## **TABLE OF CHANGES - FORM**

## Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative OMB Number: 1615-0105 05/14/2014

Reason for Revision: USCIS ELIS Account Number field for attorney/accredited representative and applicant added to form in order to facilitate matching with any existing USCIS ELIS account for the attorney/accredited representative and/or the applicant.

Current Section and Page Number	Current Text	Proposed Text
Page 1, Part 1. Information About Attorney or Accredited Representative	Part 1. Information About Attorney or Accredited Representative	Part 1. Information About Attorney or Accredited Representative [no hanging]
		1. USCIS ELIS Account Number (if any):
	Name and Address of Attorney or Accredited Representative	Name and Address of Attorney or Accredited Representative [sub-header]
	1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name	<ul><li>2.a. Family Name (<i>Last Name</i>)</li><li>2.b. Given Name (<i>First Name</i>)</li><li>2.c. Middle Name</li></ul>
	2. Name of Law Firm or Recognized Organization	[Delete]
	3. Name of Law Student or Law Graduate	[Delete]
	4. State Bar Number	[Delete]
	5.a. Street Number 5.b. Street Name	3.a. Street Number and Name
	5.c. Apt. Ste. Flr. 5.d. City of Town	<ul><li>3.b. Apt. Ste. Flr.</li><li>3.c. City or Town</li></ul>
	5.e. State 5.f. Zip Code	3.d. State 3.e. ZIP Code
	5.g. Postal Code	<b>3.f.</b> Province
	5.h. Province 5.i. Country	3.g. Postal Code 3.h. Country
	6. Daytime Phone Number	4. Daytime Telephone Number
		5. Fax Number
	7. E-Mail Address of Attorney or Accredited Representative	6. E-mail Address
Page 1, Part 2. Eligibility		[Move Part 2. to Part 3.]
Information For Attorney or Accredited Representative	Part 2. Eligibility Information For Attorney or Accredited Representative	Part 2. Notice of Appearance as Attorney or Accredited Representative [no hanging]

(Check applicable item(s) below)	This appearance relates to immigration matters before ( <i>Select only one box</i> ):
1. [] I am an attorney eligible to practice law in,	1.a. [] USCIS 1.b. List the form numbers
1.a 1.b. I (choose one)subject to any order of any court or administrative agency(If you are subject to any order(s), explain fully in the	<b>2.a.</b> [] ICE
space below.)	<b>2.b.</b> List the specific matter in which appearance is entered
1.b.1	<b>3.a.</b> [] CBP
<b>2.</b> I am an accredited representative of the following qualified nonprofit religious, charitable, social service	3.b. List the specific matter in which appearance is entered
2.a. Name or Recognized Organization	I enter my appearance as attorney or accredited representative at the request of:
2.b. Date Accreditation expires	4. Select only one box: Applicant Petitioner Respondent (ICE, CBP)
3. I am associated with	Information about Applicant, Petitioner, or Respondent [sub-header]
3.a	<ul><li>5.a. Family Name (Last Name)</li><li>5.b. Given Name (First Name)</li><li>5.c. Middle Name</li></ul>
<b>4.</b> I am a law student or law graduate working under	<b>6.</b> Name of Company or Organization ( <i>if applicable</i> )
	7. USCIS ELIS Account Number ( <i>if any</i> ):
	<b>8.</b> Alien Registration Number (A-Number) or Receipt Number
	9. Mobile Telephone Number
	10. E-Mail Address
	Mailing Address of Applicant, Petitioner, or Respondent [sub-header]
	<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.
	11.a. Street Number and Name 11.b. Apt. Ste. Flr.

		<b>11.c.</b> City or Town
		11.d. State
		11.e. ZIP Code
		11.f. Province
		11.g. Postal Code
		11.h. Country
Page 2, Part 3. Notice of Appearance and Attorney or		[Move Part 3. to Part 2.]
Accredited Representative	Part 3. Notice of Appearance as Attorney or Accredited Representative	Part 3. Eligibility Information for Attorney or Accredited Representative [no hanging]
	This appearance relates to immigration matters before (select one):	<b>1.a.</b> [check box] 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. (If you need additional space, use <b>Part 6.</b> )
	1. [] USCIS – List the form number(s)	<b>1.b.</b> State Bar Number ( <i>if applicable</i> )
	1.a	
	2. [] ICE – List the specific matter in which appearance is entered	1.c. I (choose one) [check box] am not [check box] am 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.)
	2.a	
	3. [] CBP – List the specific matter in which appearance is entered	<b>2.a.</b> [check box] 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 organization and the expiration date of accreditation.
	3.a	2.b. Name of Recognized Organization
	I hereby enter my appearance as attorney or accredited representative at the request of:	
	4. Select only one: [] Applicant [] Petitioner [] Respondent (ICE, CBP)	<ul><li>2.c. Date accreditation expires mm/dd/yyyy</li><li>3. [check box] I am associated with</li></ul>
		5. Leneck box 1 am associated with
		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.
		activation representative is at this of her request.
		NOTE: If you select this item, also complete

	Name of Applicant, Petitioner, or Respondent	Item Numbers 1.a. – 1.b. or Item Numbers 2.a. – 2.c. in Part 3. (whichever is appropriate)
	<ul><li>5.a. Family Name (<i>Last Name</i>)</li><li>5.b. Given Name (<i>First Name</i>)</li><li>5.c. Middle Name</li></ul>	<b>4.a.</b> [check box] 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 292.2(a)(2)(iv).
	<b>5.d.</b> Name of Company or Organization, if applicable	4.b. Name of Law Student or Law Graduate
	NOTE: Provide the mailing address of Petitioner, Applicant, or Respondent and not the address of the attorney or accredited representative, except when a safe mailing address is permitted on an application or petition filed with Form G-28.  6.a. Street Number and name 6.b. Apt. Ste. Flr. 6.c. City or Town 6.d. State 6.e. Zip Code	[Delete]
	7. Provide A-Number and/or Receipt Number  Pursuant to the Privacy Act of 1974 and DHS policy, I hereby 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.  8.a. Signature of Applicant, Petitioner, or Respondent 8.b. Date (mm/dd/yyyy)	
Page 2, Part 4 Applicant, Petitioner, or Respondent Consent to Representation, Contact Information, and Signature	Part 4. Signature of Attorney or Accredited Representative	Part 4. Applicant, Petitioner, or Respondent Consent to Representation, Contact Information, and Signature [add section header]
	I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing	Consent to Representation and Release of Information [sub-header]
	Signature of Attorney or Accredited     Representative	1. I have requested the representation of and consented to being represented by the attorney or accredited representative named in <b>Part 1.</b> 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

	2. Signature of Law Student or Law Graduate	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:
		<b>2.a.</b> [check box] 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. [check box] 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. Date	<ul><li>3.a. Signature of Applicant, Petitioner, or Respondent</li><li>3.b. Date (mm/dd/yyyy)</li></ul>
Page 3, Part 4. Signature of	Part 5. Additional Information	Part 5. Signature of Attorney or Accredited
Attorney or Accredited Representative	1	Representative  I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing
		1. Signature of Attorney or Accredited Representative
		2. Signature of Law Student or Law Graduate
		3. Date
NEW		Part 6. Additional Information
		Use the space below to provide additional information pertaining to Part 3., Item Numbers 1.a1.c.