

Application for Advance Processing of an Orphan Petition

USCIS Form I-600A

Expires 12/31/2018

Form I-600A OMB No. 1615-0028

Department of Homeland Security

U.S. Citizenship and Immigration Services

For USCIS Use Only

The applicant: WILL provide proper care to a child if admitted to the United States. WILL NOT provide proper care to a child if admitted to the United States. WILL NOT provide proper care to a child if admitted to the United States. WILL NOT provide proper care to a child if admitted to the United States. WILL NOT provide proper care to a child if admitted to the United States. Describe preadoption requirements (if any).	☐ WILL provide proper		☐ DOES NOT HAVE		The preadoption requirements:	Fee Stamp		
to the United States. WILL NOT provide proper care to a child if admitted to the United States. Received					☐ HAVE NOT			
Date of Favorable District		to the United States.	Describe preadoption	103.	File Number	DD	Remarks	
START HERE - Type or print legibly in black ink. This application is made by a prospective adoptive parent for advance processing of an orphan petition. Part 1. Information About You (Applicant) 1. Family Name (Last Name) Given Name (First Name) Given Name (First Name) Middle Name (if applicable) Samily Name (Last Name) Given Name (First Name) Middle Name (if applicable) Middle Name (if applicable) Street Number and Name Apt. Ste. Fir. Number City or Town State ZIP Code If you answered "No" to Item Number 4., provide your U.S. physical address in Item Number 5. or your address abroad in Ite Number 6., as appropriate. 5. U.S. Physical Address (if any) Street Number and Name Apt. Ste. Fir. Number		proper care to a child if admitted to the United	requirements (if any).			District		
Part 1. Information About You (Applicant) 1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) 2. Other Names You Have Used (including maiden name, nicknames, and aliases, if any) Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) 3. U.S. Mailing Address (if any) In Care Of Name Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code 4. Is your current U.S. mailing address the same as your U.S. physical address? Yes N If you answered "No" to Item Number 4., provide your U.S. physical address in Item Number 5. or your address abroad in Ite Number 6., as appropriate. 5. U.S. Physical Address (if any) Street Number and Name Apt. Ste. Flr. Number Apt. Ste. Flr. Number	R	eceived	Trans In		Completed			
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If you answered "No" to Item Number 4., provide your U.S. physical address in Item Number 5. or your address abroad in Item Number 6., as appropriate. 5. U.S. Physical Address (if any) Street Number and Name Apt. Ste. Flr. Number								
Number 6., as appropriate. 5. U.S. Physical Address (if any) Street Number and Name Apt. Ste. Flr. Number	4.	Is your current U.S. mailing	g address the same as your	U.S. _j	physical address?		Yes No	
Street Number and Name Apt. Ste. Flr. Number		•	- ·	ır U.S	S. physical address in I	tem Number 5.	or your address abroad in Item	
	5.	U.S. Physical Address (if a	nny)					
City or Town State ZIP Code		Street Number and Name				Apt. Ste. Flr.	Number	
City or Town State ZIP Code								
		City or Town				State	ZIP Code	

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9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship							
City or Town Province Postal Code Country 7. Date of Birth (mm/dd/yyyy) State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
Province Postal Code Country 7. Date of Birth (mm/dd/yyyy) 8. City/Town/Village of Birth 9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
Province Postal Code Country 7. Date of Birth (mm/dd/yyyy) 8. City/Town/Village of Birth 9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
Province Postal Code Country 7. Date of Birth (mm/dd/yyyy) 8. City/Town/Village of Birth 9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
7. Date of Birth (mm/dd/yyyy) 8. City/Town/Village of Birth 9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
7. Date of Birth (mm/dd/yyyy) 8. City/Town/Village of Birth 9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
9. State or Province of Birth 10. Country of Birth 11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
11. Information About U.S. Citizenship A. Are you a citizen of the United States?							
A. Are you a citizen of the United States?							
A. Are you a citizen of the United States?							
<u> </u>							
NOTE: If you answered "No." you may NOT file Form I-600A. See the What Are the Eligibility Requirem	Yes No						
of the Form I-600A instructions for more information.	ents? section						
B. How did you acquire your U.S. citizenship?							
C. If you acquired your citizenship through your parents, have you obtained a Certificate of Citizenship in your ow							
	Yes No						
If "Yes," provide the following information about your Certificate of Citizenship:							
Name Under Which the Certificate of Citizenship Was Issued							
Family Name (Last Name) Given Name (First Name) Middle Name	(if applicable)						
Alien Registration Number (A-Number) (if any) Certificate of Citizenship Number							
► A-							
Date of Issuance Place of Issuance							
(mm/dd/yyyy) ▶							
D. If you acquired your citizenship through naturalization, provide the following information about your Certificat Naturalization:	e of						
Name Under Which the Certificate of Naturalization Was Issued							
Family Name (Last Name) Given Name (First Name) Middle Name	(if applicable)						
	<u> </u>						
A-Number (if any) Certificate of Naturalization Number							
► A-							
Date of Naturalization Place of Naturalization							
(mm/dd/yyyy) ►							

