

TABLE OF CHANGES
Form I-698, Application to Adjust Status From Temporary
to Permanent Resident (Under Section 245A of the INA)
OMB Number: 1615-0035
05/02/2014

Reason for Revision: Form has not been updated for many years and various items currently on the form have changed. HRV questions were also added or have replaced previous information.

Current Section and Page Number	Current Text	Proposed Text
Page 1, USCIS use only	Do not write in this block – For USCIS use only. Action Block Fee Stamp Remarks	[Delete.] Applicant Interviewed Date: Receipt Action Block Date of Adjustment Date: Remarks
Page 1	START HERE – Type or print in black ink. If you need more space, see Page 3 of the instructions. 1. Name Family Name (in capital letters) Given Name Middle Name 3. Name as it appears on Form I-688, Temporary Resident Card 4. Telephone Number (include area code) Home/Work 5. Reason for difference... 7. Mailing Address ...	START HERE – Type or print in black ink. Part 1. Information About You [Header] 1. Family Name (Last Name) Given Name (First Name) Middle Name 2. Name as it appears on your Employment Authorization Document (Form I-766) Family Name (Last Name) Given Name (First Name) Middle Name [Deleted] 3. Any other names used A. Family Name (Last Name) Given Name (First Name) Middle Name B. Family Name (Last Name) Given Name (First Name) Middle Name C. Provide reason for difference in name, if any (marriage, divorce, etc.) 4. U.S. Mailing Address

	<p>6. Home Address...</p> <p>A-Number [part of Item Number 1]</p> <p>12. Your U.S. Social Security No.</p> <p>9. Date of Birth (mm/dd/yyyy)</p> <p>2. Gender Male/Female</p> <p>8. Place of Birth (city or Town) County, Province, or State Country</p> <p>Country of Citizenship/Nationality</p> <p>10. Your Mother's First Name 11. Your Father's First Name</p> <p>13. Marital Status Married/Never Married/Separated/Divorced/ Widowed</p> <p>14. Absences from the United States since becoming a temporary resident alien. List most recent absence first. If you have a single absence in excess of 30 days or if the total of all your absences exceeds 90 days, explain and attach any relevant information.</p> <p>[Table with 5 columns and 6 rows with the following fields:] Country/Purpose of Trip/From (mm/dd/yyyy)/To (mm/dd/yyyy)/Total Days</p>	<p>In Care Of Name (if applicable) Street Number and Name Apt. Ste. Flr. City or Town State ZIP Code</p> <p>5. Is your current mailing address the same as your physical address? Y/N</p> <p>If you answered "No," provide your U.S. Physical Address in Item Number 6.</p> <p>6. U.S. Physical Address Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>7. Alien Registration Number (A-Number) (if any)</p> <p>8. U.S. Social Security Number (if any)</p> <p>9. Date of Birth (mm/dd/yyyy)</p> <p>10. Gender Male/Female</p> <p>11. Place of Birth City or Town State Province Country</p> <p>12. Country of Citizenship or Nationality</p> <p>13. Mother's First Name 14. Father's First Name</p> <p>15. Marital Status Married/Never Married/Separated/Divorced/ Widowed</p> <p>16. List absences from the United States since becoming a temporary resident. List the most recent absence first. If you have a single absence that exceeded 30 days or if the total of all of your absences exceeds 90 days, explain on a separate sheet of paper or use the space provided in Part 8., Additional Information; type or print your name and 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> <p>[Table with 5 columns and 6 rows with the following fields:] Country/Purpose of Trip/From (mm/dd/yyyy)/To (mm/dd/yyyy)/Total Days</p>
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	Absent 15. When applying for...	Absent [DELETE.]
Page 2	<p>16. Concerning the requirement of minimal understanding of ordinary English and a knowledge and understanding of the history and Government of the United States (check appropriate block under Section A or B):</p> <p>A. I will satisfy these requirements by:</p> <p>Examination at the time of interview for permanent residence.</p> <p>Satisfactorily pursuing a course of study recognized by the Secretary of Homeland Security.</p> <p>B. I have satisfied these requirements by:</p>	<p>Part 2. Biographic Information</p> <p>1. Ethnicity (Select only one box) Hispanic or Latino Not Hispanic or Latino</p> <p>2. Race (Select all applicable boxes) American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White</p> <p>3. Height Feet _ Inches _</p> <p>4. Weight Pounds _ _ _</p> <p>5. Eye Color (Select only one box) Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other</p> <p>6. Hair Color (Select only one box) Bald (No hair) Black Blonde Brown Gray Red Sandy White Unknown/Other</p> <p>7. You are required to have a minimal understanding of standard English and a knowledge and understanding of the history and Government of the United States. Select the appropriate box in Item A. or B. below.</p> <p>A. I will satisfy these requirements through:</p> <p>An examination at the time of interview for permanent residence; or</p> <p>Satisfactory pursuit of a course of study recognized by the Secretary of Homeland Security (Secretary).</p> <p>B. I have satisfied these requirements</p>

