## TABLE OF CHANGES – FORM Form I-191, Application for Relief Under Former Section 212(c) of the Immigration and Nationality Act (INA) Nationality Act (INA) OMB Number: 1615-0016 09/15/2020

**Reason for Revision:** Comprehensive revision with standard language updates including formatting, plain language, and consistency edits. **Project Phase:** 30 Day

Legend for Proposed Text:

- Black font = Current text
- **Red font** = Changes

Expires 02/28/2021 Edition Date 12/02/2019

Current Page Number and Section	Current Text	Proposed Text
Page 1, For USCIS Use Only	[Page 1] For USCIS Use Only	[Page 1] For USCIS Use Only
	Date Fee Stamp	Date Fee Stamp
	Action Block	Action Block
	Received Completed	Received Completed
	Retd/Trans out Trans in	Retd/Trans out Trans in
Page 1, To be completed	[Page 1]	[Page 1]
by an attorney or accredited representative (if any).	To be completed by an attorney or accredited representative (if any).	To be completed by an Attorney or Accredited Representative.
	Select this box if Form G-28 is attached.	Select this box if Form G-28 is attached.
	Attorney State Bar Number (if applicable)	Attorney State Bar Number
	Attorney or Accredited Representative USCIS Online Account Number (if any)	Attorney or Accredited Representative USCIS Online Account Number
Page 1-3, Part 1.	[Page 1]	[Page 1]
Information About You	START HERE- Type or print in black ink.	<b>START HERE- Type or print in black ink.</b> 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.
Part 1. Information About You	Part 1. Information About You
I am applying for permission to return to the United States under the authority contained in former section 212(c) of the Immigration and Nationality Act (INA).	The individual applying for relief under former Immigration and Nationality Act (INA) section 212(c) completes this section.
1. Your Full Name (do <b>not</b> provide a nickname) Family Name (Last Name) Given Name (First Name) Middle Name	1. Your Full Legal Name Family Name (Last Name) Given Name (First Name) Middle Name
2. Other Names Used List all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 12. Additional Information.	2. Other Names Used Provide any other names you have used at any time since birth, including aliases, maiden names, and nicknames. If you need extra space to complete this section, use the space provided in <b>Part 12. Additional Information</b> .
Family Name (Last Name) Given Name (First Name) Middle Name	Family Name (Last Name) [x2] Given Name (First Name)[x2] Middle Name [x2]
[Page 2]	
8. Mailing Address In Care Of Name (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country	3. Current Mailing Address In Care Of Name Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country
	<b>4.</b> Is your current mailing address the same as your physical address? Yes No
	<b>NOTE:</b> If you answered "No" to <b>Item</b> <b>Number 4.</b> , provide your physical address below.
	[Page 2]
9. Physical Address Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code	5. Current Physical Address (if different from the address above) Street Number and Name Apt./Ste./Flr. Number City or Town State
Province Postal Code	ZIP Code Province

Country	Postal Code
	Country
[Page 1]	Other Information
3. Date of Birth (mm/dd/yyyy)	6. Date of Birth (mm/dd/yyyy)
<b>4.</b> Alien Registration Number (A-Number) (if any)	7. Alien Registration Number (A-Number)
<b>5.</b> USCIS Online Account Number (if any)	8. USCIS Online Account Number
7. Country of Citizenship or Nationality	<b>9.</b> Your Country of Citizenship or Nationality List the country where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in <b>Part 12. Additional Information</b> .
<ul> <li>6. Place of Birth</li> <li>City/Town/Village of Birth</li> <li>State/Province of Birth</li> <li>Country of Birth</li> <li>[Page 2]</li> </ul>	10. Place of Birth List the city/town/village, state/ province, and country where you were born. City/Town/Village of Birth State/Province of Birth Country of Birth
<b>10.</b> Information About When and How You Became a Lawful Permanent Resident (LPR)	<b>11.</b> Information About Your Lawful Permanent Resident (LPR) Status
A. Date When You Obtained Your LPR Status (mm/dd/yyyy)	A. Date You Obtained Your LPR Status (mm/dd/yyyy)
<b>B.</b> You Obtained Your LPR Status Through (select <b>only one</b> ) Admission With an Immigrant Visa at a Port- of-Entry Port-of-Entry, If Known Means of Transportation Adjustment of Status While in the United States USCIS Office	<ul> <li>B. How You Obtained Your LPR Status (select only one box)</li> <li>Admission with an Immigrant Visa at a Port of Entry (Complete Item Number 12.)</li> <li>Adjustment of Status Granted by USCIS While in the United States (Complete Item Number 13.)</li> <li>Adjustment of Status Granted by Immigration Judge or Board of Immigration Appeals While Inside the United States (Complete Item Number 14.)</li> </ul>
	<b>12.</b> If you selected "Admission with an Immigrant Visa at a Port of Entry," provide the information requested below. Port-of-Entry City or Town Port-of-Entry State Means of Transportation
<ul><li>11. Passport Number Used at Last Entry</li><li>12. Travel Document Number Used at Last Entry</li></ul>	<b>13.</b> If you selected "Adjustment of Status Granted by USCIS While in the United States," provide the USCIS Office location that granted your adjustment of status application below. USCIS Office Location
<ul> <li>13. Country of Issuance for Passport or Travel Document</li> <li>14. Expiration Date of This Passport or Travel</li> </ul>	<b>14.</b> If you selected "Adjustment of Status by Immigration Judge or Board of Immigration Appeals While inside the United States"

