TABLE OF CHANGES – FORM

Form I-192, Application for Advance Permission to Enter as a Nonimmigrant OMB Number: 1615-0017 5/7/2018

Reason for Revision: Revision and change to 2 column format.

Current Page Number and Section	Current Text	Proposed Text
Page 1, For DHS Use	[Page 1]	[Page 1]
Only	FOR DHS USE ONLY Received Returned Trans.Out Fee Stamp Trans. In Completed	FOR DHS USE ONLY Received Returned Trans.Out Fee Stamp Trans. In Completed
	Action by the Department of Homeland Security	Action by the Department of Homeland Security
		Action Stamp
	☐ Granted, subject to revocation at any time, upon the following terms and conditions	Benefits Category: □ Nonimmigrant other than T or U nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.4 □ T Nonimmigrant/Advance Permission under INA 212(d)(3) and 8 CFR 212.16 □ T Nonimmigrant /Waiver under INA 212(d)(13) and 8 CFR 212.16 □ U Nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.17 □ U Nonimmigrant/Waiver under INA 212(d)(14) and 8 CFR 212.17 Ground of Inadmissibility □ INA 212(a)(1) □ INA 212(a)(2) □ INA 212(a)(3) □ INA 212(a)(6) □ INA 212(a)(6) □ INA 212(a)(9) □ INA 212(a)(10) □ Other: □ Granted, subject to revocation at any time, upon the following terms and conditions
	Date of Action (mm/dd/yyyy)	Date of Action (mm/dd/yyyy)
	DD or OIC Office	DD or OIC Office
Page 1, To be completed by an attorney or BIA-accredited	[page 1] To be completed by an attorney or BIA-accredited representative (if any).	[page 1] To be completed by an attorney or accredited representative (if any).

representative (if any).		
representative (if any).	Select this box if Form G-28 or Form G-28I is attached.	[no change]
	Volag Number	Volag Number (if any)
	Attorney State Bar Number (if applicable)	[no change]
	Attorney or Accredited Representative USCIS ELIS Online Number (if any)	Attorney or Accredited Representative USCIS Online Account Number (if any)
Page 1,	[page 1]	[page 1]
Part 1. Application Type	Part 1. Application Type	Part 1. Application Type
	I am applying to the Secretary of Homeland Security for permission to enter the United States temporarily under the provisions of section 212(d)(3)(A)(ii), section 212(d)(13), or section 212(d)(14) of the Immigration and Nationality Act (INA).	I am applying to the Secretary of Homeland Security for permission to enter the United States temporarily under the provisions of the Immigration and Nationality Act (INA) section 212(d)(3)(A)(ii), section 212(d)(13), or section 212(d)(14).
	I am seeking this permission so that I may obtain (Select only one box):	I am seeking this permission so that I may obtain (select only one box):
	1. A. Admission as a nonimmigrant (other than as a T or U nonimmigrant)	1. Admission as a nonimmigrant (other than as a T or U nonimmigrant).
	B. Status as a victim of trafficking (T nonimmigrant status) or a victim of a crime (U nonimmigrant status)	2. Status as a victim of trafficking (T nonimmigrant status) or a victim of a crime (U nonimmigrant status).
Pages 1-4,	[page 1]	[page 1]
Part 2. Information About You	Part 2. Information About You	Part 2. Information About You
	[new]	Your Full Name
	1. Family Name (Last Name) Given Name (First Name) Middle Name	 1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name
	[new]	Other Names Used (if any)
		Provide 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 8. Additional Information .
		2.a. Family Name (Last Name)2.b. Given Name (First Name)2.c. Middle Name
		[page 2]
		3.a. Family Name (Last Name)3.b. Given Name (First Name)3.c. Middle Name
		Other Information

- **2.** Alien Registration Number (A-Number) (if any)
- **3.** USCIS Online Account Number (if any)
- 4. Date of Birth (mm/dd/yyyy)

[new]

- **5.** Place of Birth City or Town State or Province Country
- **6.** Country of Citizenship of Nationality

[new]

F LICOIC Online Assessed Number (if ann)

4. Alien Registration Number (A-Number) (if

- **5.** USCIS Online Account Number (if any)
- 6. Date of Birth (mm/dd/yyyy)

7. Gender M/F

any)

Place of Birth

8.a. City or Town

8.b. State or Province

8.c. Country

9. Country of Citizenship or Nationality

Mailing Address

10.a. In Care Of Name (if any) **10.b.** Street Number and Name

10.c. Apt Ste Flr **10.d.** City or Town

10.e. State **10.f.** ZIP Code

10.g. Province

10.h. Postal Code

10.i. Country

Safe Mailing Address

If you are a T or U visa applicant, and do not want U.S. Citizenship and Immigration Services (USCIS) to send notices about this application to your home, you may provide a safe mailing address.

