



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

**USCIS**  
**Form I-485**  
OMB No. 1615-0023  
Expires 10/31/2027

<b>Preference Category:</b>		<b>Receipt</b>		<b>Action Block</b>
<b>Country Chargeable:</b>				
<b>Priority Date:</b>				
<b>Date Form I-693 Signed By Civil Surgeon:</b>				
<input type="checkbox"/> Applicant Interviewed <input type="checkbox"/> Interview Waived Date of Initial Interview: _____ Lawful Permanent Resident as of: _____		<b>Section of Law</b> <input type="checkbox"/> INA 209(a) <input type="checkbox"/> INA 245(m) <input type="checkbox"/> INA 209(b) <input type="checkbox"/> INA 249 <input type="checkbox"/> INA 245(a) <input type="checkbox"/> Sec. 13, Act of 9/11/57 <input type="checkbox"/> INA 245(i) <input type="checkbox"/> Cuban Adjustment Act <input type="checkbox"/> INA 245(j) <input type="checkbox"/> Other _____		

<input type="checkbox"/> <b>Select this box if Form G-28 is attached.</b>	<b>Volag Number</b> (if any) <div></div>	<b>Attorney State Bar Number</b> (if applicable) <div></div>	<b>Attorney or Accredited Representative USCIS Online Account Number</b> (if any) <div></div>
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A-Number ► A-

For all sections of this application, if you need to provide any additional information or are instructed to provide an explanation, use the space provided in **Part 14. Additional Information.**


**Part 1. Information About You** (Person applying for lawful permanent residence) (continued)

4. Do you have an Alien Registration Number (A-Number)? ☐ Yes ☐ No

If you answered "Yes," provide your A-Number.

A-Number (if any) ► A-

5. Have you ever used, or been assigned, any other A-Number? ☐ Yes ☐ No

If you answered "Yes," provide the A-Numbers.

6. Gender ☐ Male ☐ Female ☐ Another Gender Identity

7. Place of Birth

City or Town of Birth

Country of Birth

8. Country of Citizenship or Nationality

9. USCIS Online Account Number (if any)



If one has been assigned, you can find it on a notice that USCIS may have sent to you.

10. Recent Immigration History

If you last entered the United States using a passport or travel document, provide the following information.

Passport or Travel Document Number Used at Last Arrival

Expiration Date of this Passport or Travel Document (mm/dd/yyyy)

Country that Issued this Passport or Travel Document

Nonimmigrant Visa Number Used During Most Recent Arrival (if any)

Date Nonimmigrant Visa Was Issued (mm/dd/yyyy)

Place and Date of Last Arrival into the United States

City or Town

State

Date of Last Arrival (mm/dd/yyyy)

11. When I last arrived in the United States:

- ☐ I was inspected at a Port of Entry and admitted as (for example, exchange visitor, visitor, temporary worker, student):

- ☐ I was inspected at a Port of Entry and paroled as (for example, humanitarian parole, Cuban parole):

- ☐ I came into the United States without admission or parole.

- ☐ Other:

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**Part 1. Information About You** (Person applying for lawful permanent residence) (continued)

12. If you were issued a Form I-94 Arrival/Departure Record, provide the information from your most recent Form I-94 below:

Family Name (Last Name)

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Given Name (First Name)

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Form I-94 Arrival/Departure Record Number ►

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Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)  
or Type or Print "D/S" for Duration of Status

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Immigration Status on Form I-94 (for example, class of admission,  
or paroled, if paroled)

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13. Was your last arrival the first time you were physically present in the United States? ☐ Yes ☐ No

14. What is your current immigration status (if it has changed since your last arrival)?

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15. Expiration Date of Current Immigration Status (mm/dd/yyyy) or Type or  
Print "D/S" for Duration of Status

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16. Have you ever been issued an "alien crewman" visa? ☐ Yes ☐ No

17. Did you last arrive in the United States to join a vessel as a seaman or crewman, or while serving in any  
capacity aboard a vessel or aircraft? ☐ Yes ☐ No

18. Addresses

**Current U.S. Physical Address**

In Care Of Name (if any)

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Street Number and Name

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Apt. Ste. Flr. Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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City or Town

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State

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ZIP Code

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date You First Resided at This Address (mm/dd/yyyy)

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Is this your current mailing address?

☐ Yes ☐ No

If you answered "No," provide your current mailing address.

**Current Mailing Address (Safe or Alternate Mailing Address, if applicable)**

In Care Of Name (if any)

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Street Number and Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Apt. Ste. Flr. Number

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City or Town

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State

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ZIP Code

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**Part 1. Information About You** (Person applying for lawful permanent residence) (continued)

Have you resided at your current address for at least 5 years?

☐ Yes ☐ NoIf you answered "No," provide your prior address(es) for the last 5 years. Use the space provided in **Part 14. Additional Information**, if necessary.**Prior Address**

In Care Of Name (if any)

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Street Number and Name

--

Apt. Ste. Flr. Number

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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--

City or Town

--

State

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ZIP Code

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Province

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Postal Code

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Country

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Dates of Residence

From (mm/dd/yyyy)

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To (mm/dd/yyyy)

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**Most Recent Address Outside the United States**

Provide your most recent physical address outside the United States where you lived for more than one year (if not already listed above).

Street Number and Name

--

Apt. Ste. Flr. Number

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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--

City or Town

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State

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ZIP Code

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Province

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Postal Code

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Country

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Dates of Residence

From (mm/dd/yyyy)

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To (mm/dd/yyyy)

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**19. Social Security Card**

Has the Social Security Administration (SSA) ever officially issued a Social Security card to you?

