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**Instructions****NOTE: Please carefully read all the instructions. The fee will not be refunded.**

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**What Is the Purpose of This Form?**

The original version of Form I-687 was designed for use during the Immigration and Nationality Act (INA) section 245A legalization program of the 1986 Immigration Reform and Control Act which ended in 1988. The form will now be used to apply to U.S. Citizenship and Immigration Services (USCIS) for benefits pursuant to the terms and conditions of certain settlement agreements.

**NOTE:** USCIS is comprised of offices of the former Immigration and Naturalization Service (INS).

**1. Preparation of Application.**

A separate application for each applicant must be typed or printed legibly in black ink. The application must be completed in full. If extra space is needed to answer any item, attach a continuation sheet(s) and indicate the item number.

If you send this application via the U. S. Postal Service, **mail it to the following address:**

**U.S. Citizenship and Immigration Services  
P.O. Box 805876  
Chicago, IL 60680-4120**

If you send this application through any other means, **mail it to the following address:**

**U.S. Citizenship and Immigration Services  
427 S. LaSalle, 3rd Floor  
Chicago, IL 60605-1029**

If you do not sign your application or if you fail to submit the appropriate fee according to the instructions below, we will return your form. If your application is returned, no further action will be taken. You would then need to resubmit your application properly to renew processing.

**2. Eligibility.**

An alien may be eligible for Temporary Resident status if:

- A.** He or she can establish that he or she entered the United States before January 1, 1982, and that he or she has resided continuously in the United States in an unlawful status since such date and through the date the application is considered filed pursuant to the settlement agreements (in the case of an alien who entered the United States as a nonimmigrant before January 1, 1982, the alien must establish that the

alien's period of authorized stay as a nonimmigrant expired before such date through the passage of time or the alien's unlawful status was known to the government as of such date) and

- B.** He or she can establish that he or she has been continuously physically present in the United States since November 6, 1986 and through the date the application is considered filed pursuant to the settlement agreements.

**3. Admissible as an Immigrant.**

The alien must establish that he or she:

- A.** Is admissible to the United States as an immigrant, except as otherwise provided under INA section 245A (d)(2).
- B.** Has not been convicted of any felony or of three or more misdemeanors committed in the United States;
- C.** Has not assisted in the persecution of any person or persons on account of race, religion, nationality, membership in a particular social group or political opinion; and
- D.** Is registered or registering under the Military Selective Service Act, if the alien is required to be so registered under the Act.

**4. Documents to Establish Identity.**

You must submit proof of identity with your application. The following are examples of the types of documents that may serve to establish your identity:

- A.** Birth certificate, baptismal certificate or other evidence of birth;
- B.** National identification card from your country of origin;
- C.** Passport;
- D.** Driver's license;
- E.** Identification card issued by a school or your State of residence.
- F.** Military identification.

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## 5. Admissibility.

An applicant for temporary resident status pursuant to section 245A of the Immigration and Nationality Act (INA) must establish that he or she is admissible under section 212(a) of the INA. In determining the admissibility of an applicant, the provisions of sections 212(a)(6)(A) and 212(a)(7) of the INA shall not apply to applicants for adjustment of status as a lawful temporary or permanent resident under section 245A of the INA.

The following grounds of inadmissibility **may not** be waived by the Secretary of Homeland Security:

- (i) Section 212(a)(2)(A)(i)(I) (crimes involving moral turpitude);
- (ii) Section 212(a)(2)(A)(i)(II) (crimes involving controlled substances, except for so much of such paragraph as relates to a single offense of simple possession of 30 grams or less of marijuana);
- (iii) Section 2312(a)(2)(B) (multiple criminal convictions);
- (iv) Section 212(a)(2)(C) (controlled substance traffickers);
- (v) Section 212(a)(3) (security and related grounds); and
- (vi) Section 212(a)(4) (public charge). **Except** this prohibition does not apply to an alien who is or was an aged, blind or disabled individual (as defined in section 1614(a)(1) of the Social Security Act. An alien is not ineligible for adjustment of status due to being inadmissible under section 212(a)(4) if the alien demonstrates a history of employment in the United States evidencing self-support without receipt of public cash assistance. Special adjudication standards regarding public charge contained in any settlement agreements apply.

