



Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States

Department of Homeland Security

DHS

Form G-28I

OMB No. 1615-0105

Expires 03/31/2018

Part 1. Information About Attorney

1. USCIS Online Account Number (if any)

▶

Name of Attorney

2.a. Family Name
(Last Name)

2.b. Given Name
(First Name)

2.c. Middle Name

Address of Attorney

3.a. Street Number
and Name

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town

3.d. Province

3.e. Postal Code

3.f. Country

Contact Information of Attorney

4. Daytime Telephone Number

5. Mobile Telephone Number (if any)

6. Email Address (if any)

Part 2. Eligibility Information for Attorney

Select **all applicable items**.

1.a. ☐ I am an attorney licensed to practice law in, and in good standing of, a court of general jurisdiction in the following country where I reside and I am regularly engaged in such practice. If you need extra space to complete this section, use the space provided in Part 6. Additional Information.

Licensing Authority

1.b. License Number (if applicable)

1.c. I (select **only one box**) ☐ am not ☐ am subject to any order suspending, enjoining, restraining, disbaring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in Part 6. Additional Information to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable)

2. ☐ I am associated with

the attorney of record who previously filed Form G-28I in this case, and my appearance as an attorney for a limited purpose is at his or her request.

Part 3. Notice of Appearance as Attorney Admitted to Practice Outside the United States

This appearance relates to immigration matters before (select **only one box**):

1.a. ☐ U.S. Citizenship and Immigration Services (USCIS)

1.b. List the form numbers or specific matter in which appearance is entered.

2.a. ☐ U.S. Immigration and Customs Enforcement (ICE)

2.b. List the specific matter in which appearance is entered.

3.a. ☐ U.S. Customs and Border Protection (CBP)

3.b. List the specific matter in which appearance is entered.

4. Receipt Number (if any)

▶

5. I enter my appearance as an attorney at the request of the (select **only one box**):

☐ Applicant ☐ Petitioner

☐ Beneficiary/Derivative ☐ Respondent (ICE, CBP)

**Part 3. Notice of Appearance as Attorney
Admitted to Practice Outside the United States**
(continued)

**Information About Applicant, Petitioner,
Beneficiary or Derivative, Respondent, or
Authorized Signatory for an Entity**

- 6.a. Family Name (Last Name)
- 6.b. Given Name (First Name)
- 6.c. Middle Name
- 7.a. Name of Entity (if applicable)
- 7.b. Title of Authorized Signatory for Entity (if applicable)
8. USCIS Online Account Number (if any)
▶
9. Alien Registration Number (A-Number) (if any)
▶ A-

**Contact Information of Applicant, Petitioner,
Beneficiary or Derivative, or Respondent**

10. Daytime Telephone Number
11. Mobile Telephone Number (if any)
12. Email Address (if any)

**Mailing Address of Applicant, Petitioner,
Beneficiary or Derivative, or Respondent**

NOTE: Provide the mailing address of the applicant, petitioner, beneficiary or derivative, or respondent. **Do not** provide the business mailing address of the attorney **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28I.

- 13.a. Street Number and Name
- 13.b. ☐ Apt. ☐ Ste. ☐ Flr.
- 13.c. City or Town
- 13.d. Province

- 13.e. Postal Code
- 13.f. Country

**Part 4. Applicant, Petitioner, Beneficiary or
Derivative or Respondent Consent to
Representation, Contact Information, and
Signature**

**Consent to Representation and Release of
Information**

1. ☐ I have requested the representation of and consented to being represented by the attorney named in **Part 1** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney of record pertaining to me that appears in any system of records of USCIS, ICE, or CBP.

Options Regarding Receipt of USCIS Notices

When you (the applicant, petitioner, beneficiary or derivative, or respondent) are represented, USCIS will send notices to both you and your attorney either through mail or electronic delivery. If you do not want to receive original notices directly, but would rather have such notices sent to your attorney of record, please select **Item Number 2.** below.

2. ☐ I request that USCIS send any original notice on an application or petition to the business address of my attorney of record as listed in this form. I understand that I may change this election at any future date through written notice to USCIS.

**Signature of Applicant, Petitioner, Beneficiary or
Derivative, or Respondent**

- 3.a. Signature of Applicant, Petitioner, Beneficiary or Derivative, or Respondent



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

Part 5. Signature of Attorney

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. 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.a. Signature of Attorney

- 1.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name 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.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2.a. Page Number 2.b. Part Number 2.c. Item Number

2.d.

3.a. Page Number 3.b. Part Number 3.c. Item Number

3.d.

4.a. Page Number 4.b. Part Number 4.c. Item Number

4.d.

5.a. Page Number 5.b. Part Number 5.c. Item Number

5.d.

6.a. Page Number 6.b. Part Number 6.c. Item Number

6.d.