Document (mm/dd/yyyy)	provide the date your status was granted and the
Document (mm/dd/yyyy)	Date Adjustment of Status was Granted and the Location of Immigration Judge below.
[Page 3]	
<b>15.</b> Information About Your Departures From and Returns To the United States	Information About Your Last Arrival in the United States
Since being admitted as an LPR, you have departed from and returned to the United States as follows:	<b>15.</b> Passport or Travel Document Number
	<ol> <li>Country That Issued Your Passport or Travel Document</li> <li>Expiration Date for Your Passport or</li> </ol>
<b>Departed From The United States</b> [Table with three columns/three rows]	Travel Document (mm/dd/yyyy)
Place or Port-of-Departure Date of Departure (mm/dd/yyyy) Means of Transportation	<b>18.</b> Date of Your Last Arrival into United States, On or About (mm/dd/yyyy)
Returned To The United States [Table with	[Page 3]
three columns/three rows] Place or Port-of-Entry Date of Entry (mm/dd/yyyy) Means of Transportation	<b>Information</b> About Your <b>Travels</b> From and To the United States
Purpose of Trips [Fillable field]	Provide the information requested below about your travels from and to the United States since you were admitted as, or adjusted your status to,
	an LPR. If you need extra space to complete this section, use the space provided in <b>Part 12.</b> <b>Additional Information</b> .
	<b>19. Trip 1</b> City of Departure
	State of Departure Date of Departure (mm/dd/yyyy)
	Means of Transportation for Departure
	City of Arrival State of Arrival
	Date of Arrival (mm/dd/yyyy) Means of Transportation for Arrival
	Purpose of Trip Is this information approximate?
	Yes No
	20. Trip 2 City of Departure
	State of Departure
	Date of Departure (mm/dd/yyyy) Means of Transportation for Departure
	City of Arrival State of Arrival
	Date of Arrival (mm/dd/yyyy) Means of Transportation for Arrival
	Purpose of Trip Is this information approximate?
	Yes No
	21. Trip 3

		Cites of Demostered
		City of Departure
		State of Departure
		Date of Departure (mm/dd/yyyy)
		Means of Transportation for Departure
		City of Arrival
		State of Arrival
		Date of Arrival (mm/dd/yyyy)
		Means of Transportation for Arrival
		Purpose of Trip
		Is this information approximate?
		Yes
		No
Page 4, Part 2.	[Page 4]	[Page 4]
Biographic Information		
	Part 2. Biographic Information	Part 2. Biographic Information
	1. Ethnicity (Select only one box)	1. Ethnicity (Select only one box)
	Hispanic or Latino	Hispanic or Latino
	Not Hispanic or Latino	Not Hispanic or Latino
	1	1
	2. Race (Select all applicable boxes)	2. Race (Select all applicable boxes)
	White	American Indian or Alaska Native
	Asian	Asian
	Black or African American	Black or African American
	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander
	Native Hawaiian or Other Pacific Islander	White
	3. Height	3. Height
	Feet	Feet
	Inches	Inches
	menes	menes
	4. Weight	4. Weight
	Pounds	Pounds
	<b>5.</b> Eye Color (Select <b>only one</b> box)	<b>5.</b> Eye Color (Select <b>only one</b> box)
	Black	Black
	Blue	Blue
	Brown	Brown
	Gray	Gray
	Green	Green
	Hazel	Hazel
	Maroon	Maroon
	Pink	Pink
	Unknown/Other	Unknown/Other
	6. Hair Color (Select only one box)	6. Hair Color (Select only one box)
	Bald (No hair)	Bald (No hair)
	Black	Black
	Blond	Blond
	Brown	Brown
	Gray	Gray
	Red	Red
	Sandy	Sandy
	White	White
	Unknown/Other	Unknown/Other
Page 4-5, Part 3.	[Page 4]	[Page 4]
Information About Your	Dout 2 Information About Very Colors	Dout 2 Information About Very Chile 1
Criminal Convictions	Part 3. Information About Your Criminal	Part 3. Information About Your Criminal
	Convictions	Convictions

The information you provide below relates to the criminal convictions for which you are seeking relief under former section 212(c) of the Immigration and Nationality Act.	The information requested below relates to your criminal convictions for which you are seeking relief under former INA section 212(c).
1. Criminal Conviction 1	1. Conviction 1
A. Date (mm/dd/yyyy)	A. Date (mm/dd/yyyy)
<b>B.</b> Name of Court <b>C.</b> Location of Court Town or City State	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court</li> <li>State of Court</li> </ul>
<b>D.</b> Court Case Number	<b>D.</b> Court Case Number
<b>E.</b> Conviction Entered After Trial Based on Guilty or No Contest Plea	<b>E.</b> Conviction Entered After Trial Based on Guilty or No Contest Plea
If based on guilty or no contest plea, give the date of the guilty or no contest plea (mm/dd/yyyy)	If you selected "Based on Guilty or No Contest Plea," provide the date the plea was entered (mm/dd/yyyy).
<b>F.</b> Specific Offense as Stated in the Conviction Judgment (If there is more than one offense, provide the name of each specific offense.)	<b>F.</b> Specific Offense as Stated in the Judgment of Conviction [Fillable field]
[Fillable field]	<b>NOTE:</b> If the conviction is related to more than one offense, provide the name of each specific offense.
<b>G.</b> Citation to Federal, State, or Local Law, as Stated in the Conviction Judgment (If there is more than one citation, provide each separate	<b>G.</b> Citation to Federal, State, or Local Law, as Stated in the Judgment of Conviction [Fillable field]
citation.) [Fillable field]	<b>NOTE:</b> If the conviction is related to more than one citation, provide each separate citation.
H. Sentence, Probation, or Other Punishment Imposed	H. Sentence, Probation, or Other Punishment Imposed
	Imprisonment Served From (mm/dd/yyyy) Imprisonment Served To (mm/dd/yyyy)
[Page 5]	
2. Criminal Conviction 2	2. Conviction 2
A. Date (mm/dd/yyyy)	A. Date (mm/dd/yyyy)
<b>B.</b> Name of Court <b>C.</b> Location of Court Town or City State	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court</li> <li>State of Court</li> </ul>
<b>D.</b> Court Case Number	<b>D.</b> Court Case Number
<b>E.</b> Conviction Entered After Trial	<b>E.</b> Conviction Entered After Trial

