

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

	<p>(Check applicable item(s) below)</p> <p>1. <input type="checkbox"/> I am an attorney eligible to practice law in,.....</p> <p>1.a. _____</p> <p>1.b. I (<i>choose one</i>)....subject to any order of any court or administrative agency...(If you are subject to any order(s), explain fully in the space below.)</p> <p>1.b.1. _____</p> <p>2. I am an accredited representative of the following qualified nonprofit religious, charitable, social service.....</p> <p>2.a. Name or Recognized Organization</p> <p>2.b. Date Accreditation expires</p> <p>3. I am associated with</p> <p>3.a. _____</p> <p>4. I am a law student or law graduate working under.....</p>	<p>This appearance relates to immigration matters before (<i>Select <b>only one</b> box</i>):</p> <p>1.a. <input type="checkbox"/> USCIS</p> <p>1.b. List the form numbers</p> <p>_____</p> <p>2.a. <input type="checkbox"/> ICE</p> <p>2.b. List the specific matter in which appearance is entered</p> <p>_____</p> <p>3.a. <input type="checkbox"/> CBP</p> <p>3.b. List the specific matter in which appearance is entered</p> <p>_____</p> <p>I enter my appearance as attorney or accredited representative at the request of:</p> <p>4. Select <b>only one</b> box:  Applicant  Petitioner  Respondent (ICE, CBP)</p> <p><b><i>Information about Applicant, Petitioner, or Respondent</i></b> [sub-header]</p> <p>5.a. Family Name (Last Name)  5.b. Given Name (First Name)  5.c. Middle Name</p> <p>6. Name of Company or Organization (<i>if applicable</i>)</p> <p>7. USCIS ELIS Account Number (<i>if any</i>):</p> <p>8. Alien Registration Number (A-Number) or Receipt Number</p> <p>9. Mobile Telephone Number</p> <p>10. E-Mail Address</p> <p><b><i>Mailing Address of Applicant, Petitioner, or Respondent</i></b> [sub-header]</p> <p><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.</p> <p>11.a. Street Number and Name  11.b. Apt. Ste. Flr.</p>
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<b>Page 2, Part 3. Notice of Appearance and Attorney or Accredited Representative</b>	<b>Part 3. Notice of Appearance as Attorney or Accredited Representative</b>  <b>This appearance relates to immigration matters before (select one):</b>  1. <input type="checkbox"/> USCIS – List the form number(s)  <b>1.a.</b> _____  2. <input type="checkbox"/> ICE – List the specific matter in which appearance is entered   <b>2.a.</b> _____  3. <input type="checkbox"/> CBP – List the specific matter in which appearance is entered   <b>3.a.</b> _____  <b>I hereby enter my appearance as attorney or accredited representative at the request of:</b>  4. Select only one: <input type="checkbox"/> Applicant <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent (ICE, CBP)	[Move <b>Part 3.</b> to <b>Part 2.</b> ]  <b>Part 3. Eligibility Information for Attorney or Accredited Representative</b> [no hanging]  <b>1.a.</b> <i>[check box]</i> 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 <b>Part 6.</b>)</i>  <b>1.b.</b> State Bar Number <i>(if applicable)</i> _____  <b>1.c.</b> I <i>(choose one)</i> <i>[check box]</i> <b>am not</b> <i>[check box]</i> <b>am</b> subject to any order of any court or administrative agency disbaring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law. If you are subject to any orders, explain in the space below. <i>(If you need additional space, use <b>Part 6.</b>)</i> _____  <b>2.a.</b> <i>[check box]</i> 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.  <b>2.b.</b> Name of Recognized Organization _____  <b>2.c.</b> Date accreditation expires mm/dd/yyyy _____ <b>3.</b> <i>[check box]</i> I 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.  <b>NOTE:</b> If you select this item, also complete

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