	<p>Having satisfactorily pursued a course of study recognized by the Secretary of Homeland Security. (Attach appropriate documentation.)</p> <p>Exemption because I am 65 years of age or older, under 16 years of age, or I am physically unable to comply. <i>(If you are physically unable to comply, explain and attach relevant documentation.)</i></p>	<p>through:</p> <p>Satisfactory pursuit of a course of study recognized by the Secretary (attach appropriate documentation); or</p> <p>An exemption because I am 65 years of age or older, under 16 years of age, or I am physically unable to comply. <i>(If you are physically unable to comply, explain, and attach relevant documentation.)</i></p>
<p>Page 2-3, If you answer “Yes” to any of the questions numbered 17 through 37, explain your answer on a separate sheet of paper.</p>	<p>If you answer...numbered 17 through 37, explain on a separate sheet of paper.</p> <p>17. Have you ever assisted ...</p> <p>18. Have you ever been treated...</p> <p>19. Have you ever committed a crime or offense for which you were not arrested?</p> <p>Have you ever been arrested, cited, or detained by any law enforcement officer (including... officers) for any reason?</p>	<p>Part 3. Eligibility Standards</p> <p>Answer Item Numbers 1. - 28. If you answer “Yes” to any of the questions, provide a complete explanation on a separate sheet of paper or use the space provided in Part 8., Additional Information; type or print 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. Answering “Yes” does not necessarily mean that you are not entitled to adjust status or register for permanent residence.</p> <p>1. Have you EVER assisted....</p> <p>2. Have you EVER been treated...</p> <p>3. Have you EVER committed a crime or offense for which you were not arrested?</p> <p>4. Have you EVER been arrested, cited, or detained by any law enforcement officer (including... officers) for any reason?</p>
<p>Page 3</p>	<p>Have you ever been charged...</p> <p>Have you ever been convicted...</p> <p>Have you ever been in....</p> <p>Have you ever been placed in an alternative sentencing or a rehabilitative program (for example... officers) for any reason?</p> <p>Have you ever received...</p> <p>20. Have you, or a dependent member of your immediate family, ever received public assistance from any source, including, but not limited to, the U.S. Government, any State ... If “Yes” provide the names(s) of the recipients(s) and U.S. Social Security Number(s).</p> <p>[2 column table with 3 rows. The headers for the columns are “Name of Recipient (Family</p>	<p>5. Have you EVER been charged...</p> <p>6. Have you EVER been convicted...</p> <p>7. Have you EVER been in....</p> <p>8. Have you EVER been placed in an alternative sentencing or a rehabilitative program (for example... officers) for any reason?</p> <p>9. Have you EVER received...</p> <p>10. Have you, or a dependent member of your immediate family, EVER received public assistance from any source, including, but not limited to, the U.S. Government, any state ... If “Yes,” provide the name(s) of the recipient(s) and their U.S. Social Security Number(s) below.</p> <p>[2 column table with 3 rows. The headers for the columns are “Full Name of Recipient</p>

	<p>Name, Given Name, Middle Name)” and “U.S. Social Security Number.”</p> <p>21. Have you ever:</p> <p>a. Within the past 10 years been a prostitute or procured...</p> <p>b. Engaged in any...</p> <p>c. Knowingly encouraged...</p> <p>d. Illicitly trafficked in....</p> <p>22. Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever....</p> <p>23. Do you intend to engage in the United States in:</p> <p>a. Espionage?</p> <p>b. Any activity</p> <p>c. Any activity to violate...</p> <p>24. Have you ever been...</p>	<p>(Family Name, Given Name, Middle Name)” and “U.S. Social Security Number.”</p> <p>11. Have you EVER:</p> <p>A. Within the past 10 years been a prostitute, procured ...</p> <p>B. Engaged in any...</p> <p>C. Knowingly encouraged...</p> <p>D. Illicitly trafficked in....</p> <p>12. Have you EVER engaged in, conspired to engage in, do you intend to engage in, have you EVER</p> <p>13. Do you intend to engage in the United States in:</p> <p>A. Espionage?</p> <p>B. Any activity</p> <p>C. Any activity to violate...</p> <p>14. Have you EVER been...</p>
Page 4	<p>25. Did you, during the period from March 23, 1933, to May 8, 1945, in association... Nazi Government of Germany, ever order...</p> <p>26. Have you ever engaged in genocide...</p> <p>27. Have you ever been deported from the United States or removed from the United States at Government expense, ... or have you ever been...</p> <p>28. Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for...</p> <p>29. Have you ever left...</p> <p>30. Have you ever been...</p> <p>31. Are you now withholding</p> <p>32. Do you plan.....</p> <p>33. Have you ever ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:</p> <p>a. Acts involving torture or genocide?</p> <p>b. Killing any person?</p> <p>c. Intentionally and severely injuring any person?</p> <p>d. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened?</p> <p>e. Limiting or denying any person’s ability to</p>	<p>15. Did you EVER, during the period from March 23, 1933 to May 8, 1945, in association... Nazi Government of Germany, order...</p> <p>[DELETE.]</p> <p>16. Have you EVER claimed to be a United States citizen in writing or any other way?</p> <p>17. Have you EVER been deported from the United States, removed from the United States at Government expense, ... or have you EVER been...</p> <p>18. Are you NOW under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act (INA) for ...</p> <p>19. Have you EVER left...</p> <p>20. Have you EVER been...</p> <p>21. Are you NOW withholding</p> <p>22. Do you plan.....</p> <p>23. Have you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:</p> <p>A. Acts involving torture or genocide?</p> <p>B. Killing any person?</p> <p>C. Intentionally and severely injuring any person?</p> <p>D. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened?</p> <p>E. Limiting or denying any person’s ability to</p>