Based on Guilty or No Contest Plea	Based on Guilty or No Contest Plea
If based on guilty or no contest plea, give the date of the guilty or no contest plea (mm/dd/yyyy)	If you selected "Based on Guilty or No Contest Plea," provide the date the plea was entered (mm/dd/yyyy).
	[Page 5]
<b>F.</b> Specific Offense as Stated in the Conviction Judgment (If there is more than one offense, provide the name of each specific offense.)	<b>F.</b> Specific Offense as Stated in the Judgment of Conviction [Fillable field]
	<b>NOTE:</b> If the conviction is related to more than one offense, provide the name of each specific offense.
<b>G.</b> Citation to Federal, State, or Local Law, as Stated in the Conviction Judgment (If there is more than one citation, provide each separate citation.)	<b>G.</b> Citation to Federal, State, or Local Law, as Stated in the Judgment of Conviction [Fillable field]
	<b>NOTE:</b> If the conviction is related to more than one citation, provide each separate citation.
<b>H.</b> Sentence, Probation, or Other Punishment Imposed	H. Sentence, Probation, or Other Punishment Imposed
	Imprisonment Served From (mm/dd/yyyy) Imprisonment Served To (mm/dd/yyyy)
3. Criminal Conviction 3	3. Conviction 3
A. Date (mm/dd/yyyy)	A. Date (mm/dd/yyyy)
<ul> <li>A. Date (mm/dd/yyyy)</li> <li>B. Name of Court</li> <li>C. Location of Court</li> <li>Town or City</li> <li>State</li> </ul>	<ul> <li>A. Date (mm/dd/yyyy)</li> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court State of Court</li> </ul>
<b>B.</b> Name of Court <b>C.</b> Location of Court Town or City	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court</li> </ul>
<b>B.</b> Name of Court <b>C.</b> Location of Court Town or City State	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court</li> <li>State of Court</li> </ul>
<ul> <li>B. Name of Court</li> <li>C. Location of Court</li> <li>Town or City</li> <li>State</li> <li>D. Court Case Number</li> <li>E. Conviction Entered</li> <li>After Trial</li> </ul>	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court State of Court</li> <li>D. Court Case Number</li> <li>E. Conviction Entered After Trial</li> </ul>
<ul> <li>B. Name of Court</li> <li>C. Location of Court</li> <li>Town or City</li> <li>State</li> <li>D. Court Case Number</li> <li>E. Conviction Entered</li> <li>After Trial</li> <li>Based on Guilty or No Contest Plea</li> <li>If based on guilty or no contest plea, give the date of the guilty or no contest plea</li> </ul>	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court State of Court</li> <li>D. Court Case Number</li> <li>E. Conviction Entered After Trial Based on Guilty or No Contest Plea</li> <li>If you selected "Based on Guilty or No Contest Plea," provide the date the plea was entered</li> </ul>
<ul> <li>B. Name of Court</li> <li>C. Location of Court</li> <li>Town or City</li> <li>State</li> <li>D. Court Case Number</li> <li>E. Conviction Entered</li> <li>After Trial</li> <li>Based on Guilty or No Contest Plea</li> <li>If based on guilty or no contest plea, give the date of the guilty or no contest plea (mm/dd/yyyy)</li> <li>F. Specific Offense as Stated in the Conviction Judgment (If there is more than one offense,</li> </ul>	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court</li> <li>State of Court</li> <li>D. Court Case Number</li> <li>E. Conviction Entered</li> <li>After Trial</li> <li>Based on Guilty or No Contest Plea</li> <li>If you selected "Based on Guilty or No Contest</li> <li>Plea," provide the date the plea was entered (mm/dd/yyyy).</li> <li>F. Specific Offense as Stated in the Judgment of Conviction</li> </ul>
<ul> <li>B. Name of Court</li> <li>C. Location of Court</li> <li>Town or City</li> <li>State</li> <li>D. Court Case Number</li> <li>E. Conviction Entered</li> <li>After Trial</li> <li>Based on Guilty or No Contest Plea</li> <li>If based on guilty or no contest plea, give the date of the guilty or no contest plea (mm/dd/yyyy)</li> <li>F. Specific Offense as Stated in the Conviction Judgment (If there is more than one offense,</li> </ul>	<ul> <li>B. Name of Court</li> <li>[Deleted]</li> <li>C. City or Town of Court State of Court</li> <li>D. Court Case Number</li> <li>E. Conviction Entered After Trial Based on Guilty or No Contest Plea</li> <li>If you selected "Based on Guilty or No Contest Plea," provide the date the plea was entered (mm/dd/yyyy).</li> <li>F. Specific Offense as Stated in the Judgment of Conviction [Fillable field]</li> <li>NOTE: If the conviction is related to more than one offense, provide the name of each</li> </ul>

