



Application to Register Permanent Residence or Adjust Status

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

USCIS
Form I-485
OMB No. 1615-0023
Expires 07/31/2021

For USCIS Use Only

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

To be completed by an attorney or accredited representative (if any).

<input type="checkbox"/> Select this box if Form G-28 is attached.	Volag Number (if any) _____	Attorney State Bar Number (if applicable) _____	Attorney or Accredited Representative USCIS Online Account Number (if any) _____
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► **START HERE - Type or print in black ink.**

A-Number ► A- _____

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, U.S. Citizenship and Immigration Services (USCIS) may deny your application.

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

Your Current Legal Name (do not provide a nickname)

1.a. Family Name (Last Name)	Hello
1.b. Given Name (First Name)	
1.c. Middle Name	

Other Names You Have Used Since Birth (if applicable)

NOTE: Provide all other names you have ever used, including your family name at birth, other legal names, nicknames, aliases, and assumed names. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

2.a. Family Name (Last Name)	
2.b. Given Name (First Name)	
2.c. Middle Name	

3.a. Family Name (Last Name)	
3.b. Given Name (First Name)	
3.c. Middle Name	
4.a. Family Name (Last Name)	
4.b. Given Name (First Name)	
4.c. Middle Name	

Other Information About You

5. Date of Birth (mm/dd/yyyy) _____

NOTE: In addition to providing your actual date of birth, include any other dates of birth you have used in connection with any legal names or non-legal names in the space provided in **Part 14. Additional Information.**

6. Sex	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
7. City or Town of Birth	