☐ Yes ☐ No

If you answered "Yes," provide your U.S. Social Security Number (SSN). ►

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Do you want the SSA to issue you a Social Security card?

☐ Yes ☐ NoIf you answered "Yes," you must also answer "Yes" to the **Consent for Disclosure** below.**Consent for Disclosure:** I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security Card.☐ Yes ☐ No

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**Part 2. Application Type or Filing Category**

1. Are you filing for adjustment of status with the Executive Office for Immigration Review (EOIR) while ☐ Yes ☐ No in removal, exclusion, rescission, or deportation proceedings?

2. Receipt Number of Underlying Petition (if any)  Priority Date from Underlying Petition (if any)   
(mm/dd/yyyy)

I am filing this Form I-485 as a (select **only one** box):

- ☐ Principal Applicant  
☐ Derivative Applicant (Provide the following information about the principal applicant.)

Principal Applicant's Name

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Principal Applicant's A-Number (if any)

► A- 

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Principal Applicant's Date of Birth

(mm/dd/yyyy)

**I am applying** based on the following category (You must select **ONLY ONE** category. If you are filing as a derivative applicant, select the appropriate box based on the category under which the principal applicant is applying or has applied. See the Form I-485 Instructions for more information, including any **Additional Instructions** that relate to the immigrant category you select.):

**3.a. Family-based**

Immediate relative of a U.S. citizen, Form I-130, I-129F, or I-360 (select your specific category below):

- ☐ Spouse of a U.S. Citizen.  
☐ Unmarried child under 21 years of age of a U.S. citizen.  
☐ Parent of a U.S. citizen (if the citizen is at least 21 years of age).  
☐ Person admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen (K-1/K-2 Nonimmigrant).  
☐ Widow or widower of a U.S. citizen.  
☐ Spouse, child, or parent of a deceased U.S. active-duty service member in the armed forces under the National Defense Authorization Act (NDAA).

Other relative of a U.S. citizen under the family-based preference categories, Form I-130 (select your specific category below):

- ☐ Unmarried son or daughter of a U.S. citizen and I am 21 years of age or older.  
☐ Married son or daughter of a U.S. citizen.  
☐ Brother or sister of a U.S. citizen (if the citizen is at least 21 years of age).

Relative of a lawful permanent resident under the family-based preference categories, Form I-130 (select your specific category below):

- ☐ Spouse of a lawful permanent resident.  
☐ Unmarried child under 21 years of age of a lawful permanent resident.  
☐ Unmarried son or daughter of a lawful permanent resident and I am 21 years of age or older.

VAWA self-petitioner (victim of battery or extreme cruelty), Form I-360 (select your specific category below):

- ☐ VAWA self-petitioning spouse of a U.S. citizen or lawful permanent resident.  
☐ VAWA self-petitioning child of a U.S. citizen or lawful permanent resident.  
☐ VAWA self-petitioning parent of a U.S. citizen (if the citizen is at least 21 years of age).

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**Part 2. Application Type or Filing Category (continued)****3.b. Employment-based**

☐ Alien Investor, Form I-526 or Form I-526E

Alien Workers, Form I-140 (select your category below and answer the following questions below, as applicable):

☐ Alien of Extraordinary Ability

☐ Outstanding Professor or Researcher

☐ Multinational Executive or Manager

☐ Member of the Professions Holding an Advanced Degree or Alien of Exceptional Ability (who is NOT seeking a National Interest Waiver)

☐ A Professional (at a minimum, requiring a bachelor's degree or a foreign degree equivalent to a U.S. bachelor's degree)

☐ A Skilled Worker (requiring at least 2 years of specialized training or experience)

☐ Any Other Worker (requiring less than 2 years of training or experience)

☐ An Alien Applying For a National Interest Waiver (who IS a member of the professions holding an advanced degree or an alien of exceptional ability)

Did a relative file the associated Form I-140 for you (or for the principal applicant if you are a derivative applicant) or does a relative have a significant ownership interest (5 percent or more) in the business that filed Form I-140 for you (or for the principal applicant, if you are a derivative applicant)?

☐ N/A (I am adjusting on the basis of a Form I-140 self-petition)

☐ No

☐ Yes

If you answered "Yes," is this relative your (select **only one** box):

☐ Father ☐ Mother ☐ Child ☐ Adult Son ☐ Adult Daughter ☐ Brother ☐ Sister

☐ None of These

Is the relative above a:

☐ U.S. Citizen ☐ U.S. National ☐ Lawful Permanent Resident ☐ None of These

**3.c. Special Immigrant**

☐ Special Immigrant Juvenile, Form I-360

☐ Certain Afghan or Iraqi National, Form I-360 or Form DS-157

☐ Certain International Broadcaster, Form I-360

☐ Certain G-4 International Organization or Family Member or NATO-6 Employee or Family Member, Form I-360

☐ Certain U.S. Armed Forces Members (also known as the Six and Six program), Form I-360

☐ Panama Canal Zone Employees, Form I-360

☐ Certain Physicians, Form I-360

☐ Certain Employee or Former Employee of the U.S. Government Abroad, DS-1884

Religious Worker, Form I-360 (select your specific category below):

☐ Minister of Religion

☐ Other Religious Worker

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**Part 2. Application Type or Filing Category (continued)****3.d. Asylee or Refugee**

- ☐ Asylum Status (Immigration and Nationality Act (INA) section 208), Form I-589 or Form I-730

If you selected asylum, date you were granted asylum (mm/dd/yyyy).