		than one citation, provide each separate citation.
	H. Sentence, Probation, or Other Punishment Imposed	<b>H.</b> Sentence, Probation, or Other Punishment Imposed
		Imprisonment Served From (mm/dd/yyyy) Imprisonment Served To (mm/dd/yyyy)
	<b>NOTE:</b> If you were convicted more than three times, include the information for each additional conviction in <b>Part 12. Additional Information</b> .	<b>NOTE:</b> If you have more than three convictions (including conviction after trial, guilty pleas, and no contest pleas), use the space provided in <b>Part 12. Additional Information</b> to provide the requested information about each additional conviction.
Page 6-7, Part 4.	[Page 6]	[Page 5]
Information About Your Residence	Part 4. Information About Your Residence	Part 4. Information About Your Residences
	Provide the following information about where you have lived during the last seven years.	Provide the following information about where you have lived during the last seven years. List your most recent residence first and then every
	List your most recent residence first and then every other residence where you have lived during the last seven years. There should be no gaps in time. If you need extra space to complete this section, use the space provided in <b>Part 12. Additional Information</b> .	residence where you have lived during the last seven years. You should not have any gaps in time. If you need extra space to complete this section, use the space provided in <b>Part 12</b> . Additional Information.
	1. Physical Address 1	1. Physical Address 1
	In Care Of Name (if any)	[Deleted]
	Street Number and Name	Street Number and Name
	Apt./Ste./Flr. Number	Apt./Ste./Flr. Number
	City or Town	City or Town
	State	State
	ZIP Code	ZIP Code
	Province	Province
	Postal Code Country	Postal Code Country
	Date of Residence	[Deleted]
	From (mm/dd/yyyy)	Resided From (mm/dd/yyyy)
	To (mm/dd/yyyy)	Resided To (mm/dd/yyyy) [Page 6]
	2. Physical Address 2	2. Physical Address 2
	In Care Of Name (if any)	[Deleted] Street Number and Name
	Street Number and Name Apt./Ste./Flr.	Street Number and Name Apt./Ste./Flr.
	Number	Number
	City or Town	City or Town
	State	State
	ZIP Code	ZIP Code
	Province Postal Code	Province Postal Code
	Country	Country
	Date of Residence	[Deleted]
	From (mm/dd/yyyy)	Resided From (mm/dd/yyyy)

	To (mm/dd/yyyy)	Resided To (mm/dd/yyyy)
	3. Physical Address 3	3. Physical Address 3
	In Care Of Name (if any)	[Deleted]
	Street Number and Name	Street Number and Name
	Apt./Ste./Flr.	Apt./Ste./Flr.
	Number	Number
	City or Town	City or Town
	State	State
	ZIP Code	ZIP Code
	Province	Province
	Postal Code	Postal Code
	Country	Country
	Date of Residence	[Deleted]
	From (mm/dd/yyyy)	Resided From (mm/dd/yyyy)
	To (mm/dd/yyyy)	Resided To (mm/dd/yyyy)
	4. Physical Address 4	4. Physical Address 4
	In Care Of Name (if any)	[Deleted]
	Street Number and Name	Street Number and Name
	Apt./Ste./Flr.	Apt./Ste./Flr.
	Number	Number
	City or Town	City or Town
	State	State
	ZIP Code	ZIP Code
	Province	Province
	Postal Code	Postal Code
	Country	Country
	Date of Residence	[Deleted]
	From (mm/dd/yyyy)	Resided From (mm/dd/yyyy)
	To (mm/dd/yyyy)	Resided To (mm/dd/yyyy)
	[Page 7]	
	5. Physical Address 5	[Deleted]
	In Care Of Name (if any)	
	Street Number and Name	
	Apt./Ste./Flr.	
	Number	
	City or Town	
	State	
	ZIP Code	
	Province	
	Postal Code	
	Country	
	Date of Residence	
	From (mm/dd/yyyy)	
	To (mm/dd/yyyy)	
Page 7-8, Part 5.	[Page 7]	[Page 6]
Information About Your Employment	Part 5. Information About Your Employment	Part 5. Information About Your Employment
	Provide the following information about your employment.	Provide the following information about where you have worked full-time or part-time during the last seven years. List your most recent

List where you have worked full-time or part-	employer first and then list every other
time during the last seven years. If you need	employer where you worked at any time during
extra space to complete this section, use the	the last seven years. If you were unemployed,
space provided in Part 12. Additional	type or print "Unemployed" in the "Name of
Information.	Employer" field and provide applicable
Information.	
	information. If you need extra space to
	complete this section, use the space provided in
	Part 12. Additional Information.
1. Employer 1	1. Employer 1
Name of Employer	Name of Employer
Street Number and Name	Street Number and Name
Apt./Ste./Flr.	Apt./Ste./Flr.
Number	Number
City or Town	City or Town
State	State
ZIP Code	ZIP Code
Province	Province
Postal Code	Postal Code
Country	Country
Date	[Deleted]
From (mm/dd/yyyy)	Employed From (mm/dd/yyyy)
To (mm/dd/yyyy)	Employed To (mm/dd/yyyy)
	[Page 7]
Your Occupation	Your Occupation
2. Employer 2	2. Employer 2
Name of Employer	Name of Employer
Street Number and Name	Street Number and Name
Apt./Ste./Flr.	Apt./Ste./Flr.
Number	Number
City or Town	City or Town
State	State
ZIP Code	ZIP Code
Province	Province
Postal Code	Postal Code
Country	Country
Date	[Deleted]
From (mm/dd/yyyy)	Employed From (mm/dd/yyyy)
To (mm/dd/yyyy)	Employed To (mm/dd/yyyy)
Your Occupation	Your Occupation
[Page 8]	
3. Employer 3	3. Employer 3
Name of Employer	Name of Employer
Street Number and Name	Street Number and Name
Apt./Ste./Flr.	Apt./Ste./Flr.
Number	Number
City or Town	City or Town
State	State
ZIP Code	ZIP Code
Province	Province
Postal Code	Postal Code
Country	Country
10	

