Department of Homeland Security

U.S. Citizenship and Immigration Services

START HERE - Type or Print (Use black i	For USCIS Use Only		
Part 1. Information About You	Returned Receipt		
Family Name (Last Name) Given Name (F	irst Name) Middle Name		
Address - Street Number and Name	Apt. No.	Resubmitted	
C/O (in care of)			
City Sta	te ZIP Code	Reloc Sent	
Date of Birth (mm/dd/yyyy)	Country of Birth		
Country of Citizenship/Nationality U.S. Soc	ial Security No. (if any) A-Number (if any)	Reloc Rec'd	
Date of Last Arrival (mm/dd/yyyy)	I-94 Arrival-Departure Record Number		
Current USCIS Status	Expires on (mm/dd/yyyy)	Applicant Interviewed	
Part 2. Application Type (Select one) I am applying for an adjustment to perma	nont posident status because	Section of Law	
 a. An immigrant petition giving me an in that has been approved. (Attach a copy immigrant juvenile, or special immigra application that will give you an imme b. My spouse or parent applied for adjust permanent residence in an immigrant of for spouses and children. c. I entered as a K-1 fiancé(e) of a U.S. centry, or I am the K-2 child of such a feetition approval notice and the marria 	Sec. 209(a), INA		
d. I was granted asylum or derivative asy granted asylum and am eligible for adj	Approved Visa Petition Dependent of Principal Alien Special Immigrant		
	ed or paroled into the United States after een physically present in the United States	Other Preference	
f. I am the husband, wife, or minor unma (e), and I am residing with that person, States after January 1, 1959, and therea United States for at least 1 year.	Action Block		
g. \square I have continuously resided in the Unit	ted States since before January 1, 1972.		
h. Other basis of eligibility. Explain (for status has not been terminated, and I h States for 1 year after admission). If ac instructions.			
I am already a permanent resident and am permanent residence adjusted to the date I a nonimmigrant or parolee, or as of May 2 (Select one)	To be Completed by Attorney or Representative, if any Fill in box if Form G-28 is attached to represent the applicant.		
i. \square I am a native or citizen of Cuba and me	VOLAG No		
j. I am the husband, wife, or minor unmarried child of a Cuban and meet the description in (f) above.		ATTY State License Number	

Pa	Part 3. Processing Information						
١.	City/Town/Village of Birth		Current Oc	ccupation	n		
				1			
	Your Mother's First Name		Your Father's First Name				
	Tour Mouner's First Name		Tour raun	21 3 1 1130	Tvaine		
	D :1	- I 04 4 :	1.5	D 1:			
	Provide your name exactly as it appears on	your Form I-94, Arriva	ıl-Departure Record Number				
	Place of Last Entry Into the United States		In what status did you last enter? (Visitor, student, exchange				
	(City/State)		visitor, crewman, temporary worker, without inspection, etc.)				
	Were you inspected by a U.S. Immigration	Officer? Yes	No				
	Nonimmigrant Visa Number		Consulate Where Visa Was Issued				
	Date Visa Issued (mm/dd/yyyy) Gender		Marital Status				
		Iale Female	Mar	_	Single Divorced Widowed		
		iaic remaic				Divolocu Widowed	
	Have you ever applied for permanent reside	ent status in the U.S.?			rive date and pla	ace of No	
			filing a	and final disposition.)			
3.	List your present spouse and all of your chi space is needed, see Page 3 of the instruction	ldren (include adult son	s and daugh	ters). (It	f you have none	, write "None." If additional	
	Family Name (Last Name)	Given Name (First Na	····		Middle Initial	Date of Birth (mm/dd/yyyy)	
	ranniy Name (Last Name)	Given Name (First Iva	ime)		Wilddle Illitial	Date of Bitti (mm/da/yyyy)	
	Country of Birth	Relationship		A-Number (if any)		Applying with you?	
	Country of Birtin	Relationship		A-Ivuii	ioci (ij uny)	Yes No	
	Family Name (Last Name)	Given Name (First Na	ıma)		Middle Initial	Date of Birth (mm/dd/yyyy)	
	Taimiy Ivanic (East Ivanic)	Given ivame (1 tist iva	inie)		Wilder Illitia	Date of Birtii (mm/aa/yyyy)	
	Country of Birth	Relationship		A-Nun	l nber <i>(if any)</i>	Applying with you?	
	Country of Birtin	Relationship		71 11011	ioei (ij uniy)	Yes No	
	Family Name (Last Name)	Given Name (First Na	ım <i>o</i>)		Middle Initial	Date of Birth (mm/dd/yyyy)	
	Tuning Ivanic (East Ivanic)	Given ivame (1 tist iva	inic)		Wilder Initial	Duce of Birth (mm/aa/yyyy)	
	Country of Birth	Relationship		A-Niin	l nber <i>(if any)</i>	Applying with you?	
	Country of Birth	recutionship		11 TVall	iser (ij arij)	Yes No	
	Family Name (Last Name)	Given Name (First Na			Middle Initial	Date of Birth (mm/dd/yyyy)	
		Given frame (1 ust frame) Winduit limital		Base of Bilai (min aun yyyy)			
	Country of Birth	Relationship A-Number (if any) Given Name (First Name) Middle Initial		Applying with you?			
				Yes No			
	Family Name (Last Name)			Middle Initial	Date of Birth (mm/dd/yyyy)		
) ((1010 000 3333)	
	Country of Birth	Relationship A-Number (if any) Apply		Applying with you?			
		- r			(3 " 37	Yes No	
		1		1			