	<p>exercise religious beliefs?</p> <p>34. Have you ever:</p> <p>a. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?</p> <p>b. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?</p>	<p>exercise religious beliefs?</p> <p>24. Have you EVER:</p> <p>A. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?</p> <p>B. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?</p>
Page 5	<p>35. Have you ever been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?</p> <p>36. Have you ever assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?</p> <p>37. Have you ever received any type of military, paramilitary, or weapons training?</p> <p>38. If your native alphabet is in other than Roman letters, write your name in your native alphabet.</p> <p>39. Language of your native alphabet.</p>	<p>25. Have you EVER been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?</p> <p>26. Have you EVER assisted or participated in selling, providing, or transporting weapons to any person who to your knowledge, used them against another person?</p> <p>27. Have you EVER received any type of military, paramilitary, or weapons training?</p> <p>28. Have you EVER:</p> <p>A. Recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group?</p> <p>B. Used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat?</p> <p>29. If your native alphabet does not use Roman letters, type or print your name in your native alphabet.</p> <p>Family Name (Last Name) Given Name (First Name) Middle Name</p> <p>30. Language of your native alphabet</p>
Page 5	<p>40. Accommodations for Individuals With Disabilities and/or Impairments <i>(Read the information on Page 4 of the instructions)</i></p> <p>1. Are you requesting an accommodation because of your disability(ies) and/or impairment(s)?</p> <p>If “Yes” check any applicable box:</p>	<p>Part 4. Accommodations for Individuals With Disabilities and Impairments <i>(Read the information in the Form I-698 instructions before completing this part.)</i></p> <p>1. Are you requesting an accommodation because of your disabilities and/or impairments?</p> <p>If you answered “Yes,” select any applicable box:</p>

	<p>a. I am 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)):</p> <p>b. I am blind or sight-impaired and request the following accommodations:</p> <p>c. I have another type of disability and/or impairment (describe the nature of your disability(ies) and/or impairment(s) and accommodation(s) you are requesting):</p>	<p>A. I am deaf or hard of hearing and request the following accommodations (if you are requesting a sign-language interpreter, indicate for which language (e.g. American Sign Language)):</p> <p>B. I am blind or have low vision and request the following accommodations:</p> <p>C. I have another type of disability and/or impairment (describe the nature of your disabilities and/or impairments and the accommodations you are requesting):</p>
<p>Pages 5 and 6, 41. Signature and Certification of Applicant</p>	<p>41. Signature and Certification of Applicant</p> <p>Applicant's Statement and Signature</p> <p>I can read and understand English, and I have read and understand each and every question and instruction on this form, as well as my answer to each question.</p> <p>Each and every question and instruction on this form, as well as my answer to each question, has been read to me in the ____ language, a language in which I am fluent, by the person named in Interpreter's Statement and Signature. I understand each and every question and instruction on this form, as well as my answer to each question.</p>	<p>Part 5. Applicant's Statement, Certification, USCIS ASC Acknowledgement, Signature, and Contact Information</p> <p>NOTE: Select the box for either Item A. or B. in Item Number 1. 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 6. 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 above also has read the Acknowledgement of Required Appointment at 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 above, 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</p>