	Date From (mm/dd/yyyy) To (mm/dd/yyyy) Your Occupation	[Deleted] Employed From (mm/dd/yyyy) Employed To (mm/dd/yyyy) Your Occupation 4. Employer 4 Name of Employer Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country Employed From (mm/dd/yyyy)
		Employed To (mm/dd/yyyy) Your Occupation
Page 8-11, Part 6.	[Page 8]	[Page 7]
Information About Your Family	Part 6. Information About Your Family	Part 6. Information About Your Family
	Provide the following information about your family (for example, spouse, children, and parents). If you need extra space to complete this section, use the space provided in <b>Part 12.</b> Additional Information.	Provide the following information about your spouse, all children, and your parents. If you need extra space to complete this section, use the space provided in <b>Part 12. Additional Information</b> .
	A. Information About Your Spouse	[Deleted]
	Spouse's Current Legal Name Family Name (Last Name) Given Name (First Name) Middle Name	1. Spouse's Current Legal Name Family Name (Last Name) Given Name (First Name) Middle Name
		<ul> <li>Spouse's Other Information</li> <li>2. A-Number</li> <li>3. USCIS Online Account Number</li> <li>4. Spouse's Gender</li> <li>Male</li> <li>Female</li> </ul>
	Spouse's Country of Birth Spouse's Date of Birth (mm/dd/yyyy) Spouse's Country of Citizenship or Nationality	<ul><li><b>5.</b> Date of Birth (mm/dd/yyyy)</li><li>[Page 8]</li></ul>
	Spouse's Physical Address Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code	<ul> <li>6. Country of Birth</li> <li>7. Country of Citizenship or Nationality</li> <li>8. Spouse's Physical Address <ol> <li>Same as applicant's</li> <li>Street Number and Name</li> <li>Apt./Ste./Flr.</li> </ol> </li> <li>Number</li> <li>City or Town</li> </ul>

Country	State ZIP Code
	Province
	Postal Code Country
	Country
[Page 9]	
<b>B. Information About Your Children</b>	[Deleted]
Provide the following information about all of your children.	
Child 1	
Current Legal Name	9. Current Legal Name of Child 1
Family Name (Last Name) Given Name (First Name)	Family Name (Last Name) Given Name (First Name)
Middle Name	Middle Name
	Other Information for Child 1
	<ul><li>10. A-Number</li><li>11. USCIS Online Account Number</li></ul>
Country of Birth	<b>12.</b> Child's Gender
Date of Birth (mm/dd/yyyy)	Male
Country of Citizenship or Nationality	Female
Current Address	<b>13.</b> Date of Birth (mm/dd/yyyy)
Street Number and Name	14. Country of Birth
Apt./Ste./Flr. Number	<b>15.</b> Country of Citizenship or Nationality
City or Town	<b>16.</b> Physical Address of Child 1
State	[] Same as applicant's
ZIP Code	Street Number and Name
Province	Apt./Ste./Flr.
Postal Code	Number City or Tourn
Country	City or Town State
	ZIP Code
	Province
	Postal Code
	Country
Child 2	
Current Legal Name	<b>17.</b> Current Legal Name of Child 2
Family Name (Last Name) Given Name (First Name)	Family Name (Last Name)
Given Name (First Name) Middle Name	Family Name (Last Name) Given Name (First Name)
	Middle Name
	Other Information for Child 2
	<b>18.</b> A-Number
Country of Birth	<b>19.</b> USCIS Online Account Number
Date of Birth (mm/dd/yyyy)	<b>20.</b> Child's Gender
Country of Citizenship or Nationality	Male Female
Current Address	
Street Number and Name	<b>21.</b> Date of Birth (mm/dd/yyyy)
Apt./Ste./Flr.	22. Country of Birth
Number	23. Country of Citizenship or Nationality
City or Town	
State	<b>24.</b> Physical Address of Child 2

ZIP Code Province	[] Same as applicant's Street Number and Name
Postal Code	Apt./Ste./Flr.
	1
Country	Number
	City or Town
	State
	ZIP Code
	Province
	Postal Code
	Country
	country
[Page 10]	[Page 9]
Child 3	<b>25.</b> Current Legal Name of Child 3
Current Legal Name	
Family Name (Last Name)	Family Name (Last Name)
Given Name (First Name)	Given Name (First Name)
Middle Name	Middle Name
	Other Information for Child 3
	<b>26.</b> A-Number
	<b>27.</b> USCIS Online Account Number
Country of Pirth	
Country of Birth	<b>28.</b> Child's Gender
Date of Birth (mm/dd/yyyy)	Male
Country of Citizenship or Nationality	Female
C (A11	
Current Address	<b>29.</b> Date of Birth (mm/dd/yyyy)
Street Number and Name	<b>30.</b> Country of Birth
Apt./Ste./Flr.	<b>31.</b> Country of Citizenship or Nationality
Number	
City or Town	<b>32.</b> Physical Address of Child 3
State	[] Same as applicant's
ZIP Code	Street Number and Name
Province	
	Apt./Ste./Flr.
Postal Code	Number
Country	City or Town
	State
	ZIP Code
	Province
	Postal Code
	Country
Child 4	<b>33.</b> Current Legal Name of Child 4
Current Legal Name	
Family Name (Last Name)	Family Name (Last Name)
Given Name (First Name)	Given Name (First Name)
Middle Name	Middle Name
	<b>Other Information for Child 4</b>
	<b>34.</b> A-Number
	<b>35.</b> USCIS Online Account Number
Country of Birth	<b>36.</b> Child's Gender
Date of Birth (mm/dd/yyyy)	Male
	Female
Country of Citizenship or Nationality	
Current Address	<b>37.</b> Date of Birth (mm/dd/yyyy)
Street Number and Name	<b>38.</b> Country of Birth
Apt./Ste./Flr.	<b>39.</b> Country of Citizenship or Nationality
Number	er county of chalenship of futionality
City or Town	<b>40.</b> Physical Address of Child 4