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- ☐ Refugee Status (INA section 207), Form I-590 or Form I-730

If you selected refugee, date of initial admission as refugee (mm/dd/yyyy).

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**3.e. Human Trafficking Victim or Crime Victim**

- ☐ Human Trafficking Victim (T Nonimmigrant), Form I-914 or Derivative Family Member, Form I-914A
- ☐ Victim of Qualifying Criminal Activity (U Nonimmigrant), Form I-918, Derivative Family Member, Form I-918A, or Qualifying Family Member, Form I-929

**3.f. Special Programs Based on Certain Public Laws**

- ☐ The Cuban Adjustment Act
- ☐ A Victim of Battery or Extreme Cruelty as a Spouse or Child Under the Cuban Adjustment Act
- ☐ Applicant Adjusting Based on Dependent Status Under the Haitian Refugee Immigrant Fairness Act
- ☐ A Victim of Battery or Extreme Cruelty as a Spouse or Child Applying Based on Dependent Status Under the Haitian Refugee Immigrant Fairness Act
- ☐ Lautenberg Parolees
- ☐ Diplomats or High-Ranking Officials Unable to Return Home (Section 13 of the Act of September 11, 1957)
- ☐ Nationals of Vietnam, Cambodia, and Laos Applying for Adjustment of Status Under section 586 of Public Law 106-429
- ☐ Applicant Adjusting Under the Amerasian Act (October 22, 1982), Form I-360

**3.g. Additional Options**

- ☐ Diversity Visa program

If you selected Diversity Visa program, provide your Diversity Visa Rank Number:

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- ☐ Continuous Residence in the United States Since Before January 1, 1972 ("Registry")
- ☐ Individual Born in the United States Under Diplomatic Status
- ☐ S Nonimmigrants and Qualifying Family Members (can only adjust in this category with an approved Form I-854B filed by a law enforcement officer)
- ☐ Other Eligibility

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4. If you selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category listed above in **Item Numbers 3.a. - 3.g.** as the basis for your application for adjustment of status, are you applying for adjustment based on INA section 245(i)? ☐ Yes ☐ No
5. Are you 21 years of age or older and applying for adjustment based on classification as a child, under the provisions of the Child Status Protection Act (CSPA)? ☐ Yes ☐ No

**NOTE:** For more information to determine if you are eligible under CSPA, see the **Who May File Form I-485** section of these Instructions.

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**Part 3. Request for Exemption for Intending Immigrant's Affidavit of Support Under Section 213A of the INA**

I am requesting an exemption from submitting an Affidavit of Support Under Section 213A of the INA (Form I-864 or Form I-864EZ) because (select **only one**):

- 1.a. ☐ I have earned or can receive credit for 40 qualifying quarters (credits) of work in the United States (as defined by the Social Security Act (SSA)). (Attach your SSA earnings statements. Do not count any quarters during which you received a means-tested public benefit.)
- 1.b. ☐ I am under 18 years of age, unmarried, the child of a U.S. citizen, am not likely to become a public charge, and will automatically become a U.S. citizen under INA section 320, upon my admission as a lawful permanent resident.
- 1.c. ☐ I am applying under the widow or widower of a U.S. citizen (Form I-360) immigrant category.
- 1.d. ☐ I am applying as a VAWA self-petitioner.
- 1.e. ☐ None of these exemptions apply to me and I am not required by statute to submit an Affidavit of Support Under Section 213A of the INA, nor am I required to request an exemption.
- 1.f. ☐ None of these exemptions apply to me and I am not requesting an exemption as I am required to submit an Affidavit of Support Under Section 213A of the INA.

**Part 4. Additional Information About You**

1. Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S. Consulate abroad? ☐ Yes ☐ No

If you answered "Yes," complete **Item Numbers 2. - 4.** below.

2. Location of U.S. Embassy or U.S. Consulate

City or Town

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Country

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3. Decision (for example, approved, refused, denied, withdrawn)

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4. Date of Decision (mm/dd/yyyy)

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5. Have you previously applied for permanent residence while in the United States?

☐ Yes ☐ No

6. Have you **EVER** held lawful permanent resident status which was later rescinded under INA section 246?

☐ Yes ☐ No

**Employment and Educational History**

7. Provide **ALL** of your employment and educational history for the last 5 years as indicated in the Instructions. Provide your current employment or school attended first. Include periods of self-employment, unemployment, or retirement. For each period of unemployment or retirement, list source of financial support. If you have additional employment or educational history, use the space provided in **Part 14. Additional Information**.

Employer or School (current or most recent)

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Name of Employer, Company, or School

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Your Occupation (if unemployed or retired, so state)

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**Part 4. Additional Information About You (continued)**

Address of Employer, Company, or School

Street Number and Name

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Apt. Ste. Flr. Number

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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City or Town

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State

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ZIP Code

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Province

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Postal Code

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Country

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Dates of Employment, Unemployment, Retirement, or School Attendance

From (mm/dd/yyyy)

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To (mm/dd/yyyy)

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If unemployed or retired, source of financial support:

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8. Provide your most recent employer or school outside of the United States (if not already listed above).