Pε	art 3. Processing Informati	ion (Continued)						
C.	List your present and past membership in or affiliation with every organization, association, fund, foundation, party, club, society, or similar group in the United States or in other places since your 16th birthday. Include any military service in this part. If none, write "None." Include the name of each organization, location, nature, and dates of membership. If additional space is needed, attach a separate sheet of paper. Continuation pages must be submitted according to the guidelines provided on Page 3 of the instructions under General Instructions.							
	Name of Organization	of Organization Location and Nature				Date of Membership		
	From			To	•			
	-							
mı do	nswer the following questions. (aust be submitted according to the cumentation that must be included and that you are not entitled to a	e guidelines provided on Pag led with your application is a	ge 3 of the instructions unless provided in this section.	der General Instruction	ns. Informati	ion about		
1.	Have you EVER, in or outside	the United States:						
	a. Knowingly committed any carrested?	crime of moral turpitude or a	drug-related offense for	which you have not been	n Yes 🗌	No 🗌		
	b. Been arrested, cited, charge or ordinance, excluding traf		or imprisoned for breaki	ng or violating any law	Yes	No 🗌		
	c. Been the beneficiary of a pa	ardon, amnesty, rehabilitation	decree, other act of clen	nency, or similar action?	Yes	No 🗌		
	d. Exercised diplomatic immu	nity to avoid prosecution for	a criminal offense in the	United States?	Yes	No 🗌		
2.	Have you received public assist any State, county, city, or muni public assistance in the future?					No 🗌		
3.	Have you EVER :							
	a. Within the past 10 years becactivities in the future?	en a prostitute or procured an	yone for prostitution, or	intend to engage in such	Yes	No 🗌		
	b. Engaged in any unlawful co	ommercialized vice, including	g, but not limited to, illeg	gal gambling?	Yes	No 🗌		
	c. Knowingly encouraged, ind illegally?	uced, assisted, abetted, or aid	led any alien to try to ent	er the United States	Yes	No 🗌		
	d. Illicitly trafficked in any co trafficking of any controlled		ngly assisted, abetted, or	colluded in the illicit	Yes	No 🗌		
4.	Have you EVER engaged in, comembership or funds for, or ha support to any person or organi political assassination, hijackin	ve you through any means exzation that has ever engaged	ver assisted or provided a or conspired to engage in	ny type of material	d Yes 🗌	No 🗌		

Pai	rt 3. Processing Information (Continued)		
5.	Do you intend to engage in the United States in:		
	a. Espionage?	Yes	No 🗌
	b. Any activity a purpose of which is opposition to, or the control or overthrow of, the Government of the United States, by force, violence, or other unlawful means?	Yes	No 🗌
	c. Any activity to violate or evade any law prohibiting the export from the United States of goods, technology, or sensitive information?	Yes	No 🗌
6.	Have you EVER been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?	Yes	No 🗌
7.	Did you, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion?	Yes	No 🗌
8.	Have you EVER been deported from the United States, or removed from the United States at government expense, excluded within the past year, or are you now in exclusion, deportation, removal, or rescission proceedings?	Yes	No 🗌
9.	Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act (INA) for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States, or any immigration benefit?	Yes	No 🗌
10.	Have you EVER left the United States to avoid being drafted into the U.S. Armed Forces?	Yes	No 🗌
11.	Have you EVER been a J nonimmigrant exchange visitor who was subject to the 2-year foreign residence requirement and have not yet complied with that requirement or obtained a waiver?	Yes	No 🗌
12.	Are you now withholding custody of a U.S. citizen child outside the United States from a person granted custody of the child?	Yes	No 🗌
13.	Do you plan to practice polygamy in the United States?	Yes	No 🗌
14.	Have you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:		
	a. Acts involving torture or genocide?	Yes	No 🗌
	b. Killing any person?	Yes	No 🗌
	c. Intentionally and severely injuring any person?	Yes	No 🗌
	d. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened?	Yes	No 🗌
	e. Limiting or denying any person's ability to exercise religious beliefs?	Yes	No 🗌
15.	Have you EVER:		
	a. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?	Yes 🗌	No 🗌
	b. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?	Yes	No 🗌
16.	Have you EVER been a member of, assisted in, 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 🗌

