

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

Form I-929, Petition for Qualifying Family Member of a U-1 Nonimmigrant

FOR USCIS USE ONLY

Bene. A-file reviewed <input type="checkbox"/> Yes <input type="checkbox"/> No	Action Block	Bar Code (USCIS Use only)
U-1 A-file reviewed <input type="checkbox"/> Yes <input type="checkbox"/> No		
Bene. filed I-485 <input type="checkbox"/> Yes <input type="checkbox"/> No		Remarks
U-1 adjusted <input type="checkbox"/> Yes <input type="checkbox"/> No		
U-1 I-485 pending <input type="checkbox"/> Yes <input type="checkbox"/> No		

START HERE -- TYPE OR PRINT LEGIBLY USING BLACK INK

I am filing for my: (Check one)

☐ Spouse

Child: ☐ Biological Child

☐ Stepchild

☐ Adopted Child

Parent: ☐ Biological Parent

☐ Stepparent

☐ Parent who adopted me

Part 1. Information About You

Last Name (Family Name)

First Name (Given Name)

Middle Name

Current Address

Street Number and Name

Apt. Number

<input type="text"/>	<input type="text"/>
----------------------	----------------------

City

State

Zip Code

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Safe Mailing Address If Other Than Above

Street Number and Name

Apt. Number

<input type="text"/>	<input type="text"/>
----------------------	----------------------

City

State

Zip Code

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Date of Birth

A-Number

<input type="text"/>	<input type="text"/>
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Part 2. Information About Your Alien Relative

Last Name (Family Name)

First Name (Given Name)

Middle Name

Current Address

Street Number and Name

Apt. Number

<input type="text"/>	<input type="text"/>
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City

State/Province

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Country

Postal/Zip Code

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Mailing Address If Other Than Above

Date of Birth

A-Number

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Part 1. Information About You (Cont'd)

Country of Birth

Social Security Number

--	--

Country of Citizenship/Nationality

--

Gender: (Check one) ☐ Male ☐ Female**If you ever used other names, provide them below:**

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Marital Status: (Check one)

☐ Single (Never Married)☐ Married☐ Divorced☐ Widowed

Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Place of Marriage

--

Part 2. Information About Your Alien Relative (Cont'd)

Country of Birth

Social Security Number

--	--

Country of Citizenship/Nationality

--

Gender: (Check one) ☐ Male ☐ Female**If alien relative ever used other names, provide them below:**

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Marital Status: (Check one)

☐ Single (Never Married)☐ Married☐ Divorced☐ Widowed

Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name

--

Place of Marriage

--

Part 1. Information About You (Cont'd)Number of marriages including current marriage:

List any previous marriage(s) beginning with the most recent. If you need more space, attach an additional sheet of paper.

Prior Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name Date of Marriage

--	--

Place of Marriage

--

Date of Termination Place of Termination

--	--

Reason for Termination:

☐ Divorce ☐ Death ☐ Annulment
☐ Other _____

Prior Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name Date of Marriage

--	--

Place of Marriage

--

Date of Termination Place of Termination

--	--

Reason for Termination:

☐ Divorce ☐ Death ☐ Annulment
☐ Other _____

Part 2. Information About Your Alien Relative (Cont'd)Number of marriages including current marriage:

List any previous marriage(s) beginning with the most recent. If you need more space, attach an additional sheet of paper.

Prior Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name Date of Marriage

--	--

Place of Marriage

--

Date of Termination Place of Termination

--	--

Reason for Termination:

☐ Divorce ☐ Death ☐ Annulment
☐ Other _____

Prior Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name Date of Marriage

--	--

Place of Marriage

--

Date of Termination Place of Termination

--	--

Reason for Termination:

☐ Divorce ☐ Death ☐ Annulment
☐ Other _____

Part 1. Information About You (Cont'd)

Prior Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name Date of Marriage

--	--

Place of Marriage

--

Date of Termination Place of Termination

--	--

Reason for Termination:

- ☐ Divorce ☐ Death ☐ Annulment
☐ Other _____

Check One:

- ☐ I am a Lawful Permanent Resident
I obtained my Lawful
Permanent Residence on: _____
- ☐ My Form I-485 is currently pending
Receipt Number

Part 2. Information About Your Alien Relative (Cont'd)

Prior Spouse's Name:

Last Name (Family Name) First Name (Given Name)

