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 (
Address - Street Number and Name Apt. #		Resubmitted	
C/O (in care of)			
City Sta		Reloc Sent	
Date of Birth (mm/dd/yyyy)	Country of Birth		
Country of Citizenship/Nationality U.S. So	cial Security # (if any) A # (if any)	Reloc Rec'd	
Date of Last Arrival (mm/dd/yyyy)	I-94 #		
Current USCIS Status	Expires on (mm/dd/yyyy)	Applicant Interviewed	
Part 2. Application Type (Check one)		Section of Law	
 I am applying for an adjustment to perma 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. c 	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		
entry, or I am the K-2 child of such a f petition approval notice and the marria d. I was granted asylum or derivative asy granted asylum and am eligible for adj	Eligibility Under Sec. 245 Approved Visa Petition Dependent of Principal Alien		
e. I am a native or citizen of Cuba admitt January 1, 1959, and thereafter have be for at least 1 year.	Special Immigrant 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			
h. Other basis of eligibility. Explain (for example, I was admitted as a refugee, my status has not been terminated, and I have been physically present in the United States for 1 year after admission). If additional space is needed, see Page 2 of the instructions.			
I am already a permanent resident and am applying to have the date I was granted permanent residence adjusted to the date I originally arrived in the United States as a nonimmigrant or parolee, or as of May 2, 1964, whichever date is later, and: (Check one)		To be Completed by Attorney or Representative, if any Fill in box if Form G-28 is attached to represent the applicant.	
i. I am a native or citizen of Cuba and me	eet the description in (e) above.	VOLAG#	
j. I am the husband, wife, or minor unmarried child of a Cuban and meet the description in (f) above.		ATTY State License #	

Part 3. Processing Information						
A. City/Town/Village of Birth	1	Current Occupation				
Your Mother's First Name		Your Father'	s First Name			
Give your name exactly as it appears	on your Form I-94, Arrival-	Departure Record				
	,	<u>.</u>				
Place of Last Entry Into the United States (City/State)		In what status did you last enter? (Visitor, student, exchange visitor, crewman, temporary worker, without inspection, etc.)				
Were you inspected by a U.S. Immig	ration Officer? Yes	No L				
Nonimmigrant Visa Number		Consulate W	here Visa Was Issued	ued		
Data Vice Issued (mm/dd/nnn)	landar	Marital State	M :4104			
Date visa issued (mm/dd/yyyy)	Date Visa Issued (mm/dd/yyyy) Gender Marital Status Marital Status Married Single			Divorced Widowed		
Have you ever applied for permanent resident status in the U.S.? Yes (If "Yes" give date and place of filing and final disposition.)				lace of No		
B. List your present spouse and all of your children (include adult sons and daughters). (If you have none, write "None." If additions space is needed, see Page 2 of the instructions.)						
Family Name (Last Name)		Given Name (First Name) Middle Initia		Date of Birth (mm/dd/yyyy)		
Country of Birth	Relationship			Applying with you?		
Country of Birtin	Relationship	F	A # (if any)	Yes No		
Family Name (Last Name)	Given Name (First N	Name)	Middle Initial			
C (P' 1	D 1 .: 1:			A 1: 24 0		
Country of Birth	Relationship	F	A # (if any)	Applying with you?		
Family Name (Last Name)	Given Name (First N	Name)	Middle Initial	Yes No Date of Birth (mm/dd/yyyy)		
	,	•		, , , , , , , , , , , , , , , , , , , ,		
Country of Birth	Relationship	F	A # (if any)	Applying with you?		
Family Name (I. 1)	Ciara Nama (Ei a)	7	M: 1.11. T.: 22.1	Yes No		
Family Name (Last Name)	Given Name (First N	Given Name (First Name) Middle Initia		Date of Birth (mm/dd/yyyy)		
Country of Birth	Relationship	A	A # (if any)	Applying with you?		
				Yes No		
Family Name (Last Name)	Given Name (First N	Name)	Middle Initial	Date of Birth (mm/dd/yyyy)		
Country of Birth	Relationship		 A # (if any)	Applying with you?		
				Yes No		

Pa	rt 3. Processing Informat	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 2 of the instructions under "What Are the General Filing Instructions?"				. If none, eded,
	Name of Organization	Location and Nature	Date of Membership	Date of Membership	
			From	Te)
mu Ins	ust be submitted according to the structions?" Information about	If your answer is "Yes" to any question, e guidelines provided on Page 2 of the in documentation that must be include with that you are not entitled to adjust status of	structions under "What Are the Gene your application is also provide in th	eral Filing	
1.	Have you EVER, in or outside	the United States:			
	a. Knowingly committed any arrested?	crime of moral turpitude or a drug-related	d offense for which you have not been	n Yes 🗌	No 🗌
	b. Been arrested, cited, charge or ordinance, excluding tra	ed, indicted, convicted, fined, or imprison ffic violations?	ed for breaking or violating any law	Yes	No 🗌
	c. Been the beneficiary of a pa	ardon, amnesty, rehabilitation decree, other	er act of clemency, or similar action?	Yes	No 🗌
	d. Exercised diplomatic immu	unity to avoid prosecution for a criminal c	ffense in the United States?	Yes	No 🗌
		tance in the United States from any source icipality (other than emergency medical to	•		No 🗌
3.	Have you EVER :				
	a. Within the past 10 years be activities in the future?	en a prostitute or procured anyone for pro	stitution, or intend to engage in such	Yes	No 🗌
	b. Engaged in any unlawful co	ommercialized vice, including, but not lin	nited to, illegal gambling?	Yes	No 🗌
	c. Knowingly encouraged, incillegally?	luced, assisted, abetted, or aided any alier	to try to enter the United States	Yes	No 🗌
	d. Illicitly trafficked in any cotrafficking of any controlle	ontrolled substance, or knowingly assisted d substance?	, abetted, or colluded in the illicit	Yes	No 🗌
	membership or funds for, or has upport to any person or organ	onspired to engage in, or do you intend to ve you through any means ever assisted of ization that has ever engaged or conspired or or any other form of terrorist activity?	or provided any 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 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 10 of the before completing this section.)	e instructions			
Are you requesting an accommodation because of your disability(ies) and/or impairment(s)?	Yes No			
If you answered "Yes," check 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 impairment(s) and accommodation(s) you are requesting):				

Part 5. Signature (Read the information on penalties on Page 10 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 (Check one)		
☐ I can read and understand English, and as my answer to each question.	I have read and understand each and every quest	tion and instructi	on on this form, as well
language, a la	n on this form, as well as my answer to each que nguage in which I am fluent, by the person name ry question and instruction on this form, as well a	d in Interpreter	's Statement and
	e laws of the United States of America, that the inve not withheld any information that would affect		
I authorize the release of any information f determine eligibility for the benefit I am se	from my records that U.S. Citizenship and Immig beking.	gration Services (USCIS) needs to
Signature (Applicant)	Print Your Full Name	Date (mm/dd/yyyy)	Daytime Phone Number (include area code)
NOTE: If you do not completely fill out the eligible for the requested benefit, and this continues.	is form or fail to submit required documents liste application may be denied.	ed in the instructi	ions, you may not be found
	Interpreter's Statement and Signature		
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)	Phone Number (include area code)
	ng Form, If Other Than Above		
I declare that I prepared this application have knowledge.	at the request of the above applicant, and it i	s based on all in Date	formation of which I Phone Number
Signature	Print Your Full Name	(mm/dd/yyyy)	(include area code)
Firm Name and Address	E-Mail A	ddress (if any)	