NOTE: Use this form only if you are applying to adjust status to that of a lawful permanent resident under section 245(i) of the Immigration and Nationality Act.

Part A.	Information about	you.		For USCIS Use Only
Last Nan	me	First Name	Middle Name	Action Block
Address:	In Care Of			
Street No	umber and Name		Aut #	
Sueet N	umber and Name		Apt. #	1 <b>   </b>
City	St	tate	Zip Code	
Alien Re	egistration Number (A #) if	any Date of B	sirth (mm/dd/yyyy)	
Country	of Birth	Country o	of Citizenship/Nationality	
				]
Telephor	ne Number	E-Mail Ac	ddress, if any	
1	)			
				- 1
Part B. H	Eligibility. (Check the c	correct response.)		
. I am fi	ling Supplement A to F	orm I-485 because:	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
. I am fi	ling Supplement A to F I am the beneficiary of a	orm I-485 because: visa petition filed on or	r before January 14, 1998.	Foro April 20, 2001
. I am fil a.	ling Supplement A to F I am the beneficiary of a I am the beneficiary of a	orm I-485 because: visa petition filed on or visa petition filed on or	r after January 15, 1998, and on or bet	÷
. I am fil a.	ling Supplement A to F I am the beneficiary of a I am the beneficiary of a I am the beneficiary of a	orm I-485 because: visa petition filed on or visa petition filed on or application for a labor	r after January 15, 1998, and on or bet r certification filed on or before Janua	ry 14, 1998.
. I am fil a.	ling Supplement A to F I am the beneficiary of a I am the beneficiary of a I am the beneficiary of ar	orm I-485 because: visa petition filed on or visa petition filed on or a application for a labor	r after January 15, 1998, and on or bet r certification filed on or before Janua	ry 14, 1998. 15, 1998, and on or before April 30, 200
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## 1. Are you applying to adjust status based on any of the below reasons?

- a. You were granted asylum in the United States;
- **b.** You have continuously resided in the United States since January 1, 1972;
- c. You entered as a K-1 fiancé(e) of a U.S. citizen;
- **d.** You have an approved Form I-360, Petition for Amerasian, Widow(er), Battered or Abused Spouse or Child, or Special Immigrant, and are applying for adjustment as a special immigrant juvenile court dependent or a special immigrant who has served in the U.S. armed forces, or a battered or abused spouse or child;
- e. You are a native or citizen of Cuba, or the spouse or child of such alien, who was not lawfully inspected or admitted to the United States;
- f. You are a special immigrant retired international organization employee or family member;
- g. You are a special immigrant physician;

Part C. Additional eligibility informat	ion. (Continued.)					
<b>h.</b> You are a public interest parolee, who wa Cambodia (a "Lautenberg Parolee" under		ormer Soviet Union, Vietnam, Laos or				
i. You are eligible under the Immigration N	lursing Relief Act.					
<b>No.</b> I am not applying for adjustment of	No. I am not applying for adjustment of status for any of these reasons. (Go to next question.)					
Yes. I am applying for adjustment of status for any one of these reasons. (If you answered "Yes," do not file this form.)						
2. Do any of the following conditions desc	ribe you?					
a. You are already a lawful permanent re-	sident of the United States.					
<b>b.</b> You have continuously maintained law	wful immigration status in the United States since November 5, 1986.					
	e spouse or unmarried minor child of a U.S. were inspected and lawfully admitted to the					
<b>No.</b> None of these conditions describ	be me. (Go to <b>Part D</b> . Signature.)					
Yes. If you answered "Yes," do no	,					
Part D. Signature. Read the information	on penalties in the instructions before com	pleting this section.				
I certify, under penalty of perjury under the lawith it is all true and correct. I authorize the Services needs to determine eligibility for the	release of any information from my records					
Signature	Print Name	Date				
Part E. Signature of person preparing before completing this section.	form, if other than above. Read the in	nformation on penalties in the instructions				
I certify, under penalty of perjury under the laperson and that to the best of my knowledge t						
Signature	Print Name	Date				
Firm Name and Address	Daytime Pho	one Number (Area Code and Number)				
	E-Mail Addr	ress, if any				
	1.1					