Name of Employer, Company, or School

--

Your Occupation (if unemployed or retired, so state)

--

Address of Employer, Company, or School

Street Number and Name

--

Apt. Ste. Flr. Number

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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City or Town

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State

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ZIP Code

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Province

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Postal Code

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Country

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Dates of Employment, Unemployment, Retirement, or School Attendance

From (mm/dd/yyyy)

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To (mm/dd/yyyy)

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If unemployed or retired, source of financial support:

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**Part 5. Information About Your Parents****Information About Your Parent 1**

1. Parent 1's Legal Name

Family Name (Last Name)

--

Given Name (First Name)

--

Middle Name (if applicable)

--

2. Parent 1's Name at Birth (if different than above)

Family Name (Last Name)

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Given Name (First Name)

--

Middle Name (if applicable)

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

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**Part 5. Information About Your Parents (continued)**

4. Country of Birth

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**Information About Your Parent 2**

5. Parent 2's Legal Name

Family Name (Last Name)

--

Given Name (First Name)

--

Middle Name (if applicable)

--

6. Parent 2's Name at Birth (if different than above)

Family Name (Last Name)

--

Given Name (First Name)

--

Middle Name (if applicable)

--

7. Date of Birth (mm/dd/yyyy)

--

8. Country of Birth

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**Part 6. Information About Your Marital History**

1. What is your current marital status?

☐ Single, Never Married ☐ Married ☐ Divorced ☐ Widowed ☐ Marriage Annulled ☐ Legally Separated

2. If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?
- ☐
- N/A
- ☐
- Yes
- ☐
- No

3. How many times have you been married (including your current marriage, marriages abroad, annulled marriages, and marriages to the same person)?

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**Information About Your Current Marriage (including if you are legally separated)**

4. Current Spouse's Legal Name

Family Name (Last Name)

--

Given Name (First Name)

--

Middle Name (if applicable)

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5. Current Spouse's A-Number (if any)

► A-

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6. Current Spouse's Date of Birth

(mm/dd/yyyy)

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7. Current Spouse's Country of Birth

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8. Current Spouse's Current Physical Address

Street Number and Name

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Apt. Ste. Flr. Number

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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City or Town

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State

ZIP Code

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Province

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Postal Code

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Country

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**Part 6. Information About Your Marital History (continued)****9. Place of Marriage to Current Spouse**

City or Town

State or Province

Country

Date of Marriage to Current Spouse (mm/dd/yyyy)

**10. Is your current spouse applying with you?**☐ Yes ☐ No**Information About Prior Marriages (if any)****11. Prior Spouse's Legal Name (provide family name before marriage)**

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

**12. Prior Spouse's Date of Birth (mm/dd/yyyy)****13. Prior Spouse's Country of Birth****14. Prior Spouse's Country of Citizenship or Nationality****15. Date of Marriage to Prior Spouse's (mm/dd/yyyy)****16. Place of Marriage to Prior Spouse**

City or Town

State or Province

Country

**17. Place Where Marriage with Prior Spouse Legally Ended**

City or Town

State or Province

Country

Date of Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)

**18. How Marriage Ended with Prior Spouse (select one):**☐ Annulled ☐ Divorced ☐ Spouse Deceased ☐ Other (Explain):

**Part 7. Information About Your Children**

1. Indicate the total number of ALL living children anywhere in the world (including adult sons and daughters) that you have.

**NOTE:** The term "children" includes all biological or legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other countries, married or unmarried, living with you or elsewhere and includes any missing children and those born to you outside of marriage.

Provide the following information for each of your children. If you have more than two children, use the space provided in **Part 14. Additional Information.**

2. Child 1

Current Legal Name

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

A-Number (if any) ► A-

Date of Birth (mm/dd/yyyy)

Country of Birth

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

Is this child also applying now on a separate Form I-485?

☐ Yes ☐ No

3. Child 2

Current Legal Name

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

A-Number (if any) ► A-

Date of Birth (mm/dd/yyyy)

Country of Birth

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

Is this child also applying now on a separate Form I-485?

☐ Yes ☐ No

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**Part 8. Biographic Information****1. Ethnicity (Select **only one** box)**☐ Hispanic or Latino ☐ Not Hispanic or Latino**2. Race (Select **all applicable** boxes)**☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American☐ Native Hawaiian or Other Pacific Islander ☐ White**3. Height** Feet  Inches  **4. Weight** Pounds   **5. Eye Color (Select **only one** box)**☐ Black ☐ Blue ☐ Brown ☐ Gray ☐ Green ☐ Hazel ☐ Maroon ☐ Pink ☐ Unknown/Other**6. Hair Color (Select **only one** box)**☐ Bald (No hair) ☐ Black ☐ Blond ☐ Brown ☐ Gray ☐ Red ☐ Sandy ☐ White ☐ Unknown/Other**Part 9. General Eligibility and Inadmissibility Grounds**

Choose the answer that you think is correct in **Part 9**. If you answer "Yes" to any questions (**or if you answer "No," but are unsure of your answer**), provide an explanation of the events and circumstances in the space provided in **Part 14. Additional Information**.

- 1.** Have you **EVER** been a member of, involved in, or in any way associated with any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world? ☐ Yes ☐ No

If you answered "Yes" to **Item Number 1.**, complete **Item Numbers 2. - 9.** If you were a member of more than two organizations, use the space provided in **Part 14. Additional Information**.

*Organization 1***2. Name of Organization****3. City or Town****State or Province****Country****4. Nature of Organization, including its purposes and activities, whether illicit or legitimate.**

Nature of involvement in organization, including role or positions(s) held, whether illicit or legitimate.

**5. Dates of Membership or Dates of Involvement**

From (mm/dd/yyyy)  To (mm/dd/yyyy)

*Organization 2***6. Name of Organization**

**Part 9. General Eligibility and Inadmissibility Grounds (continued)**

7. City or Town  State or Province   
Country
8. Nature of Organization, including its purposes and activities, whether illicit or legitimate.  
  
