



Instructions for Declaration of Self-Sufficiency

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-944
OMB No. 1615-xxxx
Expires xx/xx/xxxx

What Is the Purpose of Form I-944?

Form I-944, Declaration of Self-Sufficiency, is used to demonstrate that you are not likely to become a public charge.

If you are applying for an immigration benefit with U.S. Citizenship and Immigration Services (USCIS), you may need to demonstrate that you are not likely to become a public charge under the Immigration and Nationality Act (INA) section 212(a)(4). A public charge means a person who receives one or more public benefits as defined in 8 CFR 212.21(b). An alien inadmissible based on the public charge ground means an alien who is likely at any time in the future to receive one or more public benefits as defined in 212.21(b) based on the totality of the alien's circumstances.

If you are applying for an extension of stay or change of status by filing Form I-539, Application to Extend/Change Nonimmigrant Status, or if a petitioner is seeking to extend your nonimmigrant stay or change your nonimmigrant status by filing Form I-129, Petition for a Nonimmigrant Worker, or Form I-129CW, Petition for a CNMI-Only Nonimmigrant Transitional Worker, this form may be requested to determine whether you are likely to receive public benefits, under 8 CFR 214.1 and 8 CFR 248.1.

Who Must File Form I-944?

You must file this form if you are filing an Application to Register Permanent Residence or Adjust Status (Form I-485) and you are subject to the public charge ground of inadmissibility. Whether you are a principal or derivative applicant, you must file your own Form I-944.

USCIS may request that applicants who file Form I-539, Application to Extend/Change Nonimmigrant Status, or petitioners seeking to extend stay or change status of a nonimmigrant worker by filing Form I-129, Petition for a Nonimmigrant Worker, file this form. If USCIS requests that you file Form I-944, whether you are a principal or derivative beneficiary you must file your own Form I-944.

How Is Form I-944 Used?

USCIS looks at the likelihood that you will become a public charge when determining whether you are inadmissible to the United States under INA section 212(a)(4). USCIS evaluates whether you are inadmissible by weighing all the positive and negative factors related to your age, health, family status, assets, resources and financial status, education and skills, prospective immigration status and period of stay, and considers an Affidavit of Support Under Section 213A of the Act (Form I-864), as applicable. Form I-944 collects information based on these factors so USCIS can determine whether you are inadmissible based on public charge grounds.

USCIS also looks at whether an applicant for an extension of stay or change of status has previously received or is likely to receive public benefits in the future, unless the nonimmigrant category that the alien seeks to extend or to which the alien seeks to change is exempt from INA section 212(a)(4) considerations.

Who Is Exempt From Filing Form I-944?

If you are exempt from the public charge ground of inadmissibility, you do not need to file Form I-944.

The following classes of individuals are exempt from the public charge ground of inadmissibility:

1. Applicant for asylum;
2. Refugee at the time of admission;
3. Violence Against Women Act (VAWA) self-petitioner;
4. Applicant for T (victim of human trafficking) nonimmigrant status;
5. Petitioner for U (crime victim) nonimmigrant status; or
6. Applicant for Temporary Protected Status.

If you are applying for adjustment of status to lawful permanent resident, you are exempt from the public charge ground of inadmissibility if you are adjusting:

1. As a VAWA self-petitioner;
2. As a Special Immigrant Juvenile;
3. As a Certain Afghan or Iraqi national;
4. As an Asylee;
5. As a Refugee;
6. As a crime victim (U Nonimmigrant);
7. Under the Cuban Adjustment Act;
8. Under the Cuban Adjustment Act for battered spouses and children;
9. Based on dependent status under the Haitian Refugee Immigrant Fairness Act;
10. Based on dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children;
11. As a Lautenberg Parolee;
12. Under the Indochinese Parole Adjustment Act of 2000;
13. Based on continuous residence in the United States since before January 1, 1972 (“Registry”);
14. As a Cuban or Haitian entrant under Public Law 99-603;
15. Under the Amerasian Homecoming Act;
16. As a Polish or Hungarian Parolee;
17. As Nicaraguans and other Central Americans who are adjusting status as described in section 202(a) and section 203 of the Nicaraguan Adjustment and Central American Relief Act (NACARA);
18. As an American Indian Born in Canada (INA section 289) or the Texas Band of Kickapoo Indians of the Kickapoo Tribe of Oklahoma, Pub. L. 97-429 (Jan. 8, 1983); or
19. As a spouse, child, or parent of a deceased soldier under the National Defense Authorization Act (NDAA).

General Instructions

USCIS provides forms free of charge through the USCIS website. In order to view, print, or fill out our forms, you should use the latest version of Adobe Reader, which you can download for free at <http://get.adobe.com/reader/>.

Signature. Each declaration must be properly signed and filed. For all signatures on this declaration, USCIS will not accept a stamped or typewritten name in place of a signature. If you are under 14 years of age, your parent or legal guardian may sign the declaration on your behalf. A legal guardian may also sign for a mentally incompetent person.

Validity of Signatures. USCIS will consider a photocopied, faxed, or scanned copy of the original, handwritten signature valid for filing purposes. The photocopy, fax, or scan must be of the original document containing the handwritten, ink signature.

Evidence. At the time of filing, you must submit all evidence and supporting documentation listed in the **What Evidence Must You Submit** and **Specific Instructions** sections of these Instructions.

Copies. You should submit legible photocopies of documents requested, unless the Instructions specifically state that you must submit an original document. USCIS may request an original document at the time of filing or at any time during processing of an application, petition, or declaration. If USCIS requests an original document from you, it will be returned to you after USCIS determines it no longer needs your original.

