyy)		TE: If you are outside of the United States, we recommend you provide your email address so we can contact you if					
5.	Country of Birth	need	•					
6.	Country of Citizenship or Nationality		iling Address Outside of the United States itten in the Language Where You Reside					
7.	Date of Last Departure from the United States	11.a	In Care Of Name (if applicable)					
, •	(mm/dd/yyyy)							
8.	State the reasons for abandoning lawful permanent	11.b	. Street Number and Name					
	resident status.							
		11.c.	Apt. Ste. Flr.					
		11.d	. City or Town					
		11.e.	Province or State					
		11.f.	Postal Code					
		11.g	. Country					

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A-Number	► A-								
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Part 1. Information About You (continued) Documents Returned and Location of Submission 12.a. Permanent Resident Card Yes No 12.b. If you did not return your Permanent Resident Card, select the reason why and select and complete the certification statement. Lost Stolen Mutilated Other **12.c.** I certify, under penalty of perjury under the laws of the United States of America that I no longer possess my Permanent Resident Card for the reasons stated in this form, which I signed on (mm/dd/yyyy) **12.d.** List other documents you returned (if any). **13.a.** I am submitting Form I-407 outside of the United States in-person. **13.b.** I am submitting Form I-407 outside of the United States by mail. **13.c.** I am submitting Form I-407 at a U.S. Port of Entry.

Certification

I knowingly, willingly, and affirmatively declare that I currently have no intention of residing permanently in the United States, and that by signing and submitting this form, I intend to record the fact that I have knowingly and willingly abandoned my LPR status in the United States. I have reviewed the form and its instructions, and I have been informed of and I understand my rights to a hearing before an immigration judge about whether I have abandoned my LPR status in the United States. By signing and submitting this form, I knowingly, willingly, and affirmatively waive my rights to such a hearing.

13.d.

I am submitting Form I-407 from inside the United States to document that I abandoned my lawful permanent resident (LPR) status in the past. I already abandoned my prior LPR status by leaving the United States intending to make my permanent home abroad.

I did not retain my LPR status. I have since returned to the United States through a port of entry by being admitted as a nonimmigrant or by being paroled.

OR

I knowingly, willingly, and affirmatively declare that I already abandoned my prior lawful permanent resident (LPR) status by leaving the United States intending to make my permanent home abroad and I did not retain my LPR status. I have since returned to the United States through a Port of Entry by being admitted as a nonimmigrant or by being paroled. I declare that I am submitting this Form I-407 to document that I abandoned my prior LPR status. I have reviewed the form and its instructions, and I have been informed, and I understand, that had I not previously abandoned my LPR status, that I would have a right to seek a hearing before an immigration judge to contest the abandonment of my LPR status. By signing and submitting this form, I knowingly, willingly, and affirmatively waive my rights, if any, to such a hearing.

AND/OR

Consent of Parents Custodial Parent, or Legal Guardian to Submit Form I-407 for Incapacitated Adult or Minors 14 Years of Age and Younger (if applicable)

I confirm that I am the parent, custodial parent, or duly appointed legal guardian for the individual identified in **Part 1.** of this form. As the parent or legal guardian of this individual, I consent to the alien minor's/incapacitated adult's submission of this form.

14.a.	Your Signature (or signature of the parent, custodial
	parent, or legal guardian, if applicable)

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14.b.	Your Name (or name of parent, custodial parents, or legal
	guardian, if applicable)

14.c.	Date of Signature (mm/dd/yyyy)	
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NOTE: Signing this form is voluntary. U.S. law does not require you to complete, sign, or submit this form. You may request a hearing before an immigration judge if you disagree with a Department of Homeland Security (DHS) allegation that you have abandoned your lawful permanent residence.

If signed by a parent, custodial parent, or legal guardian, submit evidence to show parental, custodial parental, or legal guardianship responsibility of the minor or incapacitated adult.

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A-Number ► A-									
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Part 2. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

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Inte	erpreter's Full Name
1.a.	Interpreter's Family Name (Last Name)
1.b.	Interpreter's Given Name (First Name)
2.	Interpreter's Business or Organization Name (if any)
Int	erpreter's Mailing Address (USPS ZIP Code Lookup)
11116	erpreier's Mailing Address (USPS ZIP Code Lookup)
3.a.	Street Number and Name
3.b.	Apt. Ste. Flr.
3.c.	City or Town
2.1	State Time Co. In
3.d.	State 3.e. ZIP Code
3.f.	Province
3.g.	Postal Code
3.h.	Country
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Inte	erpreter's Contact Information
4.	Interpreter's Daytime Telephone Number
5.	Interpreter's Mobile Telephone Number (if any)
6.	Interpreter's Email Address (if any)
Inte	erpreter Certification
I cer	tify, under penalty of perjury, that:
I am	fluent in English and
	have read to this respondent in the identified language every
-	tion and instruction on this form and his or her answer to

and I have read to this respondent in the identified language every question and instruction on this form and his or her answer to every question. The respondent informed me that he or she understands every instruction, question, and answer on the form, including the Certification and the Consent of Parent, Custodial Parent, or Legal Guardian to Submit Form I-407 for Incapacitated Adult or Minors 14 Years of Age and Younger (if applicable), and has verified the accuracy of every answer.

Int	erpreter's Signature
7.a.	Interpreter's Signature
7.b.	Date of Signature (mm/dd/yyyy)
Pai	rt 3. For Government Use Only
Nun 1. If	ructions to the U.S. government official: Select Item aber 1. if you interviewed the individual identified in Part if you did not, select Item Number 2. Sign the form and ide other information requested.
1.	I certify that I personally interviewed the individual identified in Part 1. , who has signed this Form I-407, and that I advised the individual of the hearing rights specified in the Instructions. The individual stated that he or she fully understands the effect of signing this Form I-407. I further certify that, if an interpreter was used, I confirmed that the individual understood the interpreter.
2.	I certify that I reviewed this Form I-407, which was submitted by mail as indicated in Part 1. Item Number 13.b. Based on the completed information, signature, and any attached documentation, the individual identified in Part 1. has declared that he or she fully understands the effect of submitting this Form I-407.
3.	A copy of the signed Form I-407 was provided to this individual. Yes No
U.S	S. Government Official Information
4.a.	Name of U.S. Government Official
4.b.	Signature of U.S. Government Official (sign in ink or use signature stamp)
4.c.	Title of U.S. Government Official

4.d. Name of DHS Component, if signed by a DHS Official

4.e. Date of Signature (mm/dd/yyyy)

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