Department of Homeland Security

U.S. Citizenship and Immigration Services

START HERE - Type or Print (Use black ink)	For USCIS Use Only			
Part 1. Information About You	Returned Receipt			
Family Name (Last Name) Given Name (First Name) Middle Name				
Address - Street Number and Name Apt. #	Resubmitted			
	Resublifited			
C/O (in care of)				
City State Zip Code	<u> </u>			
State Zip Code	Reloc Sent			
Date of Birth (mm/dd/yyyy) Country of Birth	<u> </u>			
Country of Citizenship/Nationality U.S. Social 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			
Expres on (min day)))))	Interviewed			
Part 2. Application Type (Check one)	<u> </u>			
I am applying for an adjustment to permanent resident status because:	Section of Law Sec. 209(a), INA			
 a. An immigrant petition giving me an immediately available immigrant visa number that has been approved. (Attach a copy of the approval notice, or a relative, special immigrant juvenile, or special immigrant military visa petition filed with this application that will give you an immediately available visa number, if approved.) b. My spouse or parent applied for adjustment of status or was granted lawful permanent residence in an immigrant visa category that allows derivative status 	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			
for spouses and children. c. I entered as a K-1 fiancé(e) of a U.S. citizen whom I married within 90 days of entry, or I am the K-2 child of such a fiancé(e). (Attach a copy of the fiancé(e) petition approval notice and the marriage certificate.)	Country Chargeable Eligibility Under Sec. 245			
d. I was granted asylum or derivative asylum status as the spouse or child of a person granted asylum and am eligible for adjustment.	Approved Visa Petition Dependent of Principal Alien			
e. I am a native or citizen of Cuba admitted or paroled into the United States after January 1, 1959, and thereafter have been physically present in the United States for at least 1 years.	Special Immigrant Other Preference			
for at least 1 year. f. I am the husband, wife, or minor unmarried child of a Cuban described above in (e), and I am residing with that person, and was admitted or paroled into the United States after January 1, 1959, and thereafter have been physically present in the United States for at least 1 year.	Action Block			
g. I have continuously resided in the United States since before January 1, 1972.				
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 meet 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							
. City/Town/Village of Birth	City/Town/Village of Birth			n			
Your Mother's First Name		Your Fath	Your Father's First Name				
Give your name exactly as it appears o	n your Form I-94, Arrival-	-Departure Record					
Place of Last Entry Into the United Sta (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. Immigra	tion Officer? Yes	No 🗍					
	don officer: Tes		XX/1 X	Ilaa Waa Iaasa d	•		
Nonimmigrant Visa Number		Consulate	wnere	Visa Was Issued	ed		
Date Visa Issued (mm/dd/yyyy) Gender Male Female			Marital Status Married Single Divorced Widowed				
Have you ever applied for permanent re	esident status in the U.S.?	☐ Yes (If "Yes" give date and place of filing and final disposition.)					
List your present spouse and all of your space is needed, see Page 2 of the instr	r children (include adult so ructions.)	ons and daugh	ters). (I	f you have none	, write "None." If additional		
Family Name (Last Name)	Given Name (First N	Vame)		Middle Initial	Date of Birth (mm/dd/yyyy		
Country of Birth	Relationship	1 A 11 (10			A martining a social accord		
Country of Birtin	Relationship		A # (if	any)	Applying with you? Yes No		
Family Name (Last Name)	Given Name (First N	Vame)	l	Middle Initial	Date of Birth (mm/dd/yyyy)		
Country of Birth	Relationship		A # (if	any)	Applying with you?		
					Yes No		
Family Name (Last Name)	Given Name (First N	Vame)	•	Middle Initial	Date of Birth (mm/dd/yyyy)		
Country of Birth	Relationship		A # (if	any)	Applying with you?		
					Yes No		
Family Name (Last Name)	Given Name (First N	Given Name (First Name) Relationship A # (if		Middle Initial	Date of Birth (mm/dd/yyyy)		
Country of Birth	Relationship			any)	Applying with you?		
					Yes No		
Family Name (Last Name)	Given Name (First N	Vame)		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?"					
	Name of Organization	Location and Nature	Date of Membership	Date of Membership		
			From	To)	
mu Ins	ast be submitted according to the structions?" Information about	If your answer is "Yes" to any question, e guidelines provided on Page 2 of the indocumentation that must be include with that you are not entitled to adjust status of	nstructions under "What Are the Gene your application is also provide in the	eral Filing		
1.	Have you EVER , in or outside	the United States:				
	a. Knowingly committed any arrested?	crime of moral turpitude or a drug-relate	d offense for which you have not bee	n Yes	No 🗌	
	b. Been arrested, cited, charge or ordinance, excluding tra	ed, indicted, convicted, fined, or imprisor ffic violations?	ned for breaking or violating any law	Yes	No 🗌	
	c. Been the beneficiary of a pa	ardon, amnesty, rehabilitation decree, oth	er act of clemency, or similar action?	? Yes	No 🗌	
	d. Exercised diplomatic immu	unity to avoid prosecution for a criminal	offense in the United States?	Yes	No 🗌	
		tance in the United States from any sour icipality (other than emergency medical			No 🗌	
3.	Have you EVER :					
	a. Within the past 10 years be activities in the future?	en a prostitute or procured anyone for pr	ostitution, or intend to engage in such	Yes _	No 🗌	
	b. Engaged in any unlawful c	ommercialized vice, including, but not li	mited to, illegal gambling?	Yes	No 🗌	
	c. Knowingly encouraged, incillegally?	luced, assisted, abetted, or aided any alie	n 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?	d, abetted, or colluded in the illicit	Yes	No 🗌	
	membership or funds for, or has upport to any person or organ	conspired to engage in, or do you intend to eve you through any means ever assisted ization that has ever engaged or conspire you or any other form of terrorist activity?	or provided any type of material d to engage in sabotage, kidnapping,	ed Yes	No 🗌	

Pa	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 before completing this section.)	f the instructions
Are you requesting an accommodation because of your disability(ies) and/or impairment(s)? If you answered "Yes," check any applicable box:	Yes No No
a. I am deaf or hard of hearing and request the following accommodation(s) (if requesting a sign-lang indicate which language (e.g., American Sign Language)):	guage interpreter,
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 accommodation(s) you are requesting):	/or impairment(s) and

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."

Post 5 Cionotava (Cartino I)				
Part 5. Signature (Continued)	Applicant's Statement (0	Check one)		
I can read and understand Englishas my answer to each question.	h, and I have read and understand each	and every quest	ion and instructi	on on this form, as well
languag	ruction on this form, as well as my ansve, a language in which I am fluent, by t d every question and instruction on this	he person name	d in Interpreter	's Statement and
	der the laws of the United States of Am t I have not withheld any information th			
I authorize the release of any informate determine eligibility for the benefit I	ation from my records that U.S. Citizen am seeking.	ship and Immig	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 eligible for the requested benefit, and	out this form or fail to submit required l this application may be denied.	documents liste	ed in the instructi	ions, you may not be found
	Interpreter's Statement an	d Signature		
I certify that I am fluent in English at Language Used (language in which				
•	and every question and instruction on t guage, and the applicant has understood			-
Signature (Interpreter)	Print Your Full Name		Date (mm/dd/yyyy)	Phone Number (include area code)
Part 6. Signature of Person Pr	eparing Form, If Other Than Abo	NT/0		
I declare that I prepared this appli have knowledge.	cation at the request of the above app	olicant, 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)	