START HERE - Please Type or Print		FOR INS USE ONLY			
Part 1. Information about you.				Returned	Receipt
- /	ven		Middle Initial		
Address - C/O:				Resubmitted	
Street Number and Name			Apt. #		
City	State or Province			Reloc Sent	
Country		Zip/Postal Code			
Date of Birth (month/day/year)	Country of Birth	ouu		Reloc Rec'd	
Social Security #	A #				
Conditional residence expires on (month/day/year)	π			□ Applicant	
Mailing address if different from residence in C/O:				Applicant Interviewed	
Street Number and Name			Apt. #		
City	State or		#		
	Province	7::: (D = = t = l		Remarks	
Country		Zip/Postal Code			
Part 2. Basis for Petition (check	one).				
 a. My conditional residence is based on my marriar resident, and we are filing this petition together. b. I am a child who entered as conditional perman included in a Joint Petition to Remove the Conditional permanent. 	ent resident and	I am unable to b	e		
Residence (Form I-751) filed by my parents. My conditional residence is based on my marriage to a U.S. citizen or permanent resident, but I am unable to file a joint petition and I request a waiver because: (check one) c. My spouse is deceased.					
 I entered into the marriage in good faith, but the marriage was terminated through divorce/annulment. 					
 e. I am a conditional resident spouse who entered into the marriage in good faith, or I am a conditional resident child, who has been battered or subject to extreme mental cruelty by my citizen or permanent resident spouse or parent. f. The termination of my status and deportation from the United States would result in an extreme hardship. 		Action			
Part 3. Additional Information ab	out you.				
Other names used (including maiden name):	Telephor	ne #			
Date of Marriage	Place of	Marriage			
If your spouse is deceased, give the date of death (month/day/year)				To be com	
Are you in deportation or exclusion proceedings? Was a fee paid to anyone other than an attorney in connect with this petition?	ction		No	Attorney or Represe Fill in box if G-28 the applicant	entative, if any is attached to represent
			No	ATTY State License #	
Form I-751 (Rev. 12-4-91) Continued	d on back.			TTTT Suit Litelise #	

Part 3. Additional Information about you. (cont'd)

Since becoming a conditional resident, have you ever been arrested, cited, charged, indicted, convicted, fined or imprisoned for breaking or violating any law or ordinance (excluding traffic regulations), or committed any crime for which	
you were not arrested?	Yes No
If you are married, is this a different marriage than the one through which conditional residence status was obtained?	🗌 Yes 🗌 No
Have you resided at any other address since you became a permanent resident?	Yes No (If yes attach a
ls your spouse currently serving or employed by the U.S. government and serving outside the U.S.?	list of all addresses and dates.)
	Yes No

Part 4. Information about the spouse or parent through whom you gained your conditional residence.

Family	Given	Middle	Phone
Name	Name	Initial	Number

Address

Date of Birth	Social	A#
(month/day/year)	Security #	

Part 5. Information about your children. List all your children. Attach another sheet if necessary

Name	Date of Birth (month/day/year)	If in U.S., give A#, current immigration status and U.S. Address	Living with you?
1			🗌 Yes 🗌 No
2			🗌 Yes 🗌 No
3			🗌 Yes 🗌 No
4			🗌 Yes 🗌 No

Part 6. Complete if you are requesting a waiver of the joint filing petition requirement based on extreme mental cruelty.

Evaluator's ID Number: State: Number:	Expires on (month/day/yea	Occupation ear)
Last	First	Address
Name	Name	

Part 7. Signature. Read the information on penalties in the instructions before completing this section. If you checked block "a" in Part 2 your spouse must also sign below.

I certify under penalty of perjury under the laws of the United States of America, that this petition, and the evidence submitted with it, is all true and correct. If conditional residence was based on a marriage, I further certify that the marriage was entered in accordance with the laws of the place where the marriage took place, and was not for the purpose of procuring an immigration benefit. I also authorize the release of any information from my records which the Immigration and Naturalization Service needs to determine eligibility for the benefit being sought.

Signature	Print Name	Date
Signature of spouse	Print Name	Date

Please note: If you do not completely fill out this form, or fail to submit any required documents listed in the instructions, then you cannot be found eligible for the requested benefit, and this petition may be denied.

Part 8. Signature of person preparing form if other than above.

I declare that I prepared this form at the request of the above person and it is based on all information of which I have knowledge.

Signature	Print Name	Date
Firm Name		

and Address