State	[] Same as applicant's
ZIP Code	Street Number and Name
Province	Apt./Ste./Flr.
Postal Code	Number
Country	City or Town
	State
	ZIP Code
[Page 11]	Province
	Postal Code
	Postal Code
	Country
	country
C. Information About Your Parents	Information About Your Parents
	<b>41.</b> Current Legal Name of Parent 1
Parent 1	Ĩ
Parent 1's Current Legal Name	Family Name (Last Name)
Family Name (Last Name)	Given Name (First Name)
Given Name (First Name)	Middle Name
	whome manie
Middle Name	
	Other Information for Parent 1
	<b>42.</b> A-Number
	<b>43.</b> USCIS Online Account Number
	44. Gender
Sex	Male
Male	Female
Female	
Temate	
	<b>45.</b> Date of Birth (mm/dd/yyyy)
Parent 1's Date of Birth (mm/dd/yyyy)	<b>46.</b> Country of Birth
Parent 1's Country of Birth	
r archi r s Country or Dirti	
	[Page 10]
	[
Parent 1's Country of Citizenship or Nationality	<b>47.</b> Country of Citizenship or Nationality
Tarent T's Country of Chizenship of Nationality	<b>47.</b> Country of Childenship of Ivationality
D	40 DL
Parent 1's Physical Address	<b>48.</b> Physical Address of Parent 1
Street Number and Name	[] Same as applicant's
Apt./Ste./Flr.	Street Number and Name
Number	Apt./Ste./Flr.
City or Town	Number
State	City or Town
ZIP Code	State
Province	ZIP Code
Postal Code	Province
Country	Postal Code
Country	
	Country
Dowent 2	
Parent 2	
Parent 2's Current Legal Name	40 Current Logal Name of Depart 2
	<b>49.</b> Current Legal Name of Parent 2
Family Name (Last Name)	
Given Name (First Name)	Family Name (Last Name)
Middle Name	
Mildule Ivallie	Given Name (First Name)
	Middle Name
	Other Information for Descent 2
	<b>Other Information for Parent 2</b>
	<b>50.</b> A-Number
	<b>51.</b> USCIS Online Account Number
Sex	
Male	<b>52.</b> Gender
Female	Male

		Female
	Parent 2's Date of Birth (mm/dd/yyyy) Parent 2's Country of Birth Parent 2's Country of Citizenship or Nationality Parent 2's Physical Address Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code	Female <b>53.</b> Date of Birth (mm/dd/yyyy) <b>54.</b> Country of Birth <b>55.</b> Country of Citizenship or Nationality <b>56.</b> Physical Address of Parent 2 [] Same as applicant's Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code
Page 12, Part 7. Other	Country [Page 12]	Province Postal Code Country [Page 10]
Grounds for Removal		
	Part 7. Other Grounds for Removal	Part 7. Other Grounds for Removal
	If you need extra space to complete your statement, use the space provided in <b>Part 12. Additional Information</b> or attach a separate letter.	<b>NOTE:</b> If you need extra space to complete this section, use the space provided in <b>Part 12.</b> Additional Information.
	<ul> <li>If you believe you may be subject to removal on any grounds besides the criminal convictions listed in <b>Part 3. Information About Your Criminal Convictions</b>, provide a full explanation of why you may be subject to removal.</li> <li>The other grounds of removal may be any inadmissibility grounds in section 212(a) of the Immigration and Nationality Act or any deportability grounds in section 237(a) of the Immigration and Nationality Act.</li> </ul>	1. Provide an explanation in the space provided why you may be subject to removal on any grounds besides the criminal convictions listed in <b>Part 3. Information About Your Criminal</b> <b>Convictions</b> . The other grounds of removal may include any inadmissibility grounds in INA section 212(a) or any deportability grounds in INA section 237(a).
	miningration and reationality Act.	[Fillable field]
		[Page 11]
	If you have a criminal history besides the criminal convictions listed in <b>Part 3</b> . <b>Information About Your Criminal</b> <b>Convictions</b> , list these incidents and provide a full explanation. If you have ever been arrested or detained by any law enforcement officer for any reason, and no charges were filed, include an original official statement by the arresting or detaining agency or applicable court order confirming that no charges were filed. If you were arrested or detained by any law enforcement officer for any reason and charges	2. In addition to the criminal convictions listed in <b>Part 3.</b> , list and provide a full explanation of any other time you committed, or were accused of committing, a criminal offense inside or outside of the United States, as well as any other time you were arrested, cited, detained, charged, investigated, received deferred adjudication of guilt, withholding of adjudication of guilt, or pretrial diversion, or plead guilty to or were convicted of a criminal offense inside or outside of the United States. <b>NOTE:</b> If you were ever arrested, detained, or
	were filed, or if charges were filed against you without an arrest, submit an original or court- certified copy of the complete arrest record and/or disposition for each incident (for example, a dismissal order or an acquittal	investigated by any law enforcement officer for any reason, and no charges were filed, include an original official statement by the arresting or detaining agency or applicable court order confirming that no charges were filed. If you

	order).	were ever arrested, detained, or investigated by
	[Fillable field]	any law enforcement officer for any reason and charges were filed, or if charges were filed against you without an arrest, submit an original or court-certified copy of the complete arrest record and/or disposition for each incident (for example, a dismissal order or an acquittal order).
		[Fillable field]
Page 12, Part 8. Discretion	[Page 12]	[Page 11]
Discretion	Part 8. Discretion	Part 8. Discretion
	In the space provided below, explain why you believe your application should be approved as a matter of discretion, with the favorable factors outweighing the unfavorable factors in your case. For more information on discretion, see the application Instructions. If you need extra space to complete your statement, use the space provided in <b>Part 12. Additional Information</b> , or attach a separate letter. Indicate in the space provided if you are including a separate letter. If you submit a separate letter, you must submit the letter at the same time as your Form I-191 application.	<ol> <li>In the space provided below, explain why U.S. Citizenship and Immigration Services (USCIS) or the immigration judge should approve your Form I-191 as a matter of discretion, with the favorable factors outweighing the unfavorable factors in your case. For more information on discretion, see the Form I-191 Instructions. If you need extra space to complete your statement, use the space provided in Part 12. Additional Information.</li> <li>NOTE: You may provide your explanation on a separate sheet of paper. If you use a separate sheet, select the box below and include that sheet with your Form I-191. You must submit your explanation at the same time as your Form I-191.</li> <li>[Fillable field]</li> <li>[] I provided my explanation on a separate</li> </ol>
		sheet and included that sheet with this Form I- 191.
Page 13, Part 9.	[Page 13]	[Page 12]
Applicant's Statement, Contact Information, Certification, and	Part 9. Applicant's Statement, Contact Information, Certification, and Signature	Part 9. Applicant's Statement, Contact Information, Certification, and Signature
Signature	<b>NOTE:</b> Read the <b>Penalties</b> section of the Form I-191 Instructions before completing this part.	<b>NOTE:</b> Read the <b>Penalties</b> section of the Form I-191 Instructions before completing this section.
	Applicant's Statement	Applicant's Statement
	<b>NOTE:</b> Select the box for either <b>Item A.</b> or <b>B.</b> in <b>Item Number 1.</b> If applicable, select the box for <b>Item Number 2.</b>	<b>NOTE:</b> Select the box for either <b>Item Number</b> <b>A.</b> or <b>B.</b> in <b>Item Number 1.</b> If applicable, select the box for <b>Item Number 2.</b>
	<b>1.</b> Applicant's Statement Regarding the Interpreter	<b>1.</b> Applicant's Statement Regarding the Interpreter
	<b>A.</b> I can read and understand English, and I have read and understand every question and	<b>A.</b> I can read and understand English, and I have read and understand every question and

