

**Form I-690 Form TOC,
Application for Waiver of Grounds of Inadmissibility**

OMB RIN: 1615-0032

7/05/2014

Reason for Revision:

Current Location	Current Text	Proposed Text
Page 1, For Government Use Only.	<p>Fee Receipt Number (This application):</p> <p>Alien Registration Number (A# of This Applicant):</p> <p>Fee Stamp</p>	<p>Page 1, For Government Use Only.</p> <p>Fee Receipt Number (This application):</p> <p>Alien Registration Number (A-Number of this Applicant)</p> <p>Action Block</p>
Page 1, Below “For Government Use Only” section	<p>APPLICANT: Start here. See instructions before completing this application. If you need more space to answer fully any question on this form, use a separate sheet and identify each answer with the number of the corresponding question. Type or print in black ink.</p>	<p>Page 1,</p> <p>APPLICANT: Start here. Type or print in black ink. Read the instructions before completing this application. If you need extra space to complete any item within this application, use Part 6. Additional Information, or attach a separate sheet of paper; type or print your name and Alien Registration Number (A-Number) (if any), at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.</p>
Page 1,	<p>1. Family Name (Last Name in CAPITAL letters) (First Name) (Middle Name)</p>	<p>Page 1,</p> <p>Part 1. Information About You (the Applicant) Your Current Legal Name</p> <p>1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p> <p>[moved below]</p>

	<p>2. Date of Birth (mm/dd/yyyy)</p> <p>3. Address (No. and Street) (Apt. No.) (City /Town) (State/Country) (Zip/Postal Code)</p> <p>4. Place of Birth(City or Town and County, Province, or State)</p> <p>5. U.S. Social Security Number</p> <p>6. Date of Visa Application (mm/dd/yyyy) for: Permanent</p>	<p>Mailing Address</p> <p>2. In Care Of Name (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country</p> <p>3. Is your current mailing address the same as your physical address?</p> <p>___Yes ___No</p> <p>If you answered “No” to Item Number 3., provide your physical address in Item Number 4.</p> <p>Physical Address</p> <p>4. Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country</p> <p>Other Information</p> <p>5. City/Town/Village of Birth</p> <p>6. Country of Birth</p> <p>7. Date of Birth (mm/dd/yyyy)</p> <p>8. U.S. Social Security Number (if any)</p> <p>9. Alien Registration Number (if any)</p> <p>[moved to Part 2]...</p>
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	<p>Residence Temporary Residence</p> <p>7. Visa applied for at:</p> <p>8. I am applying for a waiver of:</p> <p>9. List reasons of inadmissibility:</p> <p>10. List all immediate relatives in the United States <i>(Parents, spouse and children)</i></p> <p>11. I should be granted a waiver because: <i>(Describe family unity considerations or humanitarian or public interest reasons for granting a waiver. If more space is needed, attach an additional sheet.)</i></p> <p>12. Applicant's Signature</p> <p>13. Date</p>	<p>[Moved to Part 3]</p>
<p>Page 1, Part 1. Information About You</p>	<p>6. Date of Visa Application <i>(mm/dd/yyyy)</i> for: Permanent Residence Temporary Residence</p> <p>7. Visa applied for at:</p> <p>8. I am applying</p>	<p>Page 1, Part 2. Additional Information About You</p> <p>1. Date Primary Application Filed <i>(mm/dd/yyyy)</i>:</p> <p>2. Type of Primary Application: ___Permanent Residence (Form I-698) ___Temporary Residence (Form I-687 or Form I-700)</p> <p>3. Relating Receipt Number</p> <p>4. I am applying for a waiver of (Select all that apply):</p> <p>INA section 212 (a) (1)(A)(i), (ii), (iii) or (iv)</p> <p>212 (a)(2)(A)(i)(II)</p> <p>212 (a)(6)(A)(i)</p>

		<p>Middle Name (if applicable)</p> <p>Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>Date of Birth (<i>mm/dd/yyyy</i>)</p> <p>Immigration Status</p> <p>A-Number (if any)</p> <p>Relationship</p> <p>C. Your Relative's Information Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p> <p>Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>Date of Birth (<i>mm/dd/yyyy</i>)</p> <p>Immigration Status</p> <p>A-Number (if any)</p> <p>Relationship</p> <p>D. Your Relative's Information Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p> <p>Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>Date of Birth (<i>mm/dd/yyyy</i>)</p>
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		<p>Immigration Status</p> <p>A-Number (if any)</p> <p>Relationship</p> <p>7. I should be granted a waiver because: (Describe family unity considerations or humanitarian or public interest reasons for granting a waiver. If you need more space, use Part 6., Additional Information; type or print your name and Alien Registration (A-Number) (if any), at the top of the sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date the sheet.</p>
Page 1,		<p>Page4,</p> <p>[new] Part 3. Applicant's Statement, Contact Information, USCIS ASC Acknowledgement, Certification, and Signature</p> <p>NOTE: Select the box for either Item Number A. or B. If applicable, select the box for Item Number 2.</p> <p>1.Applicant's Statement Regarding the Interpreter</p> <p>A. __I can read and understand English, and have read and understand each and every question and instruction on this application, as well as my answer to each question. I have read the Acknowledgement of Required Appointment at USCIS ASC.</p> <p>B. __The interpreter named in Part 4. has read to me each and every question and instruction on this application, as well as my answer to each question, in [Fillable Field], a language in which I am fluent. I understand each and every question and instruction on this application as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above. The interpreter named in Part 4. also has read the Acknowledgement of Required Appointment at</p>