11.a. In Care Of Name (if any)

11.b. Organization name (if applicable)

11.c. Street Number and Name

11.d. Apt Ste Flr

11.e. City or Town

11.f. State

11.g. ZIP Code

11.h. Province

11.i. Postal Code

11.j. Country

[deleted]

7. Physical Address

Street Number and Name Apt. Ste. Flr. Number

City or Town

State ZIP Code Province

Postal Code

Country

[new]

Address History

8. Provide the addresses where you have resided during the past five years, starting with the last place you lived prior to your current physical address listed under **Item Number 7.** If you need extra space to complete this section, use the space provided in **Part 7.** Additional **Information**.

Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information**.

A. Residence Number 1

Date of Residence From (mm/dd/yyyy) To (mm/dd/yyyy)

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

Physical Address 1 (current address)

12.a. Street Number and Name **12.b.** Apt Ste Flr

12.c. City or Town **12.d.** State **12.e.** ZIP Code

12.e. ZIP Code
12.f. Province
12.g. Postal Code
12.h. Country

Dates of Residence

13.a. From (mm/dd/yyyy) **13.b.** To (mm/dd/yyyy) [Present]

[page 3]

B. Residence Number 2

Date of Residence From (mm/dd/yyyy) To (mm/dd/yyyy)

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

Physical Address 2

14.a. Street Number and Name

14.b. Apt Ste Flr14.c. City or Town14.d. State14.e. ZIP Code14.f. Province14.g. Postal Code

Dates of Residence

14.h. Country

15.a. From (mm/dd/yyyy) **15.b.** To (mm/dd/yyyy)

C. Residence Number 3

Date of Residence From (mm/dd/yyyy) To (mm/dd/yyyy)

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

Physical Address 3

16.a. Street Number and Name16.b. Apt Ste Flr16.c. City or Town16.d. State16.e. ZIP Code16.f. Province

Postal Code	16.g. Postal Code
Country	16.h. Country
	Dates of Residence
	17 - F (/11/
	17.a. From (mm/dd/yyyy)
	17.b. To (mm/dd/yyyy)
D. Residence Number 4	Physical Address 4
D. Residence Number 4	Thysical Address 4
Date of Residence From (mm/dd/yyyy)	
To (mm/dd/yyyy)	
Street Number and Name	18.a. Street Number and Name
Apt. Ste. Flr. Number	18.b. Apt Ste Flr
City or Town	18.c. City or Town
State	18.d. State
ZIP Code	18.e. ZIP Code
Province	18.f. Province
Postal Code	18.g. Postal Code
Country	18.h. Country
	·
	Dates of Residence
	19.a. From (mm/dd/yyyy)
	19.b. To (mm/dd/yyyy)
Travel Information	Travel Information
	NOTE: If you are applying for T or U
	nonimmigrant status and are in the United
	States, you may skip Item Numbers 20 25.
O I coation at which you plan to enter the	Location at Which you Plan to Enter the United
9. Location at which you plan to enter the United States (desired Port-of-Entry)	Location at Which you Plan to Enter the United States (desired Port-of-Entry)
City	20.a. City
State	20.b. State
State	20.D. State
10. Name of Port-of-Entry	21. Name of Port-of-Entry
100 Traine of Fore of Endry	21. I value of I of the Si Emily
11. How do you plan to travel to the United	22. How do you plan to travel to the United
States? (For example, by plane, ship, car)	States? (For example, by plane, ship, car)
F, -, F, 5	r, -, r, smp, sm,
12. When do you plan to enter the United	23. When do you plan to enter the United
States? (mm/dd/yyyy)	States (mm/dd/yyyy)?
13. Approximate Length of Stay in the United	24. Approximate Length of Stay in the United
States	States
14. What is the purpose of your stay in the	25. What is the purpose of your stay in the
United States? Explain fully below.	United States? Explain fully below.
	[page 4]
Immigration and Criminal History	Immigration and Criminal History
Immigration and Criminal History	immigration and Criminal History
15. Do you believe that you may be	26. Do you believe that you may be
inadmissible to the United States? Yes No	inadmissible to the United States? Yes No
madmissible to the officer states: 1 es 140	magnission to the Office States? Tes NO
If you answered "Yes," explain the reasons why	If you answered "Yes" to Item Number 26.,
you believe, according to the best of your	explain the reasons why you believe, according
Jour some to, according to the best of your	on plant the reasons will you defleve, according

