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	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)		Section of Law
 I am applying for an adjustment to permanal. 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 My spouse or parent applied for adjust permanent residence in an immigrant of for spouses and children. I entered as a K-1 fiancé(e) of a U.S. centry, or I am the K-2 child of such a final petition approval notice and the marriation of the petition approval notice and the marriation approval notice and the marriation of the petition approval notice and the marriation appr	Sec. 209(a), INA Sec. 209(b), INA Sec. 13, Act of 9/11/57 Sec. 245, INA Sec. 249, INA Sec. 1 Act of 11/2/66 Sec. 2 Act of 11/2/66 Other Country Chargeable Eligibility Under Sec. 245 Approved Visa Petition Dependent of Principal Alien Special Immigrant Other Preference Action Block	
status has not been terminated, and I h States for 1 year after admission). If ac instructions.	To be Completed by	
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)	Attorney or Representative, if any Fill in box if Form G-28 is attached to represent the applicant.	
i. L I am a native or citizen of Cuba and me	VOLAG No	
j. I am the husband, wife, or minor unma	ATTY State License Number	

Pa	Part 3. Processing Information							
۸.	City/Town/Village of Birth	Current Occupation						
	Your Mother's First Name	Your Father's First Name		Name				
	Provide your name exactly as it appears on	your Form I-94, Arriva	l-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 St					
	M	Iale Female	Mar Mar	ried [_ Single	Divorced Widowed		
	Have you ever applied for permanent reside	ent status in the U.S.?		_	ive date and pla	ace of No		
			filing a	nd final	disposition.)			
В.	List your present spouse and all of your chi space is needed, see Page 3 of the instruction	ldren (include adult son	s and daught	ters). (It	f you have none	, write "None." If additional		
	Family Name (Last Name)			Date of Birth (mm/dd/yyyy)				
	Country of Birth	Relationship		A-Nun	iber (if any)	Applying with you?		
		C: N /E: /N			NC 111 T 12 1	Yes No No		
	Family Name (Last Name)	Given Name (First No.	ime)		Middle Initial	Date of Birth (mm/dd/yyyy)		
	Country of Birth	Relationship		A-Nun	l nber <i>(if any)</i>	Applying with you?		
		1			(3 2)	Yes No		
	Family Name (Last Name)	Given Name (First No	ime)		Middle Initial	Date of Birth (mm/dd/yyyy)		
	ani d	B 1 .: 1:			1 (12)			
	Country of Birth	Relationship		A-Nun	nber (if any)	Applying with you? Yes No		
	Family Name (Last Name)	Given Name (First Name) Middle Initial			Middle Initial	Yes No Date of Birth (mm/dd/yyyy)		
	Tuning Name (Base Name)			Butte of Birth (mini dailyyyyy)				
	Country of Birth	Relationship		A-Nun	iber (if any)	Applying with you?		
		Given Name (First Name) Middle Initi			Yes No			
	Family Name (Last Name)			Middle Initial		Date of Birth (mm/dd/yyyy)		
	Country of Birth	Relationship		A_Num	ber (if any)	Applying with you?		
	Country of Diffi	Relationship		1 1-1 NUII	iooi (ij uny)	Yes No		
		L						

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Pa	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 Location and Nature Date of Membership Every Teach				_	
From					To)
mı do	ust be submitted according to the cumentation that must be included	If your answer is "Yes" to any que e guidelines provided on Page 3 or led with your application is also predjust status or register for permane	the instructions un ovided in this section	der General Instruction	ns. Informat	ion about
1.	Have you EVER, in or outside	the United States:				
	a. Knowingly committed any arrested?	crime of moral turpitude or a drug-	related offense for	which you have not been	n Yes 🗌	No 🗌
	b. Been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations?			No 🗌		
	$\textbf{c.} \ \ \text{Been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action?} \qquad Yes \ \ \ No \ $			No 🗌		
	d. Exercised diplomatic immu	nity to avoid prosecution for a crir	ninal offense in the	United States?	Yes	No 🗌
2.		tance in the United States from any icipality (other than emergency me			Yes 🗌	No 🗌
3.	Have you EVER :					
	a. Within the past 10 years be activities in the future?	en a prostitute or procured anyone	for prostitution, or	intend to engage in such	Yes	No 🗌
	b. Engaged in any unlawful co	ommercialized vice, including, but	not limited to, illeg	al gambling?	Yes	No 🗌
	c. Knowingly encouraged, ind illegally?	luced, assisted, abetted, or aided an	y alien to try to ent	er the United States	Yes	No 🗌
	d. Illicitly trafficked in any cotrafficking of any controlled	ntrolled substance, or knowingly a d substance?	ssisted, abetted, or	colluded in the illicit	Yes	No 🗌
4.	membership or funds for, or has upport to any person or organi	onspired to engage in, or do you in ve you through any means ever assization that has ever engaged or co g, or any other form of terrorist ac	sisted or provided a aspired to engage in	ny type of material	d Yes 🗌	No 🗌

Pa	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 before completing this section.)	instructions			
Are you requesting an accommodation because of your disability(ies) and/or impairment(s)?	Yes No 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 interpreter, indicate which language (e.g., American Sign Language)):				
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 i accommodation(s) you are requesting):	impairment(s) and			

Your Registration With U.S. Citizenship and Immigration Services

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.)

"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 of	question and instruction	on on this form, as well
language, a la	n on this form, as well as my answer to each nguage in which I am fluent, by the person n y question and instruction on this form, as w	amed in Interpreter'	's Statement and
	laws of the United States of America, that the not withheld any information that would a		
I authorize the release of any information f determine eligibility for the benefit I am se	from my records that U.S. Citizenship and Imeking.	nmigration 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)
Don't lorget to sign:			
NOTE : If you do not completely fill out the eligible for the requested benefit, and this contains the second sec	is form or fail to submit required documents application may be denied.	listed in the instructi	ons, you may not be found
	Interpreter's Statement and Signatu	re	
I certify that I am fluent in English and the	below-mentioned language.		
Language Used (language in which applic	eant is fluent)		
	very question and instruction on this form, as , and the applicant has understood each and of		
Signature (Interpreter)	Print Your Full Name	Date (mm/dd/yyyy)	Daytime Phone Number (include area code)
Signature (imerpreter)	Fillit Four Full Name	(mm/cc/yyyy)	(include dred code)
Part 6. Signature of Person Prepari	ng Form, If Other Than Above		
	at the request of the above applicant, and	l it is based on all in	formation of which I
have knowledge.		Date	Daytime Phone Number
Signature	Print Your Full Name	(mm/dd/yyyy)	(include area code)
Firm Name and Address	Emai	l Address (if any)	