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Pa	rt 1. Information About You (App	olicant) (continued)						
12.	Have you, or any person through whom you	u claimed citizenship, EVE l	R lost U.S. citiz	enship?	Yes No			
	NOTE: If you answered "Yes," attach a detailed explanation on 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.							
13.	What is your marital status? Married	d Widowed Div	orced Sir	ngle				
14.	How many times have you been married (in	ncluding your current marria	ige, if applicable	e)?				
15.	Date of Current Marriage (if applicable) (mm/dd/yyyy) ▶	16. Place Where Current M	Sarriage Occurre	ed (if applicable)				
17.	Information About Your Current Spouse (if Family Name (Last Name)	f applicable) Given Name (First Nar	me)	Middle Name	(if applicable)			
	Other Names Your Current Spouse Has Use Family Name (Last Name)	ed (including maiden name, Given Name (First Nar		•	(if applicable)			
		A-Number (if any) A-Cou	Cit	ty/Town/Village of Bi	irth			
	Spouse's Immigration Status							
18.	How many times has your current spouse b	een married (including your	current marriag	ge, if applicable)?				
19.	Does your current spouse reside with you? If you answered "No," provide your current		n Item Numbe i	r 20.	Yes No			
20.	Your Current Spouse's Physical Address Street Number and Name			Apt. Ste. Flr. Numb	er			
	City or Town			State ZIP C	ode			
	Province	Postal Code	Country					
21.	How many persons 18 years of age or older	•		•				
	If you answered "1" or more, you MUST confor each person.	omplete Form I-600A/I-600	Supplement 1,	Listing of Adult Men	nber of the Household,			

