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## Notice of Entry of Appearance as Attorney or Accredited Representative

**Department of Homeland Security** 

Part 1. Information About Attorney or Accredited Representative			Part 2. Notice of Appearance as Attorney or Accredited Representative	
1.	USCIS ELIS Account Number ( <i>if any</i> )		appearance relates to immigration matters before <i>ct</i> <b>only one</b> <i>box</i> ):	
Name and Address of Attorney or Accredited Representative		1.a. 1.b.	USCIS List the form numbers	
		3.a.	ICE List the specific matter in which appearance is entered CBP	
3.c.	Apt.   Ste.   Flr.     City or Town	I ente	List the specific matter in which appearance is entered	
3.f.	Province	4.	Select <b>only one</b> box: Applicant Petitioner Respondent (ICE, CBP)	
3.g. 3.h.	Postal Code Country	-	ormation About Applicant, Petitioner, or pondent	
4.	Daytime Telephone Number		Family Name       (Last Name)       Given Name       (First Name)	
5.	Fax Number	5.c. 6.	Middle Name Name of Company or Organization ( <i>if applicable</i> )	
6.	E-Mail Address	U.		
		7. 8.	USCIS ELIS Account Number ( <i>if any</i> )  Alien Registration Number (A-Number) or Receipt Number	
		0.	Anen Registration Humber (A-Humber) of Receipt Humber	

Part 2. Notice of Appearance as Attorney or Accredited Representative (continued)	<b>1.b.</b> State Bar Number ( <i>if applicable</i> )
Information About Applicant, Petitioner, or Respondent (continued)	1.c. Name of Law Firm
<ul> <li>9. Mobile Telephone Number</li> <li>10. E-Mail Address</li> </ul>	<ul> <li>1.d. I (choose one) am not am</li> <li>subject to any order of any court or administrative agency disbarring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law. If you are subject to any orders, explain in the space below. (If you need additional space, use Part 6.)</li> </ul>
Mailing Address of Applicant, Petitioner, or Respondent	
<b>NOTE:</b> Provide the mailing address of the petitioner, applicant, or respondent. If the applicant, petitioner, or respondent has used a safe mailing address on the application or petition being filed with this Form G-28, provide it in these spaces.	2.a. I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States, so recognized by the Department of Justice, Board of Immigration Appeals, in accordance with 8 CFR 292.2. Provide the name of the
11.a. Street Number and Name	organization and the expiration date of accreditation.
11.b. Apt. Ste. Flr.	2.b. Name of Recognized Organization
11.c. City or Town	2.c. Date accreditation expires
11.d. State   11.e. ZIP Code	(mm/dd/yyyy) ►
11.f. Province	3. I am associated with
11.g. Postal Code     11.h. Country	the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative is at his or her request.
Part 3. Eligibility Information for Attorney or Accredited Representative	<b>NOTE:</b> If you select this item, also complete <b>Item</b> <b>Numbers 1.a 1.b. or Item Numbers 2.a 2.c.</b> in <b>Part 3.</b> ( <i>whichever is appropriate</i> ).
<ul> <li>Select all applicable items.</li> <li>1.a. I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. (<i>If you need additional space, use Part 6.</i>)</li> </ul>	<ul> <li>4.a. I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2)(iv).</li> <li>4.b. Name of Law Student or Law Graduate</li> </ul>

#### Part 4. Applicant, Petitioner, or Respondent Consent to Representation, Contact Information, and Signature (continued)

#### Consent to Representation and Release of Information

1. I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and DHS policy, I also consent to the disclosure to the named attorney or accredited representative of any record pertaining to me that appears in any system of records of USCIS, ICE or CBP. I furthermore authorize release of any information in my USCIS records to other entities and persons where necessary for the administration of U.S. immigration laws.

When you (the applicant, petitioner, or respondent) is represented, DHS will send original notices of approval both to you and your authorized attorney or accredited representative either through mail or electronic delivery. If you do not want to receive original notices or documents, select **all applicable** boxes below:

- 2.a I request that DHS send any notice regarding an application or petition that I have filed with DHS to the business address of my attorney of record or accredited representative as listed in this form. I understand that I may change this election at any future date through written notice to DHS.
- 2.b. I request that DHS send any Form I-94, Arrival Departure Record, or any secure identity document, such as a Permanent Resident Card or Employment Authorization Document, that I am approved to receive and authorized to possess, to the business address of my attorney of record or accredited representative as listed in this form. I consent to having my secure identity document sent to my attorney of record or accredited representative and understand that I may request, at any future date and through written notice to DHS, that DHS send any secure identity document to me directly.
- **3.a.** Signature of Applicant, Petitioner, or Respondent

**3.b.** Date of Signature (*mm/dd/yyyy*)►

# Part 5. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before the Department of Homeland Security. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

- 1. Signature of Attorney or Accredited Representative
- 2. Signature of Law Student or Law Graduate
- **3.** Date of Signature (*mm/dd/yyyy*)►

### Part 6. Additional Information

Use the space below to provide additional information pertaining to **Part 3.**, **Item Numbers 1.a. - 1.d.**