instruction on this application and my answer to every question.	instruction on this application and my answer to every question.
<b>B.</b> The interpreter named in <b>Part 10.</b> read to me every question and instruction on this application and my answer to every question, in [Fillable field], a language in which I am fluent and I understood everything.	<b>B.</b> The interpreter named in <b>Part 10.</b> read to me every question and instruction on this application and my answer to every question in [Fillable Field], a language in which I am fluent, and I understood everything.
<b>2.</b> Applicant's Statement Regarding the Preparer	2. Applicant's Statement Regarding the Preparer
At my request, the preparer named in <b>Part 11.</b> , [Fillable field], prepared this application for me based only upon information I provided or authorized.	At my request, the preparer named in <b>Part 11.</b> , [Fillable field], prepared this application for me based only upon information I provided or authorized.
<ul> <li>Applicant's Contact Information</li> <li>3. Applicant's Daytime Telephone Number</li> <li>4. Applicant's Mobile Telephone Number (if any)</li> <li>5. Applicant's Email Address (if any)</li> </ul>	<ul> <li>Applicant's Contact Information</li> <li>3. Applicant's Daytime Telephone Number</li> <li>4. Applicant's Mobile Telephone Number (if any)</li> <li>5. Applicant's Email Address</li> </ul>
Applicant's Certification	Applicant's Certification
Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.	Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that 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 further authorize release of information contained in this application, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.	I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.
I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:	I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:
<b>1</b> ) I reviewed and provided or authorized all of the information in my application;	1) I reviewed and provided or authorized all of the information in my application;
<b>2</b> ) I understood all of the information contained in, and submitted with, my application; and	<b>2</b> ) I understood all of the information contained in, and submitted with, my application; and
<b>3</b> ) All of this information was complete, true, and correct at the time of filing.	<b>3</b> ) All of this information was complete, true, and correct at the time of filing.
I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the	I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the
17	

	<ul> <li>information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.</li> <li><i>Applicant's Signature</i></li> <li><b>6.</b> Applicant's Signature Date of Signature (mm/dd/yyyy)</li> <li><b>NOTE TO ALL APPLICANTS:</b> If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS (or an immigration judge if you are in deportation, exclusion, or removal proceedings) may deny your application.</li> </ul>	<ul> <li>information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.</li> <li><i>Applicant's Signature</i></li> <li><b>6.</b> Applicant's Signature (mm/dd/yyyy)</li> <li><b>NOTE TO ALL APPLICANTS:</b> If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS or the immigration judge may deny your application.</li> </ul>
Page 14, Part 10. Interpreter's Contact	[Page 14]	[Page 13]
Information, Certification, and	Part 10. Interpreter's Contact Information, Certification, and Signature	Part 10. Interpreter's Contact Information, Certification, and Signature
Signature	Provide the following information about the interpreter.	If you used an interpreter (as indicated in Part 9. <b>Item B.</b> in <b>Item Number 1</b> .), you must provide the following information about the interpreter. The interpreter must sign the Interpreter's Certification below.
	<ul> <li>Interpreter's Full Name</li> <li>1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)</li> <li>2. Interpreter's Business or Organization Name (if any)</li> </ul>	<ul> <li>Interpreter's Full Name</li> <li>1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)</li> <li>2. Interpreter's Business or Organization Name (if any)</li> </ul>
	<i>Interpreter's Mailing Address</i> <b>3.</b> Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country	Interpreter's Mailing Address 3. Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country
	<ul> <li><i>Interpreter's Contact Information</i></li> <li>4. Interpreter's Daytime Telephone Number</li> <li>5. Interpreter's Mobile Telephone Number (if any)</li> <li>6. Interpreter's Email Address (if any)</li> </ul>	<ul> <li>Interpreter's Contact Information</li> <li>4. Interpreter's Daytime Telephone Number</li> <li>5. Interpreter's Mobile Telephone Number (if any)</li> <li>6. Interpreter's Email Address (if any)</li> <li>Interpreter's Certification</li> </ul>
	<ul> <li><i>Interpreter's Certification</i></li> <li>I certify, under penalty of perjury, that:</li> <li>I am fluent in English and [Fillable field], which is the same language specified in <b>Part 9.</b>,</li> <li><b>Item B.</b>, in <b>Item Number 1.</b>, and I have read to this applicant in the identified language every question and instruction on this application and</li> </ul>	I certify, under penalty of perjury, that: I am fluent in English and [Fillable Field], which is the same language specified in <b>Part 9.</b> , <b>Item B.</b> , in <b>Item Number 1.</b> , and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The
	Item B., in Item Number 1., and I have read to	this applicant in the identified language every