Nature of involvement in organization, including role or positions(s) held, whether illicit or legitimate.
9. Dates of Membership or Dates of Involvement  
From (mm/dd/yyyy)  To (mm/dd/yyyy)
10. Have you **EVER** been denied admission to the United States? ☐ Yes ☐ No
11. Have you **EVER** been denied a visa to the United States? ☐ Yes ☐ No
12. Have you **EVER** worked in the United States without authorization? ☐ Yes ☐ No
13. Have you **EVER** violated the terms or conditions of your nonimmigrant status? ☐ Yes ☐ No
14. Are you presently or have you **EVER** been in removal, exclusion, rescission, or deportation proceedings, including expedited removal proceedings? ☐ Yes ☐ No
15. Have you **EVER** been issued a final order of exclusion, deportation, or removal? ☐ Yes ☐ No
16. Have you **EVER** had a prior final order of exclusion, deportation, or removal reinstated? ☐ Yes ☐ No
17. Have you **EVER** been granted voluntary departure by an immigration officer or an immigration judge but failed to depart within the allotted time? ☐ Yes ☐ No
18. Have you **EVER** applied for any kind of relief or protection from removal, exclusion, or deportation? ☐ Yes ☐ No
19. Have you **EVER** been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement? ☐ Yes ☐ No
20. If you answered "Yes" to **Item Number 19.**, have you complied with the foreign residence requirement? ☐ Yes ☐ No
21. If you answered "Yes" to **Item Number 19.** and "No" to **Item Number 20.**, have you been granted a waiver or has Department of State issued a favorable waiver recommendation letter for you? ☐ Yes ☐ No

**Criminal Acts and Violations**

For **Item Numbers 22. - 41.**, you must answer "Yes" to any question that applies to you, even if your records were sealed or otherwise cleared, or even if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. You must also answer "Yes" to the following questions whether the action or offense occurred here in the United States or anywhere else in the world. If you answer "Yes" to **Item Numbers 22. - 41.**, use the space provided in **Part 14. Additional Information** to provide an explanation for each offense, if applicable, that includes a description of the criminal offense; where the criminal offense occurred; when the criminal offense occurred; whether you were arrested, cited, charged, or detained for the criminal offense you committed; and the outcome or disposition of that criminal offense (for example, convicted, placement in a diversion program, no charges filed, charges dismissed, jail, prison, detention, probation, or community service). Your explanation must include the duration of any sentence to confinement (even if suspended).

22. Have you **EVER** been arrested, cited, charged, or permitted to participate in a diversion program (including ☐ Yes ☐ No pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication), or detained for any reason by any law enforcement official in any country including but not limited to any U.S. immigration official or any official of the U.S. armed forces or U.S. Coast Guard or by a similar official of a country other than the United States?

## Part 9. General Eligibility and Inadmissibility Grounds (continued)

- |       |   |                              |                             |
|-------|---|------------------------------|-----------------------------|
| 23.   | Have you <b>EVER</b> committed a crime of any kind (even if you were not arrested, cited, charged with, or tried for that crime, or convicted)?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 24.   | Have you <b>EVER</b> pled guilty to or been convicted of a crime or offense (even if the violation was subsequently expunged or sealed by a court, or if you were granted a pardon, amnesty, a rehabilitation decree, or other act of clemency)?<br><b>NOTE:</b> If you were the beneficiary of a pardon, amnesty, a rehabilitation decree, or other act of clemency, provide documentation of that post-conviction action. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 25.   | Have you <b>EVER</b> been ordered punished by a judge or had conditions imposed on you that restrained your liberty (such as a prison sentence, suspended sentence, house arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or community service)?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 26.   | Have you <b>EVER</b> violated (or attempted or conspired to violate) any controlled substance law or regulation of a state, the United States, or a foreign country?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 27.   | Have you <b>EVER</b> trafficked in or benefited from, or knowingly aided, abetted, assisted, conspired or colluded in the illegal trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 28.   | Are you the spouse, son, or daughter of a foreign national who illicitly trafficked or aided (or otherwise abetted, assisted, conspired, or colluded) in the illicit trafficking of a controlled substance, such as chemicals, illegal drugs, or narcotics and you obtained, within the last 5 years, any financial or other benefit from this activity of your spouse or parent?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 29.   | If your answer to <b>Item Number 28.</b> is "Yes," did you know or should you have reasonably known that the financial or other benefit you obtained resulted from this activity of your spouse or parent?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 30.   | Have you <b>EVER</b> engaged in prostitution or are you coming to the United States to engage in prostitution?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 31.   | Have you <b>EVER</b> directly or indirectly procured or attempted to procure, or imported prostitutes or persons for the purpose of prostitution?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 32.   | Have you <b>EVER</b> received any proceeds or money from prostitution?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 33.   | Do you intend to engage in illegal gambling or any other form of commercialized vice, such as prostitution, bootlegging, or the sale of child pornography, while in the United States?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 34.   | Have you <b>EVER</b> exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 35.a. | Have you <b>EVER</b> served as a foreign government official?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 35.b. | If your answer to <b>Item Number 35.a.</b> is "Yes," have you <b>EVER</b> been responsible for, enforced, or directly carried out violations of religious freedoms?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 36.   | Have you <b>EVER</b> induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of another person for commercial sex acts (sex trafficking)?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**NOTE:** Sex trafficking involves inducing or causing an adult to engage in a commercial sex act (any sex act performed for anything of value) through fraud, force, or coercion, or inducing or causing any person under 18 years of age to engage in a commercial sex act (even without force, fraud, or coercion). Sex trafficking may include recruiting, enticing, harboring, transporting, providing, obtaining, advertising, maintaining, patronizing, or soliciting by any means a person to engage in the commercial sex act knowing (or, in the case of advertising, with reckless disregard of the fact) that the person is under 18 years of age or that force, fraud, or coercion was used to induce or cause the person to engage in the commercial sex act. Sex trafficking may also include knowingly benefiting financially or by receiving anything of value, from participation in a venture involving sex trafficking.