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Part	1. Information About You (Applicant) (continued)					
Re	we you ever previously filed Form I-600A, Form I-600, Petition to Classify Orphan as an Immediate lative, Form I-800A, Application for Determination of Suitability to Adopt a Child From a Convention puntry, or Form I-800, Petition to Classify Convention Adoptee as an Immediate Relative?					
If	"Yes," provide the following:					
A.	Type of Application/Petition Filed					
B. Result - Check the box that best describes the action taken by USCIS and/or U.S. Department of State on your applicational and/or petition.						
	☐ Approved - Approval Date (mm/dd/yyyy) ►					
	☐ Denied - Denial Date (mm/dd/yyyy) ►					
	NOTE: A copy of the denial notice must accompany this application.					
	Other - Explain					
C.	A detailed description of any previous Form I-600 or Form I-800 filing that resulted in a disruption prior to finalization of the adoption or that resulted in a completed adoption that was later dissolved either in the United States or abroad.					
NOTE: If you need extra space to complete this question, attach a separate sheet of paper; type or print your A-Number (at the top of each sheet; include the Page Number , Part Number , and Item Number to which your answer refers; and significant to the top of each sheet; include the Page Number , and Item Number to which your answer refers; and significant to the top of each sheet; include the Page Number , and Item Number to which your answer refers; and significant to the top of each sheet; include the Page Number , and Item Number to which your answer refers; and significant to the top of each sheet; include the Page Number , and Item Number to which your answer refers; and significant to the top of each sheet; include the Page Number , and Item Number to which your answer refers; and significant to the top of each sheet; include the Page Number , and Item Number to which your answer refers; and significant to the top of each sheet; include the Page Number , and Item Number to which your answer refers; and significant to the Page Number to the Page Numb						
	te each sheet.					
Duty	of Disclosure					
-600A of these ndictn circum statement other la lescrip ight of	d your spouse (if married), must answer the following questions. See the Duty of Disclosure section in the instructions to Form concerning your ongoing duty to disclose information in response to these questions. If you or your spouse answer "Yes" to any e questions, provide a certified copy of the documentation showing the final disposition of each incident which resulted in arrest, nent, conviction, and/or any other judicial or administrative action and a written statement giving details, including any mitigating stances about each arrest, signed by you and/or your spouse (if married) under penalty of perjury under U.S. law. The written ent must show the date of each incident; place incident occurred (city/town, state/province, country); name of police department or two enforcement administration or other entity involved; date of incarceration and name of facility, if applicable. Provide a tion of any type of counseling, rehabilitation, or other information that you and your spouse (if married) would like considered in this history on a separate sheet of paper; type or print your name and A-Number (if any) at the top of each sheet; indicate the Jumber, Part Number, and Item Number to which your answer refers; and sign and date each sheet.					
23. H	ave you EVER, whether in or outside the United States:					
A.	Been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations, but including driving or operating a vehicle while intoxicated or while impaired by or under the influence of alcohol or other intoxicant, even if the record of the arrest, conviction, or other adverse criminal history was expunged, sealed, pardoned, or the subject of any other amelioration?					
В.	Been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action?					
C.	Received a suspended sentence, been placed on probation or parole, or in an alternative sentencing or rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication, or expungement of a criminal charge?					

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Pa	rt 1	. Information About You (Applicant) (continued)				
	D.	At any time been the subject of any investigation by any child we authority in any state or foreign country concerning the abuse or investigation that has been completed and formally closed based abuse or neglect was unfounded or unsubstantiated?	neglect of any child, other than an	Yes	☐ No	
24.	24. Has your spouse EVER, whether in or outside the United States:					
	A. Been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations, but including driving or operating a vehicle while intoxicated or while impaired by or under the influence of alcohol or other intoxicant, even if the record of the arrest, conviction, or other adverse criminal history was expunged, sealed, pardoned, or the subject of any other amelioration?				☐ No	
	B.	Been the beneficiary of a pardon, amnesty, rehabilitation decree	, other act of clemency, or similar action?	Yes	☐ No	
	C.	Received a suspended sentence, been placed on probation or parehabilitation program, such as diversion, deferred prosecution expungement of a criminal charge?	•	Yes	☐ No	
	D.	At any time been the subject of any investigation by any child wauthority in any state or foreign country concerning the abuse or investigation that has been completed and formally closed based abuse or neglect was unfounded or unsubstantiated?	r neglect of any child, other than an	Yes	No	
Pa	rt 2	. Information About Your Home Study Preparer	and/or Adoption Service Provider	•		
1.	You	ir home study:				
	A.	☐ IS attached to this Form I-600A.				
	В.	☐ IS NOT attached to this Form I-600A because of state req appropriate state authority has indicated that it will submit Services (USCIS). (Do not submit your Form I-600A to Ustudy to USCIS.)	the home study directly to U.S. Citizenship	and Immi	gration	
	C.	Will be submitted within one year from the date of this Fo one year, your Form I-600A application will be denied und		received	within	
2.	Sele	ect one of the following options for which you will provide a na	me, address, and contact information in Item	n Numbe	3.:	
	A. The adoption service provider that is responsible for your home study (i.e., the accredited agency as defined in 22 CFR 96. that prepared your home study or reviewed and approved your home study after it was prepared by another authorized hom study preparer, or the public domestic authority, as defined in 22 CFR 96.2, that prepared your home study); or					
	B. The primary adoption service provider who is responsible in your case, if you have already identified a primary adoption service provider. (A primary adoption service provider is an accredited agency or approved person who is responsible under 22 CFR 96.14 for ensuring the six adoption services defined in 22 CFR 96.2 are provided, supervising and being responsible for supervised providers where used, and developing and implementing a service plan in accordance with 2 CFR 96.44.)					
3.	Pro	vide the name and contact information of your adoption service	provider.			
	A.	Name of Adoption Service Provider				
	В.	Point of Contact Within the Organization Family Name (Last Name)	Given Name (First Name)			