		<p>USCIS ASC to me, in the language in which I am fluent, and I understand this USCIS ASC Acknowledgement as read to me by my interpreter.</p> <p>2. Applicant's Statement Regarding the Preparer</p> <p>__ I have requested the services of and consented to [Fillable Field], who is__ is not __ an attorney or accredited representative, preparing this application for me. My attorney or accredited representative, as named in Part 5., and any other person who assisted me in preparing my application has reviewed the Acknowledgement of Required Appointment at USCIS ASC with me and I understand the USCIS ASC Acknowledgement.</p> <p><i>Applicant's Contact Information</i></p> <p>3. Applicant's Daytime Telephone Number</p> <p>4. Applicant's Mobile Telephone Number (if any)</p> <p>5. Applicant's Email Address (if any)</p> <p><i>Acknowledgement of Required Appointment at a USCIS ASC</i></p> <p>I, [Auto-populate Field Applicant Full Name], understand that the purpose of a USCIS Application Support Center (ASC) appointment is for me to provide my fingerprints, photograph, and/or signature and to verify that all of the information in my application is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my USCIS ASC appointment:</p> <p><i>By signing here, I declare under penalty of perjury that I have reviewed and understand my application, as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my application that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.</i></p> <p>I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I</p>
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		<p>will verify that I willingly submit this application; I have reviewed the contents of this application; all of the information in my application and all supporting documents submitted with my application are complete, true, and correct; and if I was assisted in completing this application, the person assisting me also reviewed this</p> <p>Acknowledgement of Required Appointment at USCIS ASC with me.</p> <p><i>Applicant's Certification</i></p> <p>I certify, under penalty of perjury under the laws of the United States of America, that the information in my application and any document submitted with my application are complete, true, and correct.</p> <p>Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents at a later date. Furthermore, I authorize the release of any information from my records that USCIS may need to determine my eligibility for the benefit that I seek.</p> <p>I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration of U.S. immigration laws.</p> <p><i>Applicant's Signature</i> 6. Applicant's Signature Date of Signature (mm/dd/yyyy)</p> <p>Part 4. Interpreter's Contact Information, Certification, and Signature</p> <p>Provide the following information about the interpreter:</p> <p><i>Interpreter's Full Name</i></p> <p>1. Interpreter's Family Name (Last Name)</p> <p>Interpreter's Given Name (First Name)</p> <p>2. Interpreter's Business or Organization Name (if any)</p>
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	<p>12. Applicant's Signature</p> <p>13. Date</p>	<p>3. Interpreter's Mailing Address Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country</p> <p><i>Interpreter's Contact Information</i></p> <p>4. Interpreter's Daytime Telephone Number</p> <p>5. Interpreter's Email Address (if any)</p> <p><i>Interpreter's Certification</i></p> <p>I certify that:</p> <p>I am fluent in English and [Fillable Field], which is the same language provided in Part 3., Item B., in Item Number 1.</p> <p>I have read to this applicant each and every question and instruction on this application, as well as the answer to each question, in the language provided in Part 3., Item B., in Item Number 1.;</p> <p>I have read the Acknowledgement of Required Appointment at USCIS ASC to the applicant, in the same language provided in Part 3., Item B., Item Number 1.;</p> <p>The applicant has informed me that he or she understands each and every instruction and question on the application, as well as the answer to each question.</p> <p>The applicant also has informed me that he or she understands the USCIS ASC Acknowledgement and that by appearing for a USCIS ASC biometric services appointment and providing his or her fingerprints, photograph, and/or signature, he or she is affirming that the contents of this application and all supporting documentation are complete, true, and correct.</p> <p><i>Interpreter's Signature</i></p> <p>6. Interpreter's Signature Date of Signature (mm/dd/yyyy)</p>
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		<p>responses with the applicant, who agreed with each and every answer on the application. If the applicant supplied additional information concerning a question on the application, I recorded it on the application. I also have read the Acknowledgement of Required Appointment at USCIS ASC to the applicant and the applicant has informed me that he or she understands the USCIS ASC Acknowledgement and that by appearing for a USCIS ASC biometric services appointment and providing his or her fingerprints, photograph, and/or signature, he or she will be reaffirming that the contents of this application and all supporting documentation are complete, true, and correct.</p> <p><i>Preparer's Signature</i> 8. Preparer's Signature Date of Signature (<i>mm/dd/yyyy</i>)</p> <p>NOTE: We recommend that you print a copy of your completed application for your records. If you are required to appear for a biometric services appointment at a USCIS ASC, you should bring a copy of your completed application with you.</p>
Page 1, FOR USCIS USE ONLY...	For USCIS USE ONLY. Recommended by: (<i>Print Name and Title</i>) Date Signature Stamp # Director	[deleted per POC markup]
		Page 8, [New] Part 6. Additional Information If you need extra space to provide any additional information within this application, use the space below or attach a separate sheet of paper. If you need more space than what is provided, you may make copies of this page to complete and file with this application. Include your name and A-Number (if any) at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.

		<p>1. Family Name (Last Name) [Auto-populated field] Given Name (First Name) [Auto-populated field] Middle Name [Auto-populated field]</p> <p>2. A-Number (if any) [Auto-populated field]</p> <p>3.A. Page Number B. Part Number C. Item Number D.</p> <hr/> <p>4.A. Page Number B. Part Number C. Item Number D.</p> <hr/> <p>5.A. Page Number B. Part Number C. Item Number D.</p> <hr/> <p>6.A. Page Number B. Part Number C. Item Number D.</p> <hr/> <p>7. Signature Date of Signature (<i>mm/dd/yyyy</i>)</p>
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