37. Have you **EVER** trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? ☐ Yes ☐ No  
Trafficking includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion.

## Part 9. General Eligibility and Inadmissibility Grounds (continued)

- 38.** Have you **EVER** knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking in persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery? ☐ Yes ☐ No
- 39.** Are you the spouse, son, or daughter of a foreign national who engaged in the trafficking in persons and have received or obtained, within the last 5 years, any financial or other benefits from this activity of your spouse or your parent? ☐ Yes ☐ No
- 40.** If your answer is "Yes" to **Item Number 39.**, did you know or reasonably should have known that this benefit resulted from this activity of your spouse or parent? ☐ Yes ☐ No
- 41.** Have you **EVER** engaged in money laundering or have you **EVER** knowingly aided, assisted, abetted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity? ☐ Yes ☐ No

## Security and Related

Do you intend to:

- 42.a.** Engage in any activity that violates or evades any law relating to espionage (including spying) or sabotage in the United States? ☐ Yes ☐ No
- 42.b.** Engage in any activity in the United States that violates or evades any law prohibiting the export from the United States of goods, technology, or sensitive information? ☐ Yes ☐ No
- 42.c.** Engage in any activity whose purpose includes opposing, controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States? ☐ Yes ☐ No
- 42.d.** Engage in any other unlawful activity? ☐ Yes ☐ No

Have you **EVER**:

- |              |  |                          |     |                          |    |
|--------------|--|--------------------------|-----|--------------------------|----|
| <b>43.a.</b> | Received any weapons training, paramilitary training, or other military-type training?   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.b.</b> | Committed kidnapping, assassination, or hijacking or sabotage of a conveyance (including an aircraft, vessel, vehicle, or train)?  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.c.</b> | Used a weapon or explosive or any dangerous device with the intent to endanger the safety of another person or people or cause damage to property?   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.d.</b> | Threatened, attempted, conspired, prepared, or planned to do any of the things described in <b>Item Numbers 43.b. - 43.c.</b> ?  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.e.</b> | Incited, under circumstances indicating an intention to cause death or serious bodily harm/injury, any of the activities described in <b>Item Numbers 43.b. - 43.c.</b> ?  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.f.</b> | Participated in, or been a member of, a group or organization that did any of the activities described in <b>Item Numbers 43.b. - 43.e.</b> ?  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.g.</b> | Recruited members or asked for money or things of value for a group or organization that did any of the activities described in <b>Item Numbers 43.b. - 43.e.</b> ?  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.h.</b> | Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities described in <b>Item Numbers 43.b. - 43.e.</b> ?   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>43.i.</b> | Provided money, a thing of value, services or labor, or any other assistance or support for an individual, group, or organization who did any of the activities described in <b>Item Numbers 43.b. - 43.e.</b> ? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>44.</b>   | Do you intend to engage in any of the activities listed in any part of <b>Item Numbers 43.b. - 43.e.</b> ?   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <b>45.</b>   | Do you intend to engage in any activity that could endanger the welfare, safety, or security of the United States?   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

**NOTE:** If you answered "Yes" to any part of **Item Numbers 42.a. - 45.**, explain what you did, including the dates and location of the circumstances, or what you intend to do in the space provided in **Part 14. Additional Information.**



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## Part 9. General Eligibility and Inadmissibility Grounds (continued)

46. Are you the spouse or child of an individual who **EVER** engaged in any of the activities listed in **Item Numbers 43.b. - 43.i.**? ☐ Yes ☐ No

**NOTE:** If you answered "Yes" to any part of **Item Number 46.**, explain what your parent or spouse did, including the dates and location of the circumstances in **Part 14. Additional Information.**

47. Have you **EVER** sold, provided, or transported weapons, or assisted any person in selling, providing, or transporting weapons, which you knew or believed would be used against another person? ☐ Yes ☐ No
48. Have you **EVER** worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other place where people were detained, or have you **EVER** directed or participated in any other activity that involved detaining people? ☐ Yes ☐ No
49. Have you **EVER** been a member of, assisted, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? ☐ Yes ☐ No
50. Have you **EVER** served in, been a member of, assisted (helped), or participated in any military or police unit? ☐ Yes ☐ No
51. Have you **EVER** served in, been a member of, assisted (helped), or participated in any armed group (a group that carries weapons), for example: paramilitary unit (a group of people who act like a military group, but are not part of the official military), self-defense unit, vigilante unit, rebel group, or guerrilla group? ☐ Yes ☐ No

If you answered "Yes" to **Item Number 50.** or **51.**, include the name of the country, the name of the military unit or armed group, your rank or position, and your dates of involvement in your explanation in **Part 14. Additional Information.**

52. Have you **EVER** been a member of, or in any way affiliated with, the Communist Party or any totalitarian party (in the United States or abroad)? ☐ Yes ☐ No

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

- 53.a. Torture? ☐ Yes ☐ No
- 53.b. Genocide? ☐ Yes ☐ No
- 53.c. Killing, or trying to kill, any person? ☐ Yes ☐ No
- 53.d. Intentionally and severely injuring or trying to injure any person? ☐ Yes ☐ No
54. Have you **EVER** recruited, enlisted, conscripted, or used any person under 15 years of age to take part in hostilities or to serve in or help an armed force or group, or attempted or worked with others to do so? ☐ Yes ☐ No
55. Have you **EVER** used any person under 15 years of age to take part in hostilities, for instance, participating in combat or providing services related to combat (such as sabotage or serving as a courier) or providing support services (such as transporting supplies), or attempted or worked with others to do so? ☐ Yes ☐ No

**NOTE:** If you answered "Yes" to any part of **Item Numbers 47. - 55.**, explain what occurred, including the dates and location of the circumstances, in the space provided in **Part 14. Additional Information.**

## Public Charge

**NOTE:** For more information, see **Part 9. General Eligibility and Inadmissibility Grounds, *Public Charge*** section of these Instructions.