knowledge, that you may be inadmissible in **Part 7. Additional Information**. If you were told that you are inadmissible, provide the reason you were given.

16. Have you previously filed an application for advance permission to enter the United States as a nonimmigrant? Yes No

If you answered "Yes," provide the details in **Items A. - C.** in **Item Number 17.** If you need extra space to complete this section, use the space provided in **Part 7. Additional Information**.

- **17. A.** Date Application Filed (mm/dd/yyyy)
- **B.** Location where you filed your application (For example, U.S. Citizenship and Immigration Services (USCIS) Office or Port-of-Entry)

USCIS Office or U.S. Port-of-Entry

City or Town

State or Province

Country

C. Receipt Number (if available)

NOTE: If you are an applicant for T nonimmigrant status or a petitioner for U nonimmigrant status, you do not need to answer Item Numbers 18. - 21.

18. Have you **EVER** been in the United States for a period of six months or more? Yes No

If you answered "Yes," provide the dates you were in the United States (from and to) and your immigration status at the time of entry into the United States in the space provided in **Part 7. Additional Information**.

19. Have you **EVER** filed an application or petition for immigration benefits with the U.S. Government, or has one ever been filed on your behalf? Yes No

If you answered "Yes" to **Item Number 19.** provide the information in the space provided in **Part 7. Additional Information**.

NOTE: If you (or somebody else on your behalf) have filed multiple applications or petitions for immigration benefits with the U.S. Government, use the space provided in **Part 7.** to also provide the following information:

to the best of your knowledge, that you may be inadmissible in **Part 8. Additional Information**. If you were told that you are inadmissible, provide the reason you were given.

27. Have you previously filed an application for advance permission to enter the United States as a nonimmigrant? Yes No

If you answered "Yes" to Item Number 27., provide the details in Item Numbers 28. - 29.e. If you need extra space to complete this section, use the space provided in Part 8. Additional Information.

28. Date Application Filed (mm/dd/yyyy)

Location where you filed your application (for example, USCIS Office or Port-of-Entry).

- **29.a.** USCIS Office or U.S. Port-of-Entry
- 29.b. City or Town
- **29.c.** State or Province
- **29.d.** Country
- **29.e.** Receipt Number (if available)

[delete]

30. Have you **EVER** been in the United States for a period of six months or more? Yes No

If you answered "Yes" to Item Number 30., provide the dates you were in the United States (from and to) and your immigration status at the time of entry into the United States in the space provided in Part 8. Additional Information.

31. Have you **EVER** filed an application or petition for immigration benefits with the U.S. Government, or has one ever been filed on your behalf? Yes No

If you answered "Yes" to **Item Number 31.**, provide the information requested in **Item Numbers 32.a. - 32.c.**

If you (or somebody else on your behalf) have filed multiple applications or petitions for immigration benefits with the U.S. Government, use the space provided in **Part 8. Additional**Information to provide the answers to Item

Numbers 32.a. - 32.c. for each of your additional applications or petitions.