All other grounds of inadmissibility **may** be waived by the Secretary of Homeland Security. In order to seek such a waiver, you must submit a Form I-690, Application for Waiver of Grounds of Excludability.

## 6. Documents to Establish Residence.

Documents that may be submitted to prove continuity of residence include but are not limited to:

- a. Leases, rent receipts or deeds or other evidence of a mortgage;
- b. Birth certificates of children; born in the United States;
- c. Employment, union or other business records;
- d. Driver's license receipts or evidence of vehicle registrations;

- e. Utility bill receipts;
- f. Installment loan records;
- g. Church records, medical records;
- h. Affidavits or declarations from third parties.

If you submit letters from landlords, the correspondence must include the landlord's present address and the beginning and ending dates of your residence. Letters from employers, organizations or churches should be on official stationery and include relevant dates, the organization seal (if any) and the signer's name and title.

To evaluate the sufficiency of the applicant's proof of residence, USCIS will take into account the passage of time and attendant difficulties in obtaining corroborative documentation of unlawful residence.

## 7. Additional Sheets.

If you do not have enough space to answer any particular question on this form attach additional sheets and on each sheet indicate your Name, Date of Birth, A-number (if available) and Social Security number (if available) and indicate the number of the question to which you are replying.

## 8. Copies.

If these instructions tell you to submit a copy of a particular document, you should send a copy. If there are stamps, remarks, notations, etc., on the back of the original document(s), please also provide a copy of the back of the document(s).

If you choose to send an original document, you should also send a copy and USCIS will return the original to you. **If you do not provide a copy along with the original, USCIS will attach the original document to your petition and it will not be returned to you.**

There are times when USCIS must request an original copy of a document. In that case, the original is generally returned after it has been reviewed. If you are asked to submit an original document, make a copy for yourself and keep it in a safe place. For your personal records, we advise you to keep copies of the petition and all of the documents you submit to USCIS.

However, if you are interviewed, the original documents must be presented whenever possible at that time except for the following: official government records; employment or employment related records maintained by employers, unions or collective bargaining organizations; medical records; school records maintained by a school or school board; or other records maintained by a party other than the applicant.

Copies of these records must be endorsed as true and correct and must bear the signature and title of persons authorized to act in their behalf. All certified copies of documents become the property of USCIS. At the discretion of a USCIS District Director, original documents, even if accompanied by certified copies, may be temporarily retained.

## 9. Foreign Language Documents.

Any document in a foreign language must be accompanied by an English translation. The translator must certify that he or she is competent to translate the foreign language into English and that the translation is accurate.

## 10. Interview.

You may be required to be present for a personal interview by a USCIS officer.

## 11. Biometric Services for Applicant's Fingerprints, Photograph and Signature.

If you are between the ages of 14 and 79 years, you must be fingerprinted as part of the USCIS biometric services requirements. Biometric services may also include the taking of your photograph and signature. After you have filed this application, USCIS will notify you in writing on Form I-797, Notice of Action, to call our National Customer Service Center at **1-800-375-5283** to schedule your biometric services appointment at a USCIS Application Support Center in your area. If you fail to appear for the biometric services appointment, your application may be denied.

## 12. What Is the Fee?

The fee is **\$255.00** (two hundred and fifty-five dollars) for each application. The fee must be submitted when you submit your application to USCIS.

If USCIS needs to take your fingerprints, photograph or signature, you must also pay a biometric services fee of **\$70.00** (seventy dollars).

**Do not send cash.** The fee must be submitted in the exact amount. The fee cannot be refunded, regardless of the action taken on the application. A separate check or money order must be submitted for each application.

The check or money order should be made payable to the **Department of Homeland Security**.

When preparing your check or money order, spell out Department of Homeland Security. Do not use the initials "USDHS" or "DHS."

