

Do not write in this block

For USCIS Use Only

It has been determined that the:

☐ Married ☐ Unmarried

prospective adoptive parent will furnish proper care to a beneficiary orphan if admitted to the United States.

There:

☐ are ☐ are not

preadoption requirements in the State of the child's proposed residence.

The following is a description of the preadoption requirements, if any, of the State of the child's proposed residence:

The preadoption requirements, if any:

☐ have been met. ☐ have not been met.

Fee Stamp

DATE OF FAVORABLE
DETERMINATION

DD

DISTRICT

File number of applicant, if applicable: _____

Type or print legibly in black ink.

This application is made by the named prospective adoptive parent for advance processing of an orphan petition.

BLOCK I - Information About the Prospective Adoptive Parent

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. If you are now or if you have been married, how may time have you been married (include current marriage if married): _____

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) (include current marriage)

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

Number and Street

Apt. No. City

State

Country

BLOCK II - General Information

10. Name and address of organization or individual assisting you in locating or identifying an orphan.

Name of organization or individual:

Address of organization or individual:

11. Do you plan to travel abroad to locate or adopt a child?

☐ No

☐ Yes

12. Does your spouse, if any, plan to travel abroad to locate or adopt a child?

☐ No

☐ Yes

13. If the answer to **Question 11** or **12** is "Yes," provide the following information, if known:

a. Your date of intended departure (*mm/dd/yyyy*):

b. Your spouse's date of intended departure (*mm/dd/yyyy*):

c. Names of city, province, country you are traveling to:

14. Will the child be adopted abroad after having been personally seen and observed by you and your spouse (if married)?

☐ No

☐ Yes

15. Will the preadoption requirements, if any, of the child's proposed State of residence be met prior to or after the child enters the United States?

☐ No

☐ Yes

16. From what country do you plan to adopt, if known?

17. Where do you wish to file your orphan petition? (*Complete **one** of the options below*)

The USCIS office located at:

The U.S. Embassy or consulate at:

OR

BLOCK II - General Information *(Continued)*

18. Do you plan to adopt more than one child? ☐ No ☐ Yes

If "Yes," how many children do you plan to adopt? _____

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

19. I am requesting an accommodation:

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

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

3. 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 Prospective Adoptive Parent

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/orphans properly if admitted to the United States.

(Signature of Prospective Adoptive Parent)

Executed on (Date)

Certification of Married Prospective Adoptive Parent 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/orphans properly if admitted to the United States.

(Signature of Prospective Adoptive Parent 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