B fi	A. Type of Application or petition filed;	22 - T C A 11 D 11
	3. Location where you (or the other person) iled the application or petition (for example, USCIS office or Port-of-Entry);	32.a. Type of Application or Petition Filed 32.b. Location Where You (or the Other Person) Filed the Application or Petition (for example, USCIS office or Port-of-Entry);
	C. Outcome of the application or petition (for example, approved, denied, or is pending)	32.c. Outcome of the Application or Petition (for example, approved, denied, or is pending).
ir h:	20. Have you EVER been denied or refused an immigration benefit by the U.S. Government, or and a benefit revoked or terminated (including but not limited to visas)? Yes No	33. Have you EVER been denied or refused an immigration benefit by the U.S. Government, or had a benefit revoked or terminated (including but not limited to visas)? Yes No
If pi	f you answered "Yes" to Item Number 20. , provide the information in the space provided in Part 7. Additional Information .	If you answered "Yes" to Item Number 33. , provide an explanation in the space provided in Part 8. Additional Information.
S fi	21. Have you EVER , in or outside the United States, been arrested, cited, charged, indicted, fined, convicted, or imprisoned for breaking or violating any law or ordinance, excluding minor raffic violations? If you answered "Yes,"	34. Have you EVER, in or outside the United States, been arrested, cited, charged, indicted, fined, convicted, or imprisoned for breaking or violating any law or ordinance, excluding minor traffic violations? Yes No
do o: ai	lescribe the incidents in detail and include all offenses where impaired driving may have been in issue in the space provided in Part 7 . Additional Information. Yes No	If you answered "Yes" to Item Number 34., describe the incidents in detail and include all offenses where impaired driving may have been an issue in the space provided in Part 8. Additional Information.
Page 4,	page 4]	[page 4]
Part 3. Biographic	Part 3. Biographic Information	Part 3. Biographic Information
	. Ethnicity (Select only one box)	[no change]
	Hispanic or Latino Not Hispanic or Latino	
2	2. Race (Select all applicable boxes)	2. Race (Select all applicable boxes)
	White Asian	American Indian or Alaska Native Asian
B	Black or African American American Indian or Alaska Native Native Hawaiian or Other Pacific Islander	Black or African American Native Hawaiian or Other Pacific Islander White
	3. Height	[no change]
3.	Peet	
F	nches	
F	nches I. Weight	
F Ir		
F Ir	I. Weight	[page 5]

Г	T	
	Black	
	Blue	
	Brown	
	Gray	
	Green	
	Hazel	
	Maroon	
	Pink	
	Unknown/Other	
	Chanown/ Other	
	6. Hair Color (Select only one box)	
	Dald (Na hain)	
	Bald (No hair)	
	Black	
	Blond	
	Brown	
	Gray	
	Red	
	Sandy	
	White	
	Unknown/Other	
	Child why Other	
New		[page 5]
	[new]	Part 4. Other Information About You
	[new]	Ture 4. Other information ribout rou
		Employment History
		Describe accompany to the form for the last
		Provide your employment history for the last
		five years, whether inside or outside the United
		States. Provide the most recent employment
		first. If you need extra space to complete this
		section, use the space provided in Part 8.
		Additional Information.
		Additional information.
		Employer 1 (current or most recent)
		1 N (F1 C
		1. Name of Employer or Company
		Address of Employer or Company
		radiess of Employer of Company
		2.a. Street Number and Name
		2.b. Apt Ste Flr
		2.c. City or Town
		2.d. State
		2.e. ZIP Code
		2.f. Province
		2.g. Postal Code
		2.h. Country
		2121 Country
		2.17
		3. Your Occupation
		Dates of Employment
		Dates of Employment
		4.a. From (mm/dd/yyyy)
		4.b. To (mm/dd/yyyy)
		7.0. 10 (IIIII/ dd/ yyyy)
		Employer 2
		5. Name of Employer or Company
	1	1 5. Iname of Employer of Company
		1 3 1 3
		1 3 1 3

Address of Employer or Company
6.a. Street Number and Name
6.b. Apt Ste Flr
6.c. City or Town
6.d. State
6.e. ZIP Code
6.f. Province
6.g. Postal Code
6.h. Country
7. Your Occupation
Dates of Employment
8.a. From (mm/dd/yyyy)
8.b. To (mm/dd/yyyy)
8.b. 10 (mm/dd/yyyy)
Information About Your Parents
Information About Your Mother
Mother's Legal Name
9.a. Family Name (Last Name)
9.b. Given Name (First Name)
9.c. Middle Name
Mother's Name at Birth (if different than above)
10 - Famil Name (Leaf Name)
10.a. Family Name (Last Name)
10.b. Given Name (First Name)
10.c. Middle Name
11. Date of Birth
12. City or Town of Birth
13. Country of Birth
[page 6]
14. Current City or Town of Residence (if living)
15. Current Country of Residence (if living)
Information About Your Father
Father's Legal Name
16.a. Family Name (Last Name)
16.b. Given Name (First Name)
16.c. Middle Name
Father's Name at Birth (if different than above)
17.a. Family Name (Last Name)
17.b. Given Name (First Name)
17.c. Middle Name