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Pa	irt 2	. Information About Your Home Study Preparer and/or Adopti	on Service Pr	ovider (continued)				
	C.	Provider's Mailing Address						
		Street Number and Name	Apt. Ste. Flr.	Number				
		City or Town	State	ZIP Code				
		Province Postal Code Country						
	D.	Provider's Daytime Telephone Number E. Provider's F	ax Number (if any	y)				
	F.	Provider's Email Address (if any)						
Pa	rt 3	3. General Information						
1.	Do	you or your spouse (if married) plan to travel abroad to locate or adopt a child?		Yes No				
2.	If y	ou answered "Yes" to Item Number 1., provide the following information (if avail	lable):					
	A.	Your intended departure date Your spouse's in	tended departure	date				
		(mm/dd/yyyy) ► (mm/dd/yyyy) ►						
	В.	Place to which you or your spouse (if married) are traveling						
		City or Town Province						
		Country						
3.		l you and your spouse (if married) adopt the child abroad after either you or your seepersonally seen and observed the child?	spouse (if married	Yes No				
4.	Pro	vide a written description of the pre-adoption requirements, if any, of the state of t	he child's propose	ed residence if you know				
	that	the child will be adopted in the United States. Cite any relevant state statutes and	regulations, and	describe the steps you have				
		lready taken or will take to comply with these requirements. Note and explain any pre-adoption requirements that you cannot neet at this time due to operation of state law.						
		•						
	NO	TE: If you need extra space to complete this Item Number , attach a separate she	et of naner: type (or print your name and				
	Alie	en Registration Number (A-Number) (if any) at the top of each sheet; indicate the						
	Nu	mber to which your answer refers; and sign and date each sheet.						
5.	Wh	at is the intended country of adoption (if known)?						

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Pa	rt 3. (General Information (continued)	
6.	Where	e do you wish to file your orphan petition? (Complete one of the options below)	
	A. Th	he USCIS office located at:	
	OR		
	B. Th	he U.S. Embassy or U.S. Consulate located at:	
7.	Do you	u plan to adopt more than one child?	es No
8.	If you a	answered "Yes" to Item Number 7. , enter the number of children you plan to adopt.	
P	ort 4 - A	Accommodations for Individuals With Disabilities and/or Impairments	
_		_	
1.	·		es No
2.		answered "Yes" to Item Number 1. , select all applicable boxes below to indicate who has the disabilities and/or in pplicant Spouse Other Household Member	impairments.
3.		answered "Yes" to Item Number 1. , select all applicable boxes below. Provide information for each person we lities and/or impairments.	ith the
	A.	Deaf or hard of hearing and request the following accommodations (If requesting a sign-language interpreted which language (e.g., American Sign Language):	r, indicate for
	В. 🗌	Blind or have low vision and request the following accommodations:	
	С. 🗌	Another type of disability and/or impairment. (Describe the nature of the disability and/or impairment and acceyou are requesting):	ommodation
		Applicant's Statement, ASC Acknowledgement (if applicable), Certification, Signature, Information	, and
A_{I}	pplican	nt's Statement	
Sel	ect the b	box for either Item Number 1.A. or 1.B. If applicable, select the box for Item Number 2.	
1.A	a	I can read and understand English, and have read and understand each and every question and instruction on the application, as well as my answer to each question. I have read and understand the Acknowledgement of App USCIS Application Support Center (if applicable).	
1.E	в. 🗌 Т	The interpreter named in Part 9. has read to me each and every question and instruction on this application, as	well as my
		answer to each question, in , a language in which	
	р. А	I understand each and every question and instruction on this application as translated to me by my interpreter, a provided complete, true, and correct responses. The interpreter named in Part 9. also has read the Acknowled Appointment at USCIS Application Support Center (if applicable) to me, in the language in which I am flue understand this ASC Acknowledgement as read to me by my interpreter.	gement of