- ☐ VAWA Self-Petitioner (Form I-360)
- ☐ Special Immigrant Juvenile (Form I-360)
- ☐ Certain Afghan or Iraqi National (Form I-360 or Form DS-157)
- ☐ Asylee (Form I-589 or Form I-730)
- ☐ Refugee (Form I-590 or Form I-730)
- ☐ Victim of Qualifying Criminal Activity (U Nonimmigrant) under INA section 245(m) (Form I-918, Form I-918A, or Form I-929)
- ☐ Any category other than INA section 245(m), but you are in valid U nonimmigrant status at the time you file your application for adjustment of status. (This exemption only applies if, at the time of the adjudication of Form I-485, you are still in valid U nonimmigrant status. If, at the time of adjudication of Form I-485, you are no longer in valid U nonimmigrant status, you will be subject to the public charge ground of inadmissibility.)
- ☐ Human Trafficking Victim (T nonimmigrant) under INA section 245(l) (Form I-914 or Form I-914A)
- ☐ Any category other than INA section 245(l), but you either have a pending application for T nonimmigrant status (Form I-914) that sets forth a prima facie case for eligibility or are in valid T nonimmigrant status at the time you file your application for adjustment of status. (This exemption only applies if your Form I-914 is still pending and deemed to be prima facie eligible or you are in valid T nonimmigrant status when we adjudicate your adjustment of status application.)
- ☐ Cuban Adjustment Act
- ☐ Cuban Adjustment Act for Battered Spouses and Children
- ☐ Dependent Status under the Haitian Refugee Immigrant Fairness Act
- ☐ Dependent Status under the Haitian Refugee Immigrant Fairness Act for Battered Spouses and Children
- ☐ Cuban and Haitian Entrants Applying for Adjustment of Status under section 202 of the Immigration Reform and Control Act of 1986
- ☐ A Lautenberg Parolee
- ☐ National of Vietnam, Cambodia, or Laos Applying under the Foreign Operations, Export Financing, and Related Programs
- ☐ Continuous Residence in the United States Since Before January 1, 1972 (“Registry”)
- ☐ Amerasian Homecoming Act
- ☐ Polish or Hungarian Parolee
- ☐ Nicaraguans and Other Central Americans under section 203 of the Nicaraguan Adjustment and Central American Relief Act (NACARA)
- ☐ American Indian Born in Canada (INA section 289) or the Texas Band of Kickapoo Indians of the Kickapoo Tribe of Oklahoma, Public Law 97-429 (Jan. 8, 1983)
- ☐ Section 7611 of the National Defense Authorization Act for Fiscal Year 2020 (Liberian Refugee Immigration Fairness)

## Part 9. General Eligibility and Inadmissibility Grounds (continued)

- ☐ Syrian National Adjusting Status under Public Law 106-378
- ☐ Spouse, Child, or Parent of a U.S. Active-Duty Service Member in the Armed Forces under the National Defense Authorization Act (NDAA) (Form I-130 or Form I-360)
- ☐ I do not fall under any of the exempt categories listed above and will complete **Item Numbers 57. - 66.**

If you selected "I do not fall under any of the exempt categories listed above and will complete **Item Numbers 57. - 66.**" in **Item Number 56.**, complete **Item Numbers 57. - 66.** below. If you selected an exempt category in **Item Number 56.**, go to **Item Number 67.** If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

57. What is the size of your household?

**58.** Indicate your annual household income.

- ☐ \$0-27,000    ☐ \$27,001-52,000    ☐ \$52,001-85,000    ☐ \$85,001-141,000    ☐ Over \$141,000

**59.** Identify the total value of your household assets.

- ☐ \$0-18,400   ☐ \$18,401-136,000   ☐ \$136,001-321,400   ☐ \$321,401-707,100   ☐ Over \$707,100

**60.** Identify the total value of your household liabilities (including both secured and unsecured liabilities).

- ☐ \$0      ☐ \$1-10,100      ☐ \$10,101-57,700      ☐ \$57,701-186,800      ☐ Over \$186,800

**61.** What is the highest degree or grade of school you have completed?

- ☐ Less than a high school diploma. If you select this option, indicate the highest grade of school you have completed.

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- ☐ High school diploma, GED, or alternative credential    ☐ 1 or more years of college credit, no degree  
☐ Associate's degree    ☐ Bachelor's degree    ☐ Master's degree    ☐ Professional degree (JD, MD, DMD, etc.)  
☐ Doctorate degree

**62.** List your certifications, licenses, skills obtained through work experience, and educational certificates.

[illegible]

- 63.** Have you ever received Supplemental Security Income (SSI), Temporary Assistance for Needy Families (TANF), or state, Tribal, territorial, or local cash benefit programs for income maintenance (often called “General Assistance” in the state context, but which also exist under other names)? ☐ Yes ☐ No

64. Have you ever received long-term institutionalization at government expense? ☐ Yes ☐ No

**65.** If your answer to **Item Number 63.** is "Yes," list the specific benefit(s) you received, the start and end dates of each period of receipt, the dollar amount of benefits received, and whether you received the benefits while you were in an immigration category exempt from the public charge ground of inadmissibility.