## How to Check If the Fee Is Correct.

The fee on this form is current as of the edition date appearing in the lower right corner of this page. However, because USCIS fees change periodically, you can verify if the fee is correct by following one of the steps below:

- Visit our website at **www.uscis.gov** and scroll down to "Forms and E-Filing" to check the appropriate fee, or
- Review the Fee Schedule included in your form package, if you called us to request the form, or
- Telephone our National Customer Service Center at **1-800-375-5283** and ask for the fee information.

**NOTE:** If your petition or application requires a biometric services fee for USCIS to take your fingerprints, photograph or signature, use the same procedure above to confirm the biometrics fee.

## 13. Employment Authorization.

Applicants seeking employment authorization must mail Form I-765, Application for Employment Authorization, to the appropriate address noted in these Instructions on **Page 1, Number 1**. Provide the **\$180.00** fee with the Form I-765 application.

An applicant previously issued a CSS or LULAC/Newman employment authorization document may file a Form I-765 one time without a fee. Such Form I-765 must be submitted together with Form I-687 and worksheet. Subsequent Forms I-765 must be submitted with fee.

## 14. Penalties for False Statements.

Whoever files an application for adjustment of status under Section 245A of the Act and who knowingly and willfully falsifies, misrepresents, conceals or covers up a material fact or makes any false, fictitious, or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious, or fraudulent statement or entry will be subject to criminal prosecution and/or removal.

## 15. Our Authority for Collecting This Information.

The authority to prescribe this form is contained in the "Immigration Reform and Control Act of 1986." The information is necessary to determine whether a person is eligible for the immigration benefit sought. Information on race is requested in question **Number 13** of the form for statistical purposes only. You do not have to give this information. All other questions must be answered. Failure to do so may result in the denial of your application.

## 16. Confidentiality.

The information provided in this application is confidential and may only be used as provided in INA Section 245A(c) (5). The information provided is subject to verification by USCIS.

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## 17. USCIS Forms and Information.

To order USCIS forms, call our toll-free number at **1-800-870-3676**. You can also get USCIS forms and information on immigration laws, regulations and procedures by telephoning our **National Customer Service Center** at **1-800-375-5283** or visiting our internet website at **www.uscis.gov**.

## 18. Use InfoPass for Appointments.

As an alternative to waiting in line for assistance at your local USCIS office, you can now schedule an appointment through our internet-based system, **InfoPass**. To access the system, visit our website at **www.uscis.gov**. Use the **InfoPass** appointment scheduler and follow the screen prompts to set up your appointment. **InfoPass** generates an electronic appointment notice that appears on the screen. Print the notice and take it with you to your appointment. The notice gives the time and date of your appointment, along with the address of the USCIS office.

## 19. Paperwork Reduction Act Notice.

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can easily be understood and that impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex.

The estimated average time to complete and file this application is as follows: (1) 20 minutes to learn about the law and form; (2) 20 minutes to complete the form; and (3) 30 minutes to assemble and file the application; for a total estimated average time of 1 hour and 10 minutes per application.

If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you may write to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., Washington, DC 20529; OMB No. 1615-0090. **Do not mail your completed application to this address.**

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

**I-687, Application for Status as a  
Temporary Resident Under Section 245A of the INA**

**Do not write in this block. For USCIS Use Only.**

Action Block	Fee Stamp	
	Principal Applicant's A#	This applicant's A#

**START HERE - Please type or print in capital letters in black ink.** *If you need more space, use a separate sheet(s) of paper.*

1. I hereby apply for status as indicated by the block checked below.

- A.** Temporary Resident Status as an alien who illegally entered the U.S. prior to January 1, 1982.
- B.** Temporary Resident Status as an alien who entered the U.S. as a nonimmigrant prior to January 1, 1982 and whose authorized stay expired before such date or whose unlawful status was known to the Government as of January 1, 1982.