--	--

Middle Name Date of Marriage

--	--

Place of Marriage

--

Date of Termination Place of Termination

--	--

Reason for Termination:

- ☐ Divorce ☐ Death ☐ Annulment
☐ Other _____

Complete if your relative is in the United States

Date of Admission Place of Admission

--	--

Class of Admission Date Authorized to Stay

--	--

Part 3. Information About Your Alien Relative's Children

Last Name (Family Name)

--

First Name (Given Name)

--

Middle Name

--

Date of Birth

--

Place of Birth

--

☐ Biological Child ☐ Stepchild ☐ Adopted ChildGender: (Check one) ☐ Male ☐ Female

Street Number and Name

--

Apt. Number

--

City

--

State/Province

--

Country

--

Postal/Zip Code

--

A-Number

--

Country of Birth

--

Name of Mother

Last Name (Family Name)

--

First Name (Given Name)

--

Middle Name

--

Name of Father

Last Name (Family Name)

--

First Name (Given Name)

--

Middle Name

--

Part 3. Information About Your Alien Relative's Children (Cont'd)

Last Name (Family Name)

First Name (Given Name)

Middle Name

Date of Birth

Place of Birth

☐ Biological Child☐ Stepchild☐ Adopted Child

Gender: (Check one)

☐ Male☐ Female

Street Number and Name

Apt. Number

City

State/Province

Country

Postal/Zip Code

A-Number

Country of Birth

Name of Mother

Last Name (Family Name)

First Name (Given Name)

Middle Name

Name of Father

Last Name (Family Name)

First Name (Given Name)

Middle Name

Last Name (Family Name)

First Name (Given Name)

Middle Name

Date of Birth

Place of Birth

☐ Biological Child☐ Stepchild☐ Adopted Child

Gender: (Check one)

☐ Male☐ Female

Street Number and Name

Apt. Number

City

State/Province

Country

Postal/Zip Code

A-Number

Country of Birth

Name of Mother

Last Name (Family Name)

First Name (Given Name)

Middle Name

Name of Father

Last Name (Family Name)

First Name (Given Name)

Middle Name

Last Name (Family Name)

First Name (Given Name)

Middle Name

Date of Birth

Place of Birth

☐ Biological Child☐ Stepchild☐ Adopted Child

Gender: (Check one)

☐ Male☐ Female

Part 3. Information About Your Alien Relative's Children (Cont'd)

Street Number and Name

Apt. Number

City

State/Province

Country

Postal/Zip Code

A-Number

Country of Birth

Name of Mother

Last Name (Family Name)

First Name (Given Name)

Middle Name

Name of Father

Last Name (Family Name)

First Name (Given Name)

Middle Name

Last Name (Family Name)

First Name (Given Name)

Middle Name

Date of Birth

Place of Birth

☐ Biological Child☐ Stepchild☐ Adopted Child

Gender: (Check one)

☐ Male☐ Female

Street Number and Name

Apt. Number

City

State/Province

Country

Postal/Zip Code

A-Number

Country of Birth

Name of Mother

Last Name (Family Name)

First Name (Given Name)

Middle Name

Name of Father

Last Name (Family Name)

First Name (Given Name)

Middle Name

Name and address of your alien relative in the language written in the country where he/she currently resides.

Last Name (Family Name)

First Name (Given Name)

Middle Name

C/O: (In Care Of)

Street Number and Name

Apt. Number

City/State or Province

Country

Postal/Zip Code

Part 4. Processing Information

1. Check one:

- a. ☐ The person named in **Part 2** is now in the United States
- b. ☐ **The person named in Part 2 is now outside the United States. (Indicate below at which U.S. Embassy or consulate your relative will apply for a visa.)**

U.S. Embassy or consulate at: _____
City and Country

2. Is the person named in **Part 2** or has this person ever been in deportation or removal proceedings in the United States?

- a. ☐ No
- b. ☐ Yes (Indicate when and where): _____

Part 5. Signature

I certify, or if outside the United States, I swear or affirm, 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. I authorize the release of any information from my record that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking.

Signature	Print Your Full Name	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

Part 6. Preparer's Information, If Other Than Person Signing Above

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

Signature	Print Your Full Name	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Firm Name	Street Number and Name	Suite Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
City/State or Province	Postal/Zip Code	Telephone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>