

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

Form I-600, Petition to Classify Orphan as an Immediate Relative

TO THE U.S. SECRETARY OF STATE:

The petition was filed by:

☐ Married petitioner

☐ Unmarried petitioner

The petition is approved for orphan:

☐ Adopted abroad

☐ Coming to U.S. for adoption.

Pre adoption requirements have
been met

Remarks:

Fee Stamp

File Number:

DATE OF FAVORABLE
DETERMINATION

DD

DISTRICT

Type or print legibly in black ink. Complete a separate petition for each child.

Petition is being made to classify the named orphan as an immediate relative.

BLOCK I - Information About Petitioner

1. My name is: (Last) (First) (Middle)

2. Other names used (including maiden name if appropriate):

3. I reside in the U.S. at: (C/O if appropriate)

(Number and Street) (Apt. No.)

(Town or City) (State) (Zip Code)

4. Address abroad (if any):

(Number and Street) (Apt. No.)

(Town or City) (State or Province)

(Country)

5. I was born on: (mm/dd/yyyy)

In:

(Town or City) (State or Province)

(Country)

6. My telephone number is: (include area code)

7. I am a citizen of the United States through:

☐ Birth ☐ Parents ☐ Naturalization

If acquired through naturalization, provide the following:

a. Name under which you naturalized:

b. Naturalization certificate number:

c. Date of naturalization (mm/dd/yyyy):

d. Place of naturalization:

If acquired through parentage, have you obtained a
certificate in your own name based on that acquisition?

☐ No ☐ Yes

If not, submit evidence of citizenship. See **Page 2** of the
instructions.

Have you or any person through whom you claimed
citizenship ever lost U.S. citizenship?

☐ No ☐ Yes (If "Yes," attach detailed
explanation)

Received	Trans. In	Ret'd Trans. Out	Completed

BLOCK I - Information About the Prospective Adoptive Parent *(Continued)*

8. My marital status is:

a. ☐ Married ☐ Widowed ☐ Divorced ☐ Single

b. I have been married _____ time(s)

9. If you are now married, provide the following information:

Date of present marriage (mm/dd/yyyy):

Place of present marriage:

Name of present spouse:

(Last)

(First)

(Middle)

(Maiden, if any)

Date of birth of present spouse (mm/dd/yyyy):

Place of birth of present spouse:

My spouse has been married _____ time(s)

My spouse resides: ☐ With me ☐ Apart from me (provide address below)

(Number and Street)

(Apt. No.) (City)

(State)

(Country)

BLOCK II - Information About Orphan Beneficiary

10. Name at birth:

(Last)

(First)

(Middle)

11. Name at present:

(Last)

(First)

(Middle)

12. Any other names by which orphan is or was known:

13. Gender: ☐ Male ☐ Female

14. Date of birth (mm/dd/yyyy): _____

15. Place of birth:

(City)

(State or Province)

(Country)

16. The beneficiary is an orphan because (check one): ☐ He or she has no parents ☐ He or she has only one parent who is the sole or surviving parent

17. If the orphan has only one parent, answer the following:

a. State what has become of the other parent:

b. Is the remaining parent capable of providing for the orphan's support?

☐ No

☐ Yes

c. Has the remaining parent in writing irrevocably released the orphan for emigration and adoption?

☐ No

☐ Yes

BLOCK II - Information About Orphan Beneficiary (Continued)

18. Has the orphan been adopted abroad by the petitioner and spouse jointly or the unmarried petitioner? ☐ No ☐ Yes

If "Yes," did the petitioner and spouse or unmarried petitioner personally see and observe the child prior to or during the adoption proceedings? ☐ No ☐ Yes

Date of adoption (mm/dd/yyyy)

Place of adoption

19. If either answer in **Question 18** is "No," answer the following:

a. Does the petitioner and spouse jointly or does the unmarried petitioner intend to adopt the orphan in the United States? ☐ No ☐ Yes

b. Have the preadoption requirements, if any, of the orphan's proposed State of residence been met? ☐ No ☐ Yes

c. If **b** is answered "No," will they be met later? ☐ No ☐ Yes

20. To petitioner's knowledge, does the orphan have any physical or mental affliction? ☐ No ☐ Yes

If "Yes," name the affliction.

21. Who has legal custody of the child?

22. Name of child welfare agency, if any, assisting in this case:

23. Name of attorney abroad, if any, representing petitioner in this case:

Address of above attorney abroad:

24. Address in the United States where orphan will reside:

25. Present address of orphan:

26. If orphan is residing in an institution, give full name of institution:

27. If orphan is not residing in an institution, give full name of person with whom residing:

28. Give any additional information necessary to locate orphan, such as name of district, section, zone, or locality in which orphan resides:

BLOCK II - Information About Orphan Beneficiary (Continued)

29. Location of U.S. Embassy or consulate where application for visa will be made:

(City in Foreign Country)

(Foreign Country)

BLOCK III - Accommodations for Individuals With Disabilities and Impairments (Read the information in the instructions before completing this section.)

30. I am requesting an accommodation:

A. Because of my disability(ies) and/or impairment(s). ☐ No ☐ Yes

B. For my spouse because of his or her disability(ies) and/or impairment(s). ☐ No ☐ Yes

C. For my household member because of his or her disability(ies) and/or impairment(s). ☐ No ☐ Yes

If you answered "Yes," check any applicable box. Provide information on the disability(ies) and/or impairment(s) for each person:

☐ 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)):

☐ Blind or sight-impaired and request the following accommodation(s):

☐ Other type of disability(ies) and/or impairment(s) (describe the nature of the disability(ies) and/or impairment(s) and accommodation(s) being requested):

Certification of Petitioner

I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct, and that I will care for an orphan or orphans properly if admitted to the United States.

(Signature of Petitioner)

Executed on (Date)

Certification of Married Prospective Petitioner's Spouse

I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct, and that my spouse and I will care for an orphan or orphans properly if admitted to the United States.

(Signature of Petitioner's Spouse)

Executed on (Date)

Signature of Person Preparing Form, If Other Than Petitioner

I declare that this document was prepared by me at the request of the petitioner and is based entirely on information of which I have knowledge.

(Signature)

Executed on (Date)

Street Address and Room or Suite No./City/State/Zip Code