<b>2. Name</b>			<b>3. Date of Birth (mm/dd/yyyy)</b>
Family Name (in capital letters)	Given Name	Middle Name	
<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>

<b>4. Other Names Used or Known by (Including maiden name, if married)</b>	<b>5. Telephone Numbers (Including Area Codes)</b>
<input style="width:95%;" type="text"/>	Home: <input style="width:150px;" type="text"/> Work: <input style="width:150px;" type="text"/>

<b>6. Home Address in the U.S.</b>		<b>U.S. Social Security #</b>
In care of	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Number and Street	<input style="width:95%;" type="text"/>	Apt. # <input style="width:50px;" type="text"/>
City	State	Zip Code
<input style="width:250px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:150px;" type="text"/>

<b>7. Mailing Address in the U.S. (if different from address in Number 6.)</b>		
In care of	<input style="width:95%;" type="text"/>	
Number and Street	<input style="width:95%;" type="text"/>	Apt. # <input style="width:50px;" type="text"/>
City	State	Zip Code
<input style="width:250px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:150px;" type="text"/>

<b>8. Last Address Outside the U.S.</b>			
Number and Street	<input style="width:95%;" type="text"/>		Apt. # <input style="width:50px;" type="text"/>
City	County, Province or State	Country	<input style="width:150px;" type="text"/>
<input style="width:200px;" type="text"/>	<input style="width:150px;" type="text"/>	<input style="width:100px;" type="text"/>	

<b>9. Country of Citizenship</b>	<input style="width:95%;" type="text"/>
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<b>10. Place of Birth</b>			
City or Town	County, Province or State	Country	<input style="width:150px;" type="text"/>
<input style="width:150px;" type="text"/>	<input style="width:150px;" type="text"/>	<input style="width:100px;" type="text"/>	

**11. Marital Status**

Now Married     Never Married     Separated     Divorced     Widowed

**12. Gender**

Male  
 Female

**13. Race**

Asian or Pacific Islander     Black, not of Hispanic origin     Other (specify below)  
 Hispanic     White, not of Hispanic origin

**14. Have you previously applied for temporary residence as a Legalization applicant?**

No     Yes    If Yes, give date, place of filing and final disposition, if known.

**15. Do you have other records with USCIS (or the former INS)?**

No     Yes    If Yes, give file numbers.    A#    Other

**16. When did you last come to the U.S.?**    **17. Manner of Entry**

(mm/dd/yyyy)     Without a visa     With a visa (visitor, student, etc.) specify

**18. Place of last entry into U.S.**

Port of Entry (City and State)     Border - Not through a Port of Entry (State)

**19. Mother's Name**

(Give maiden name, last name, first name)

Living

Deceased (year)

**20. Father's Name**

(Give last name, first name)

Living

Deceased (year)

**If you were admitted as a nonimmigrant prior to January 1, 1982, complete Numbers 21 through 29. If not, leave blank and go to Number 30.**

**21. Passport Number**

**22. Country that issued Passport**

**23. Location where visa issued (City and Country)**

**24. Type of visa issued (B-2, F-1, etc.)**

**25. Date visa issued (mm/dd/yyyy)**

**26. Authorized stay in U.S. Expired (mm/dd/yyyy)**

**27. Class of admission (Student, visitor, etc.)**

**28. Did you violate your legal status prior to January 1, 1982?**

No     Yes

**29. Was your status violation known to the Government prior to January 1, 1982?**

No     Yes    If Yes, how was your status violation known to the Government?

**30. RESIDENCES IN THE UNITED STATES:**

List all of your residences in the United States since your first entry, beginning with your present address.

If you need more space, attach an additional sheet(s). Indicate on the sheet(s) that the information refers to question **Number 30**.

Street Name and Number (Apt. No.)

City

State and Zip Code

From (mm/yy)

To (mm/yy)

**Present**

Street Name and Number (Apt. No.)

City

State and Zip Code

From (mm/yy)

To (mm/yy)

Street Name and Number (Apt. No.)

City

State and Zip Code

From (mm/yy)

To (mm/yy)

**30. RESIDENCES IN THE UNITED STATES, continued:**

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

Street Name and Number (Apt. No.)				
City	State and Zip Code	From (mm/yy)	To (mm/yy)	

**31. AFFILIATIONS OR ASSOCIATIONS:** To which you belong or have belonged. Please list all affiliations or associations, clubs, organizations, churches, unions, businesses, etc. to which you belong or have belonged. If you need more space, attach an additional sheet(s). Indicate on the sheet(s) that the information refers to question **Number 31**.