	applicant informed me that he or she understands every instruction, question, and answer on the application, including the <b>Applicant's Certification</b> , and has verified the accuracy of every answer. <i>Interpreter's Signature</i> <b>7.</b> Interpreter's Signature Date of Signature (mm/dd/yyyy)	understands every instruction, question, and answer on the application, including the <b>Applicant's Certification</b> , and has verified the accuracy of every answer. <i>Interpreter's Signature</i> <b>7.</b> Interpreter's Signature Date of Signature (mm/dd/yyyy)
Page 15, Part 11. Contact Information, Declaration, and Signature of the Person Preparing This Application, if Other Than the Applicant	[Page 15] Part 11. Contact Information, Declaration, and Signature of the Person Preparing This Application, if Other Than the Applicant Provide the following information about the preparer.	[Page 13] Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant Provide the following information about the preparer.
	<ul> <li>Preparer's Full Name</li> <li>1. Preparer's Family Name (Last Name) Preparer's Given Name (First Name)</li> <li>2. Preparer's Business or Organization Name (if any)</li> <li>Preparer's Mailing Address</li> <li>3. Street Number and Name Apt./Ste./Flr.</li> <li>Number</li> <li>City or Town</li> <li>State</li> <li>ZIP Code</li> <li>Province</li> <li>Postal Code</li> <li>Country</li> <li>Preparer's Contact Information</li> <li>4. Preparer's Daytime Telephone Number</li> <li>5. Preparer's Mobile Telephone Number (if any)</li> <li>6. Preparer's Email Address (if any)</li> </ul>	<ul> <li>Preparer's Full Name</li> <li>1. Preparer's Family Name (Last Name) Preparer's Given Name (First Name)</li> <li>2. Preparer's Business or Organization Name (if any)</li> <li>Preparer's Mailing Address</li> <li>3. Street Number and Name Apt./Ste./Flr. Number</li> <li>City or Town</li> <li>State</li> <li>ZIP Code</li> <li>Province</li> <li>Postal Code</li> <li>Country</li> <li>Preparer's Contact Information</li> <li>4. Preparer's Daytime Telephone Number</li> <li>5. Preparer's Mobile Telephone Number (if any)</li> <li>6. Preparer's Email Address (if any)</li> <li>[Page 14]</li> </ul>
	<ul> <li>Preparer's Statement</li> <li>7. A. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.</li> <li>B. I am an attorney or accredited representative and my representation of the applicant in this case extends/does not extend beyond the preparation of this application.</li> <li>NOTE: If you are an attorney or accredited representative, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.</li> </ul>	<ul> <li>Preparer's Statement</li> <li>7.A. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.</li> <li>B. I am an attorney or accredited representative and my representation of the applicant in this case extends/does not extend beyond the preparation of this application.</li> <li>NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.</li> </ul>

	<i>Preparer's Certification</i> By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the <b>Applicant's Certification</b> , and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use. <i>Preparer's Signature</i> <b>8.</b> Preparer's Signature Date of Signature (mm/dd/yyyy)	<ul> <li>Preparer's Certification</li> <li>By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the Applicant's Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.</li> <li>Preparer's Signature</li> <li>8. Preparer's Signature</li> <li>Date of Signature (mm/dd/yyyy)</li> </ul>
Page 16, Part 12.	[Page 16]	[Page 15]
Additional Information		
	Part 12. Additional Information	Part 12. Additional Information
	If you need extra space to provide any additional information within this application, 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 application 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 <b>Page</b> <b>Number</b> , <b>Part Number</b> , and <b>Item Number</b> to which your answer refers; and sign and date each sheet.	If you need extra space to provide any additional information within this application, 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 application or attach a separate sheet of paper. Type or print your name and A-Number at the top of each sheet; indicate the <b>Page Number</b> , <b>Part Number</b> , and <b>Item Number</b> to which your answer refers; and sign and date each sheet.
	1. Family Name (Last Name) Given Name (First Name) Middle Name	1. Family Name (Last Name) [Auto-populated field] Given Name (First Name) [Auto-populated field] Middle Name [Auto-populated field]
	2. A-Number (if any)	<b>2.</b> A-Number [Auto-populated field]
	<ul> <li>3. A. Page Number</li> <li>B. Part Number</li> <li>C. Item Number</li> <li>D. [Fillable field]</li> </ul>	<ul> <li>3.A. Page Number</li> <li>B. Part Number</li> <li>C. Item Number</li> <li>D. [Fillable field]</li> </ul>
	<b>4. A.</b> Page Number <b>B.</b> Part Number	<b>4.A.</b> Page Number <b>B.</b> Part Number
	C. Item Number	C. Item Number
	<b>D.</b> [Fillable field]	<b>D.</b> [Fillable field]
	<ul><li>5. A. Page Number</li><li>B. Part Number</li><li>C. Item Number</li><li>D. [Fillable field]</li></ul>	<ul><li>5.A. Page Number</li><li>B. Part Number</li><li>C. Item Number</li><li>D. [Fillable field]</li></ul>
	<ul><li>6. A. Page Number</li><li>B. Part Number</li><li>C. Item Number</li></ul>	<ul><li>6.A. Page Number</li><li>B. Part Number</li><li>C. Item Number</li></ul>

	<b>D.</b> [Fillable field]	D. [Fillable field]
		<ul> <li>7.A. Page Number</li> <li>B. Part Number</li> <li>C. Item Number</li> <li>D. [Fillable field]</li> <li>NOTE TO ALL APPLICANTS: Do not complete Part 13. USCIS will complete this section.</li> </ul>
Page 17, For USCIS Use	[Page 17]	[Page 16]
Only	For USCIS Use Only	<b>Part 13.</b> USCIS Decision (For Official Use Only)
	Decision	[Deleted]
	Application granted upon the following terms and conditions: [Fillable field]	1. This application is: Granted Denied
		<b>2.</b> Terms and Conditions [Fillable field]
	Date of Action (mm/dd/yyyy)	3. Date of Action (mm/dd/yyyy)