18. Date of Birth
19. City or Town of Birth
20. Country of Birth
21. Current City or Town of Residence (if living)
22. Current Country of Residence (if living)
Information About Your Marital History
23. What is your current marital status?
Single, Never Married Married Divorced Widowed Legally Separated Marriage Annulled Other
24. How many times have you been married (including annulled marriages and marriages to the same person)?
Information About Your Current Marriage (including if you are legally separated)
If you are currently married, provide the following information about your current spouse.
Current Spouse's Legal Name
25.a. Family Name (Last Name)25.b. Given Name (First Name)25.c. Middle Name
26. A-Number (if any)
27. Current Spouse's Date of Birth (mm/dd/yyyy)
28. Date of Marriage to Current Spouse (mm/dd/yyyy)
Current Spouse's Place of Birth
29.a. City or Town29.b. State or Province29.c. Country
Place of Marriage to Current Spouse
30.a. City or Town30.b. State or Province30.c. Country
[page 7]

		Information About Prior Marriages (if any)
		If you have been married before, whether in the United States or in any other country, provide the information requested in Item Numbers 31.a 36.c. about your prior marriage. If you have had more than one previous marriage, use the space provided in Part 8. Additional Information to provide the answers to Item Numbers 31.a 36.c. for each additional marriage.
		Prior Spouse's Legal Name (provide family name before marriage)
		31.a. Family Name (Last Name) 31.b. Given Name (First Name) 31.c. Middle Name
		32. Prior Spouse's Date of Birth (mm/dd/yyyy)
		33. Date of Marriage to Prior Spouse (mm/dd/yyyy)
		Place of Marriage to Prior Spouse
		34.a. City or Town 34.b. State or Province 34.c. Country
		35. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)
		Place Where Marriage with Prior Spouse Legally Ended
		36.a. City or Town 36.b. State or Province 36.c. Country
Page 5,	[page 5]	[page 7]
Part 4. Applicant's Statement, Contact Information, Contification and	Part 4. Applicant's Statement, Contact Information, Certification, and Signature	Part 5. Applicant's Statement, Contact Information, Declaration, Certification, and Signature
Certification, and Signature	NOTE: Read the information on penalties in the Penalties section of the Form I-192 Instructions before completing this part.	NOTE: Read the Penalties section of the Form I-192 Instructions before completing this section.
	[new]	Applicant's Statement
	NOTE : Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item Number 2.	NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.
	1. Applicant's Statement Regarding the Interpreter	[deleted]
	A. I can read and understand English, and have	1.a. I can read and understand English, and I

read and understand every question and instruction on this application and my answer to every question.

- **B.** The interpreter named in **Part 5.** 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.
- 2. Applicant's Statement Regarding the Preparer

At my request, the preparer named in **Part 6.**, [Fillable Field], prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

- 3. Applicant's Daytime Telephone Number
- **4.** Applicant's Mobile Telephone Number (if any)
- **5.** Applicant's Email Address (if any)

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.

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 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:

- 1) I reviewed and provided or authorized all of the information in my application;
- 2) I understood all of the information contained in, and submitted with, my application; and

have read and understand every question and instruction on this application and my answer to every question.

1.b. The interpreter named in **Part 6.** 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.

[deleted]

2. At my request, the preparer named in **Part 7.**, [Fillable Filed], prepared this application for me based only upon information I provided or authorized.

[no change]

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that the U.S.

Department of Homeland Security (DHS) may require that I submit original documents to DHS at a later date. Furthermore, I authorize the release of any information from any and all of my records that DHS may need to determine my eligibility for the immigration benefit that I seek.