Name of Organization	Location (City and State)	From (mm/yy)	To (mm/yy)

**32. ABSENCES FROM THE UNITED STATES SINCE ENTRY:** List most recent absence first and then all previous absences dating back to January 1, 1982. If you need more space, attach an additional sheet(s). Indicate on the sheet(s) that the information refers to question **Number 32**.

Country	Purpose of Trip	From (mm/yy)	To (mm/yy)



**32. ABSCENCES FROM THE UNITED STATES SINCE ENTRY,continued.**

Country	Purpose of Trip	From (mm/yy)	To (mm/yy)

**33. EMPLOYMENT IN THE UNITED STATES SINCE ENTRY:** Show most recent employment first and then all previous employment dating back to January 1, 1982. If none, write "None." If you need more space, attach an additional sheet(s). Indicate on the sheet(s) that the information refers to question **Number 33**.

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

**33. EMPLOYMENT IN THE UNITED STATES SINCE ENTRY, continued.**

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

**33. EMPLOYMENT IN THE UNITED STATES SINCE ENTRY, continued.**

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

Full Name of Employer

Street Name and Number (Apt. No.)

City  State and Zip Code  Occupation

Annual Wage  Hourly Wage  From (mm/yy)  To: (mm/yy)

34.  I have registered under the Military Selective Service Act. My Selective Service Number is:
- I am a male over the age of 17 and under the age of 26 required to register under the Military Selective Service Act and have not done so. I wish to register at this time. My SSS Form 1 is attached.
- I am a male born after 1959 and over the age of 26 and cannot now register.
- I am exempt from Selective Service Registration either because I am a female or I was born before 1960.

35. Have you ever assisted in the persecution of any person or persons on account of race, religion, political opinion, nationality or membership in a particular social group? Yes  No

36. Have you ever been treated for a mental disorder, drug addiction or alcoholism? Yes  No

37. Have you **ever** committed a crime or offense for which you were **not** arrested? Yes  No

Have you **ever** been arrested, cited or detained by any law enforcement officer (including USCIS or former INS and military officers) for any reason? Yes  No

Have you **ever** been charged with committing any crime or offense? Yes  No

Have you **ever** been convicted of a crime or offense? Yes  No

Have you **ever** been in jail or prison? Yes  No

Have you **ever** been placed in an alternative sentencing or a rehabilitative program (for example: diversion, deferred prosecution, withheld adjudication, deferred adjudication)? Yes  No

Have you **ever** received a suspended sentence, been placed on probation or been paroled? Yes  No

38. Have you, or a dependent member of your immediate family, ever received public assistance from any source, including, but not limited to, the United States Government, any state, county, city or municipality? Yes  No

If yes, provide the names(s) of the recipients(s) and U.S. Social Security number(s).

<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>
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39. Have you ever:

a. within the past 10 years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future? Yes  No

b. engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling? Yes  No

c. knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the United States illegally? Yes  No

d. illicitly trafficked in any controlled substance, or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance? Yes  No

Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to any person or organization that has ever engaged or conspired to engage in sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity? Yes  No

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

Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party? Yes  No

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

Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin or political opinion? Yes  No

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

Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act 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

Have you ever left the United States to avoid being drafted into the United States Armed Forces? Yes  No

Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and have not yet complied with that requirement or obtained a waiver? Yes  No

Are you now withholding custody of a United States citizen child outside the United States from a person granted custody of the child? Yes  No

Do you plan to practice polygamy in the United States? Yes  No

40. If your native alphabet is in other than Roman letters, write your name in your native alphabet.

41. Language of your native alphabet.

**42. Signature and Certification of Applicant**

I CERTIFY, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. I hereby consent and authorize the U.S. Citizenship and Immigration Services to verify the information provided and to conduct police, welfare and other record checks pertinent to this application.

Signature

Date

43. Signature of person preparing form, if other than applicant.

I declare under penalty of perjury that I prepared this application at the request of the above person.

The answers provided are based on information of which I have personal knowledge and/or were provided to me by the above named person in response to the exact questions contained on this form.