**66.** If your answer to **Item Number 64.** is "Yes," list the name, city, and state for each institution, the start and end dates of each period of institutionalization, the reason you were institutionalized, and whether you were institutionalized while you were in an immigration category exempt from the public charge ground of inadmissibility.

### *Illegal Entries and Other Immigration Violations*

- NOTE:** If your answer to **Item Number 67.** is "Yes," attach a written statement explaining why you failed or refused to attend or remain in attendance at the removal proceeding, including any explanation of a reasonable cause for that failure or refusal.

73. Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents? ☐ Yes ☐ No

75. Have you **EVER** entered the United States without being inspected and admitted or paroled? ☐ Yes ☐ No

## Part 9. General Eligibility and Inadmissibility Grounds (continued)

- NOTE:** If you answered "Yes" to **Item Number 76.**, give the dates of unlawful presence in the space provided in **Part 14. Additional Information.**

- NOTE:** Severe trafficking in persons involves sex trafficking (the recruitment, harboring, transportation, provision, or obtaining of a person to commit a commercial sex act) induced by force, fraud, coercion, or in which the person is induced to perform such act has not reached 18 years of age, or the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

**78.a.** Having been unlawfully present in the United States for more than one year in the aggregate on or after April 1, 1997? You were unlawfully present in the United States for more than one year in the aggregate if you count all of the days during all of your stays that you were present in the United States after the expiration of the period of stay authorized by the DHS Secretary or were present in the United States without being admitted or paroled. ☐ Yes ☐ No

- ### Miscellaneous Conduct

- Have you **EVER**:

- 84.a.** Applied for exemption or discharge from training or service in the U.S. armed forces or in the U.S. National Security Training Corps on the ground that you are a foreign national? ☐ Yes ☐ No
- 84.b.** Been relieved or discharged from such training or service on the ground that you are a foreign national? ☐ Yes ☐ No
- 84.c.** Been convicted of desertion from the U.S. armed forces? ☐ Yes ☐ No
- 85.** Have you **EVER** left or remained outside the United States to avoid or evade training or service in the U.S. armed forces in time of war or a period declared by the President to be a national emergency? ☐ Yes ☐ No
- 86.** If you answered "Yes" to **Item Number 85.**, what was your nationality or immigration status immediately before you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?

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**Part 10. Applicant's Contact Information, Certification, and Signature*****Applicant's Contact Information***

Provide your daytime telephone number, mobile telephone number (if any), and email address (if any).

1. Applicant's Daytime Telephone Number

2. Applicant's Mobile Telephone Number (if any)

3. Applicant's Email Address (if any)

***Applicant's Certification and Signature***

I certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and submitted with my application, I read and understand or, if interpreted to me in a language in which I am fluent by the interpreter listed in **Part 11.**, understood, all of the responses and information contained in, and submitted with, my application, and that all of the responses and the information are complete, true, and correct. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

4. Applicant's Signature



Date of Signature (mm/dd/yyyy)

**Part 11. Interpreter's Contact Information, Certification, and Signature*****Interpreter's Full Name***

1. Interpreter's Family Name (Last Name)

Interpreter's Given Name (First Name)

2. Interpreter's Business or Organization Name

***Interpreter's Contact Information***

3. Interpreter's Daytime Telephone Number

4. Interpreter's Mobile Telephone Number (if any)

5. Interpreter's Email Address (if any)

***Interpreter's Certification and Signature***

I certify, under penalty of perjury, that I am fluent in English and , and I have interpreted every question on the application and Instructions and interpreted the applicant's answers to the questions in that language, and the applicant informed me that they understood every instruction, question, and answer on the application.

6. Interpreter's Signature

Date of Signature (mm/dd/yyyy)

**Part 12. Contact Information, Certification, and Signature of the Person Preparing this Application, if Other Than the Applicant****Preparer's Full Name**

1. Preparer's Family Name (Last Name)

Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name

**Preparer's Contact Information**

3. Preparer's Daytime Telephone Number

4. Preparer's Mobile Telephone Number (if any)

5. Preparer's Email Address (if any)

**Preparer's Certification and Signature**

I certify, under penalty of perjury, that I prepared this application for the applicant at their request and with express consent and that all of the responses and information contained in and submitted with the application are complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that they understand the responses and information in or submitted with the application.

6. Preparer's Signature

Date of Signature (mm/dd/yyyy)

**NOTE: Do not complete Part 13. until the USCIS Officer instructs you to do so at the interview.****Part 13. Signature at Interview**

I swear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form I-485, Application to Register Permanent Residence or Adjust Status, subscribed by me, including the  changes made to this application, **numbered**  **through** , are complete, true, and correct. All information on additional pages submitted by me with this Form I-485, **on numbered pages**  **through**  are complete, true, and correct. All documents submitted at this interview were provided by me and are complete, true, and correct.

Subscribed to and sworn to (affirmed) before me

USCIS Officer's Printed Name or Stamp

Date of Signature (mm/dd/yyyy)

Applicant's Signature (sign in ink)

USCIS Officer's Signature (sign in ink)

<b>Part 14. Additional Information</b>
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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. | Family Name (Last Name) | Given Name (First Name) | Middle Name (if applicable) |
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2. Page Number      Part Number      Item Number

3. Page Number    Part Number    Item Number

4. Page Number      Part Number      Item Number

5. Page Number      Part Number      Item Number

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