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

[page 8]

I understand that DHS 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:

1) I reviewed and understood all of the information contained in, and submitted with, my application; and

[deleted]

	3) All of this information was complete true	<u> </u>
	3) All of this information was complete, true, and correct at the time of filing.	
		2) All of this information was complete, true,
	I certify, under penalty of perjury, that I	and correct at the time of filing.
	provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.	I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all
	Applicant's Signature	of this information is complete, true, and correct.
	6. Applicant's Signature Date of Signature (mm/dd/yyyy)	Applicant's Signature
	NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.	6.a. Applicant's Signature6.b. Date of Signature (mm/dd/yyyy)[no change]
D. C	[6]	1,, 01
Page 6, Part 5. Interpreter's	[page 6]	[page 8]
Contact Information, Certification, and	Part 5. Interpreter's Contact Information, Certification, and Signature	Part 6. Interpreter's Contact Information, Certification, and Signature
Signature	Provide the following information about the interpreter.	[no change]
	Interpreter's Full Name	Interpreter's Full Name
	1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First 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)	[no change]
	Interpreter's Mailing Address	Interpreter's Mailing Address
	3. Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country	 3.a. Street Number and Name 3.b. Apt./Ste./Flr. [fillable field] 3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country
	Interpreter's Contact Information	[no change]
	4. Interpreter's Daytime Telephone Number	
	5. Interpreter's Mobile Telephone Number (if any)	
	6. Interpreter's Email Address (if any)	
	Interpreter's Certification	

	I certify, under penalty of perjury, that:	
	I am fluent in English and [Fillable Field], which is the same language specified in Part 4. , Item B. in Item Number 1. , 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 applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Certification , and has verified the accuracy of every answer.	I am fluent in English and [Fillable Field], which is the same language specified in Part 5., 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 applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.
	Interpreter's Signature	Interpreter's Signature
	7. Interpreter's Signature Date of Signature (mm/dd/yyyy)	7.a. Interpreter's Signature7.b. Date of Signature (mm/dd/yyyy)
Page 7,	[page 7]	[page 9]
Part 6. Contact Information, Declaration, and Signature of the Person	Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant	Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant
Preparing this Application, if Other	Provide the following information about the preparer.	[no change]
Than the Applicant	Preparer's Full Name	Preparer's Full Name
	1. Preparer's Family Name (Last Name) Preparer's Given Name (First Name)	1.a. Preparer's Family Name (Last Name)1.b. Preparer's Given Name (First Name)
	2. Preparer's Business or Organization Name (if any)	[no change]
	Preparer's Mailing Address	Preparer's Mailing Address
	3. Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country	 3.a. Street Number and Name 3.b. Apt./Ste./Flr. [fillable field] 3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country
	Preparer's Contact Information	[no change]
	4. Preparer's Daytime Telephone Number	
	5. Preparer's Mobile Number (if any)	
	6. Preparer's Email Address (if any)	
	Preparer's Statement	Preparer's Statement
	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.	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.

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.

NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this application, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this application.

Preparer's Certification

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.

Preparer's Signature

8. Preparer's Signature Date of Signature (mm/dd/yyyy)

Part 7. Additional Information

If you need extra space to provide any additional information within this 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. Include your name and A-Number (if any) at the top of every sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.

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

2. A-Number (if any)

3. A. Page Number

B. Part Number

C. Item Number

7.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.

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, or Form G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this application.

Preparer's Certification

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 Declaration and 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.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy)

[page 10]

Part 8. 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 Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

[no change]

3.a. Page Number

3.b. Part Number

3.c. Item Number

[page 9]

Page 8.

Part 7. Additional

Information

D.		3.d. [Fillable field]
4. A. Page N	Number	4.a. Page Number
B. Part Nun		4.b. Part Number
C. Item Nui	mber	4.c. Item Number
D.		4.d. [Fillable field]
5. A. Page N	Number	5.a. Page Number
B. Part Nun		5.b. Part Number
C. Item Nur	mber	5.c. Item Number
D.		5.d. [Fillable field]
6. A. Page N	Number	6.a. Page Number
B. Part Nun		6.b. Part Number
C. Item Nui		6.c. Item Number
D.	moei	6.d. [Fillable field]
D.		v.u. [Pinable field]
		7.a. Page Number
		7.b. Part Number
		7.c. Item Number
		7.d. [Fillable field]]