Signature

Date

Print Name

Address

Telephone number with area code

**U.S. Citizenship and Immigration Services Use Only**

44. Recommendation: Temporary Residence  Approved  Denied

45. Recommendation: Waiver of Inadmissibility under Section 212(a)  Approved  Denied

46. Class of Admission	47. Place of Adjustment	48. Date of Adjustment
49. Recommended by (Print Name and Title)	50. ID Number	51. Date

52. Final Action: Temporary Residence  Approved  Denied

53. Director, Regional Processing Center	54. ID Number	55. Date
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## CSS/Newman (LULAC) Class Membership Worksheet

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**LEGALIZATION APPLICANTS:** You must complete this Class Membership Worksheet and file it with your Form I-687 if you are applying for legalization under the Immigration Reform and Control Act of 1986 (IRCS), 8 U.S.C. 1255a, pursuant to the settlement agreements reached in Catholic Social Services v. Ridge et al. (CSS) or Newman v. USCIS. (Newman/LULAC). Your completed Form I-687, with fee, together with this worksheet must be received by USCIS no later than December 31, 2005.

In order to apply, answer every question on this Class Membership Worksheet, which is a supplement to your application for temporary resident status. Provide your complete name and Alien Registration Number (A#) and mark your responses in the boxes provided below.

Family Name (in capital letters)	Given Name	Middle Name	A Number

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| 1. During the period between May 5, 1987 and May 4, 1988, did you (or a parent or spouse) visit an office of the former Immigration and Naturalization Service (INS) to apply for legalization, but were turned away because the INS or the Qualified Designated Entity (QDE) believed that <b>(1)</b> you had traveled outside the United States after November 6, 1986, without advance parole, OR <b>(2)</b> you had traveled outside the United States and returned after January 1, 1982, with a visitor's visa, student visa or any other type of visa or travel document?      | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Did you enter the United States before January 1, 1982, and then reside in a continuous unlawful status, except for brief absences, from before 1982 until the date you (or your parent or spouse) were turned away by the INS when you (or your parent or spouse) tried to apply for legalization during 1987 to 1988?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Were you continuously physically present in the United States, except for brief, casual and innocent departures from November 6, 1986, until the date you (or your parent or spouse) were turned away by the INS when you (or your parent or spouse) tried to apply for legalization?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever been convicted of a felony or three or more misdemeanors committed in the United States, or have you ever been convicted of crimes, or committed acts which make you inadmissible pursuant to any provision of the Immigration and Nationality Act including but not limited to: section 212(a)(2)(A)(i)(I) (crime involving moral turpitude); section 212(a)(2)(B) (multiple criminal convictions); section 212(a)(2)(C) (controlled substance traffickers); Section 212(a)(2)(A)(i)(II) (controlled substances); section 212(a)(3) (security and related grounds)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Did you (or your parent or spouse) apply for a work permit or otherwise register for class membership under <u>CSS</u> or <u>Newman/LULAC</u> before October 1, 2000. If "Yes," attach copies of any available proof (for example, your <u>CSS</u> or <u>Newman</u> work permit).  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. When you (or your parent or spouse) visited the INS or a QDE during the legalization application period, did you (or your parent or spouse) bring with you a completed legalization application and fee?   | <input type="checkbox"/> | <input type="checkbox"/> |

**NOTE:** If you answered "Yes" to Questions 1, 2 and 3 and "No" to Question 4, and "Yes" to either Question 5 or 6, your answers indicate that you may be eligible for legalization under the settlement agreements.

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### APPLICANT'S CERTIFICATION:

I certify, under the penalty of perjury under the laws of the United States of America, that this worksheet and the evidence submitted with it are all true and correct. I authorize the release of any information from the records that the U.S. Department of Homeland Security needs to determine eligibility for the benefit I am seeking.

I understand that information I provide in connection with this Class Membership Worksheet is confidential and may not be used to arrest, remove or deport me or for any purpose unrelated to the adjudication of this Class Membership Worksheet, except as provided in 8 U.S.C. 1255a(c)(5).

**Signature**

**Date**