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	ort 5. Applicant's Statement, ASC Acknowledgement (if applicable), Certification, Signature, and ontact Information (continued)
2.	☐ I have requested the services of and consented to
Ac	knowledgement of Appointment at USCIS Application Support Center (if applicable)
I,	,
and/ und	erstand that the purpose of a USCIS Application Support Center (ASC) appointment is for me to provide my fingerprints, photograph, /or signature and to reverify that all of the information in my application is complete, true, and correct and was provided by me. I lerstand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, tograph, and/or signature during my ASC appointment:
	By signing here, I declare under penalty of perjury that I have reviewed and understand this application as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with this application that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.
that all s appl	so understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be reverifying I willingly submit this application; I have reviewed the contents of this application; all of the information in this application and supporting documents submitted with my application are complete, true, and correct; and if I was assisted in completing this lication, the person assisting me also reviewed this Acknowledgement of Appointment at USCIS Application Support Center applicable) with me.
Ap	oplicant's Certification
	ortify, under penalty of perjury under the laws of the United States of America, that the information in this application and any ument submitted with this application is complete, true, and correct.
requ	bies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may unre that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from my ords that USCIS may need to determine my suitability and eligibility as an adoptive parent.
	rthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to er entities and persons where necessary for the administration of U.S. immigration laws.
Ap	pplicant's Signature
3.	Applicant's Signature Date of Signature
→	(mm/dd/yyyy) ►
Ap	oplicant's Contact Information
4.	Applicant's Daytime Telephone Number 5. Applicant's Mobile Telephone Number (if any)
6.	Applicant's Email Address (if any)

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G 400 40 T	1 1 1 1 1	1	c .:		. 1 1 11 11 11		1
as described in the	anderstand the ongoing Form I-600A and/or am required to disclo	r Form I-600 instruc					s an adoptive parent, nd USCIS of any new
Applicant's Signa	ture				Date of Signat	ure	
					(mm/dd/yyyy)	•	
Part 7. Spous Contact Infor	se's Statement, A mation	SC Acknowledg	gement (if app	olicable), Cert	ification, Si	gna	ture, and
Spouse's State	ment						
Select the box for	either Item Number	1.A. or 1.B. If app	licable, select the	box for Item Nu	mber 2.		
well as	ad and understand En my answer to each qu ntion Support Cente	iestion. I have read a		• •			n on this application, ant at USCIS
1.B. The int	erpreter named in Pa	rt 9. has read to me	each and every q	uestion and instru	action on this a	pplic	cation, as well as my
answer	to each question, in				, a lang	guage	e in which I am fluent
provide Appoi i	stand each and every d complete, true, and atment at USCIS Ap and this ASC Ackno	correct responses. Oplication Support	The interpreter n C enter (if applic	amed in Part 9. a able) to me, in the	lso has read th	e Ac	knowledgement of
2.	equested the services	s of and consented to					
in prep	is not an atto aring this application (if applicable) with i	has reviewed the Ac	cknowledgemen	t of Appointmen			erson who assisted me ation Support
Acknowledger	nent of Appointm	ent at USCIS A _l	oplication Sup	port Center (į	f applicable _.)	
[,							,
				•	-	•	ngerprints, photograph provided by me or my

By signing here, I declare under penalty of perjury that I have reviewed and understand this application as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with this application that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be reverifying that I willingly submit this application; I have reviewed the contents of this application; all of the information in this application and all supporting documents submitted with my application are complete, true, and correct; and if I was assisted in completing this application, the person assisting me also reviewed this **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable) with me.

Spouse's Certification

I certify, under penalty of perjury under the laws of the United States of America, that the information in this application and any document submitted with this application is complete, true, and correct.

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Part 7. Spouse's Statement, ASC Acknowledgement (if applicable), Certification, Signature, and Contact Information (continued)

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 my records that USCIS may need to determine my suitability and eligibility as an adoptive parent.

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 of U.S. immigration laws.