Part 3. Processing Information (Continued)				
17. Have you EVER assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?	Yes No No			
18. Have you EVER received any type of military, paramilitary, or weapons training?	Yes No No			
Part 4. Accommodations for Individuals With Disabilities and/or Impairments (See Page 7 of the abefore completing this section.)	instructions			
Are you requesting an accommodation because of your disability(ies) and/or impairment(s)?	Yes No			
If you answered "Yes," select any applicable box:				
a. I am deaf or hard of hearing and request the following accommodation(s) (if requesting a sign-language indicate which language (e.g., American Sign Language)):	e interpreter,			
b. I am blind or sight-impaired and request the following accommodation(s):				
c. I have another type of disability and/or impairment (describe the nature of your disability(ies) and/or impairment(s) and accommodation(s) you are requesting):				

Part 5. Signature (Read the information on penalties on **Page 8** of the instructions before completing this section. You must file this application while in the United States.)

Your Registration With U.S. Citizenship and Immigration Services

"I understand and acknowledge that, under section 262 of the Immigration and Nationality Act (INA), as an alien who has been or will be in the United States for more than 30 days, I am required to register with U.S. Citizenship and Immigration Services (USCIS). I understand and acknowledge that, under section 265 of the INA, I am required to provide USCIS with my current address and written notice of any change of address within 10 days of the change. I understand and acknowledge that USCIS will use the most recent address that I provide to USCIS, on any form containing these acknowledgements, for all purposes, including the service of a Notice to Appear should it be necessary for USCIS to initiate removal proceedings against me. I understand and acknowledge that if I change my address without providing written notice to USCIS, I will be held responsible for any communications sent to me at the most recent address that I provided to USCIS. I further understand and acknowledge that, if removal proceedings are initiated against me and I fail to attend any hearing, including an initial hearing based on service of the Notice to Appear at the most recent address that I provided to USCIS or as otherwise provided by law, I may be ordered removed in my absence, arrested, and removed from the United States."

Selective Service Registration

The following applies to you if you are a male at least 18 years of age, but not yet 26 years of age, who is required to register with the Selective Service System: "I understand that my filing Form I-485 with U.S. Citizenship and Immigration Services (USCIS) authorizes USCIS to provide certain registration information to the Selective Service System in accordance with the Military Selective Service Act. Upon USCIS acceptance of my application, I authorize USCIS to transmit to the Selective Service System my name, current address, Social Security Number, date of birth, and the date I filed the application for the purpose of recording my Selective Service registration as of the filing date. If, however, USCIS does not accept my application, I further understand that, if so required, I am responsible for registering with the Selective Service by other means, provided I have not yet reached 26 years of age."

Part 5. Signature (Continued)			
	Applicant's Statement (Select one)		
☐ I can read and understand English, and as my answer to each question.	I have read and understand each and every que	estion and instructi	on on this form, as well
language, a la	on on this form, as well as my answer to each quanguage in which I am fluent, by the person nan ry question and instruction on this form, as well	ned in Interpreter	's Statement and
	e laws of the United States of America, that the we not withheld any information that would affe		
I authorize the release of any information is determine eligibility for the benefit I am se	from my records that U.S. Citizenship and Immeeking.	igration Services ((USCIS) needs to
Signature (Applicant) Don't forget to sign!	Print Your Full Name	Date (mm/dd/yyyy)	Daytime Phone Number (include area code)
	is form or fail to submit required documents lis	sted in the instruct	ions, you may not be found
I certify that I am fluent in English and the Language Used (language in which applied)			
	very question and instruction on this form, as we, and the applicant has understood each and ever		
Signature (Interpreter)	Print Your Full Name	Date (mm/dd/yyyy)	Daytime Phone Number (include area code)
	i L		
Part 6. Signature of Person Prepari	ng Form, If Other Than Above		
	at the request of the above applicant, and it	is based on all in	formation of which I
have knowledge. Signature	Print Your Full Name	Date (mm/dd/yyyy)	Daytime Phone Number (include area code)
Firm Name and Address	Email A	Address (if any)	