		<p>USCIS ASC Acknowledgement.</p> <p><i>Acknowledgement of Required Appointment at USCIS ASC</i> [new subheader]</p> <p>I, [Auto-populate Field with Applicant's Full Name], understand that the purpose of a USCIS Application Support Center (ASC) appointment is for me to provide fingerprints, photographs, 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, photographs, 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 will verify that I willingly submit this application; I have reviewed the contents of this application; all of the information in my application are complete, true, and correct; and if I was assisted in completing this application, the person assisting me also reviewed this Acknowledgement of Required Appointment at USCIS ASC with me.</p> <p><i>Applicant's Certification</i> [Sub-header]</p> <p>I certify, under penalty of perjury under the laws of the United States of America, that the information is complete, true, and correct. Copies of documents submitted are exact photocopies of unaltered original documents, and I understand that I may be required to submit original documents to USCIS 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</p>
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		<p>entities and persons where necessary for the administration of U.S. immigration laws.</p> <p><i>Applicant's Signature</i> [subheader] 3. Applicant's Signature Date of Signature (mm/dd/yyyy)</p> <p><i>Applicant's Contact Information</i> [subheader] 4. Applicant's Daytime Telephone Number 5. Applicant's Mobile Telephone Number 6. Applicant's Email Address</p>
Page 6, Item Number 42. Interpreter's Statement and Signature	42. Interpreter's Statement and Signature <p>I certify that I am fluent in English and the below-mentioned language. Language used (language in which applicant is fluent) I further certify that I have read each and every question and instruction on this form, as well as the answer to each question, to this applicant in the above-mentioned language, and the applicant has understood each and every instruction and question on the form, as well as the answer to each question.</p>	Part 6. Interpreter's Certification, Signature, and Contact Information <p><i>Interpreter's Full Name</i> [Sub-header]</p> <p>Provide the following information concerning the interpreter:</p> <p>1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name) 2. Interpreter's Business or Organization Name (if any)</p> <p><i>Interpreter's Mailing Address</i> [Sub-header] 3. Street Number and Name Apt. Ste. Flr. City or Town State ZIP Code Province Postal Code Country</p> <p><i>Interpreter's Contact Information</i> [Sub-header] 4. Interpreter's Daytime Telephone Number 5. Interpreter's Email Address</p> <p><i>Interpreter's Certification</i> [Sub-header] I certify that:</p> <p>I am fluent in English and [fillable field], which is the same language provided in Part 5., 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 5., Item B. in Item Number 1.; and</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. 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</p>

		<p>fingerprints, photographs, 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> [subheader] 6. Interpreter's Signature Date of Signature (<i>mm/dd/yyyy</i>)</p>
Page 6, Item Number 43. Signature of Person Preparing Form, If Other Than Applicant	<p>...</p> <p>Signature</p> <p>Date (<i>mmddyyyy</i>)</p> <p>Print Your Full Name</p> <p>Telephone Number (include area/country code)</p> <p>Address</p>	<p>Part 7. Name, Contact Information, Certification, and Signature of the Person Who Prepared this Application, If Other Than the Applicant</p> <p>NOTE: If you are an attorney or accredited representative, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this applicant.</p> <p><i>Preparer's Full Name</i> [Sub-header]</p> <p>Provide the following information concerning the preparer:</p> <p>1. Preparer's Family Name (Last Name) Preparer's Given Name (First Name) 2. Preparer's Business or Organization (if any)</p> <p><i>Preparer's Mailing Address</i> [Sub-header]</p> <p>3. Street Number and Name Apt. Ste. Flr. City or Town State ZIP Code Province Postal Code Country</p> <p><i>Preparer's Contact Information</i> [Sub-header]</p> <p>4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number 6. Preparer's Email Address</p> <p><i>Preparer's Statement</i> [subheader]</p> <p>7.A. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.</p> <p>7.B. I am an attorney or accredited representative and my representation of the applicant in this case (choose one) extends/does not extend beyond the preparation of this application.</p> <p><i>Preparer's Certification</i> [Sub-header]</p>

		<p>By my signature, I certify, swear or affirm, under penalty of perjury, that I prepared this application on behalf of, at the request of, and with the express consent of, the applicant. I completed the application based only on responses the applicant provided to me. After completing the application, I reviewed it and all of the applicant's responses with the applicant, who agreed with each and every answer provided for each question on the application and, when required, supplied additional information pertaining to a question 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, photographs, and/or signature, he or she will affirm that the contents of this application and all supporting documentation are complete, true, and correct.</p> <p><i>Preparer's Signature</i> [subheader] 8. Preparer's Signature Date of Signature (mm/dd/yyyy)</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 6	For U.S. Citizenship and Immigration Services Use Only 44. through 51	[DELETE.]
New		<p>Part 8. Additional Information</p> <p>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> <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> <p>4.A. Page Number B. Part Number C. Item Number D. _____</p> <p>5.A. Page Number B. Part Number C. Item Number D. _____</p> <p>6.A. Page Number B. Part Number C. Item Number D. _____</p> <p>7. Signature Date of Signature (<i>mm/dd/yyyy</i>)</p>
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