Sp	pouse's Signature			
3.	Spouse's Signature			Date of Signature
				(mm/dd/yyyy) ►
Sn	pouse's Contact Information			
	•	_		
4.	Spouse's Daytime Telephone Number		. Sp	Spouse's Mobile Telephone Number (if any)
6.	Spouse's Email Address (if any)			
0.	Spouse's Email Address (If any)			
Pa	art 8. Spouse's Duty of Disclosure			
as o				ncerning my suitability and eligibility as an adoptive parent, gree to notify the home study preparer and USCIS of any new
Spo	ouse's Signature			Date of Signature
				(mm/dd/yyyy) ►
Pa	art 9. Interpreter's Name, Contact Information	on, Certi	fica	ication, and Signature
	you and/or your spouse (if married) used an interpreter to relowing information:	ead and co	mpl	nplete this application, the interpreter must provide the
In	nterpreter's Full Name			
1.	Interpreter's Family Name (Last Name)	Iı	nter	terpreter's Given Name (First Name)
2.	Interpreter's Business or Organization Name (if any)			
In	nterpreter's Mailing Address			
3.	Street Number and Name			Apt. Ste. Flr. Number
	City or Town			State ZIP Code
	Province Postal Code	<u> </u>		Country

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Pa	Part 9. Interpreter's Name, Contact Information, Certification, and Signate	ure (continued)
In	Interpreter's Contact Information	
4.	4. Interpreter's Daytime Telephone Number 5. Interpreter's Email Add	ress (if any)
In	Interpreter's Certification	
	I certify that:	
	I am fluent in English and	
	I have read and accurately translated to this applicant and/or the applicant's spouse (if married) evapplication, as well as the answer to each question, in the language in which he and/or she is flue	• •
	I have read and accurately translated the Acknowledgement of Appointment at USCIS Applic applicable) to the applicant and/or the applicant's spouse, in the language in which he and/or she	
	The applicant and/or the applicant's spouse has informed me that he and/or she understands every application, as well as the answer to each question.	instruction and question on the
by a	The applicant and/or the applicant's spouse also has informed me that he and/or she understands to by appearing for a USCIS ASC biometric services appointment and providing his and/or her fing signature, he and/or she will be reaffirming that the contents of this application and all supporting and correct.	erprints, photograph, and/or
In	Interpreter's Signature	
6.		ate of Signature
	(m	m/dd/yyyy) ►
	Part 10. Name, Contact Information, Statement, Certification, and Signatu this Application, If Other Than the Applicant and/or Spouse	re of the Person Preparing
If y	If you and/or your spouse (if married) used a preparer to complete this application, the preparer must	st provide the following information:
Pr	Preparer's Full Name	
1.	1. Preparer's Family Name (Last Name) Preparer's Given Name	(First Name)
2.	2. Preparer's Business or Organization Name (if any)	
Pr	Preparer's Mailing Address	
3.	3. Street Number and Name Apt. Ste	e. Flr. Number
	City or Town State	ZIP Code
	Province Postal Code Country	

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	Part 10. Name, Contact Information, Statement, Certification, and Signature of the Person Preparing this Application, If Other Than the Applicant and/or Spouse (continued)					
Pro	eparer's Contact Information					
4.	Preparer's Daytime Telephone Number 5. Preparer's Fax N	umber (if any)				
_						
6.	Preparer's Email Address (if any)					
Pro	eparer's Statement					
7.A.	I am not an attorney or accredited representative but have prepared this applicant applicant's spouse (if married) and with the applicant's and/or the applicant's sp	11				
7.B.	I am an attorney or accredited representative and my representation of the application this case (choose one) extends does not extend beyond the preparation					
Pro	eparer's Certification					
with the a the a appl it or appl	my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this applicant the express consent of the applicant and/or the applicant's spouse (if married). I comple applicant and/or the applicant's spouse provided to me. After completing the application applicant's spouse's responses with the applicant and/or the applicant's spouse, who agreed it that applicant and/or applicant's spouse supplied additional information concent the application. I also have read the Acknowledgement of Appointment at USCIS Acknowledgement to the applicant and/or the applicant's spouse and the applicant and/or the applicant an	eted this application based only on responses, I reviewed it and all of the applicant's and/or ed with each and every answer on the rning a question on the application, I recorded pplication Support Center (ASC) (if				
Pro	eparer's Signature					
8.	Preparer's Signature	Date of Signature				
		(<i>mm/dd/yyyy</i>) ▶				

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