NOTE: If you submit original documents when not required or requested by USCIS or the Immigration Court, **your original documents may be immediately destroyed after we receive them.**

Translations. If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English. The certification must include the translator's signature. DHS recommends the certification contain the translator's printed name, the signature date, and the translator's contact information.

How To Fill Out Form I-944

1. Type or print legibly in black ink.
2. If you need extra space to complete any item within this declaration, use the space provided in **Part 10. 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.
3. Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks, "Provide the name of your current spouse"), type or print "N/A" unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, "How many children do you have" or "How many times have you departed the United States"), type or print "None" unless otherwise directed.

Specific Instructions

Part 1. Information About You

Item Number 1. Receipt Number of the Application or Petition You Are Filing With This Declaration (if any).

Provide the USCIS receipt number for the application or petition you are filing with this declaration. If you do not have a receipt number, or if you cannot remember it, leave this space blank.

Item Number 2. Form Number for Which You Are Filing This Form. Provide the form number for which you are filing this declaration.

Item Number 3. Your Current Legal Name. Provide your legal name, as shown on your birth certificate or legal name change document. If you have two last names, include both and use a hyphen (-) between the names, if appropriate. Type or print your last, first, and middle names in each appropriate field.

Item Number 4. U.S. Mailing Address. Provide a valid U.S. mailing address.

Item Number 5. Alternate and/or Safe Mailing Address. If you are a T nonimmigrant who is applying for adjustment of status and filing this declaration as part of that application, and do not feel secure in receiving correspondence regarding this declaration at your home address, provide a “safe mailing address.” You may provide a post office box (PO Box) or the address of a friend, your attorney, a community-based organization that is helping you, or any other address where you can safely and punctually receive mail.

Item Number 6. Alien Registration Number (A-Number) (if any). An Alien Registration Number, otherwise known as an “A-Number,” is typically issued to people who apply for, or are granted, certain immigration benefits. In addition to U.S. Citizenship and Immigration Services (USCIS), Immigration and Customs Enforcement (ICE), U.S. Customs and Border Protection (CBP), Executive Office of Immigration Review (EOIR), and the Department of State (DOS) may also issue an A-Number to certain foreign nationals. If you were issued an A-Number, type or print it in the spaces provided. If you are renewing your EAD, this number may be listed as the USCIS Number on the front of the card. If you have more than one A-Number, use the space provided in **Part 10. Additional Information** to provide the information. If you do not have an A-Number or if you cannot remember it, leave this space blank.

Item Number 7. USCIS Online Account Number (if any). If you have previously filed an application or petition using the USCIS online filing system (previously called USCIS Electronic Immigration System (USCIS ELIS)), provide the USCIS Online Account Number you were issued by the system. You can find your USCIS Online Account Number by logging in to your account and going to the profile page. If you previously filed certain applications or petitions on a paper form through a USCIS Lockbox facility, you may have received a USCIS Online Account Access Notice issuing you a USCIS Online Account Number. You may find your USCIS Online Account Number at the top of the notice. If you were issued a USCIS Online Account Number, enter it in the space provided. The USCIS Online Account Number is not the same as an A-Number.

Item Number 8. Date of Birth. Enter your date of birth in mm/dd/yyyy format in the space provided. For example, type or print October 5, 1967 as 10/05/1967.

Item Number 9. Place of Birth. Enter the name of the city or town, and country where you were born. Type or print the name of the country as it was named when you were born, even if the country’s name has changed or the country no longer exists.

Item Number 10. Country of Citizenship or Nationality. Enter the name of the country where you are a citizen. This is not necessarily the country where you were born. If you are stateless, type or print the name of the country where you were last a citizen or national. If you are a citizen or national of more than one country, type or print the name of the foreign country that issued your last passport.

Part 2. Family Status (Your Household)

USCIS will review your family status as a factor in the public charge determination, including your household size. The term child includes stepchildren and adopted children as provided in INA section 101(b)(1).

Item Number 1. Household. The following individuals are part of your household:

1. If you are 21 years of age or older, or under the age of 21 and married, list the following household members on the table in **Part 2.**, as applicable: Any person listed as a dependent on your most recent tax return; and
 - A. You;
 - B. Your spouse, if physically residing with you;
 - C. Your children (under the age of 21 and unmarried) physically residing with you;
 - D. Your other children (under the age of 21 and unmarried) not physically residing with you for whom you provide or are required to provide at least 50 percent of financial support, as evidenced by a child support order or agreement, a custody order or agreement, or any other order or agreement specifying the amount of financial support to be provided by you;
 - E. Any other individuals (including a spouse not physically residing with you) to whom you provide, or are required to provide, at least 50 percent of the individual's financial support, or who are listed as a dependent on your federal income tax return; and
 - F. Any individual who provides to you at least 50 percent of your financial support, or who lists you as a dependent on his or her federal income tax return.
2. If you are a child (under the age of 21 and unmarried) list the following household members on the table in **Part 2.**, as applicable:
 - A. You;
 - B. Your children (under the age of 21 and unmarried) physically residing with you;
 - C. Your other children (under the age of 21 and unmarried), not physically residing with you for whom you provide or are required to provide at least 50 percent of financial support, as evidenced by a child support order or agreement, a custody order or agreement, or any other order or agreement specifying the amount of financial support to be provided by you;
 - D. Your parents or legal guardians, or any other individual providing or required to provide at least 50 percent of financial support to you as evidenced by a child support order or agreement, a custody order or agreement, or any other order or agreement specifying the amount of financial support to be provided by you;
 - E. Your parents' or legal guardians' other children (under the age of 21 and unmarried) physically residing with you;
 - F. Your parents' or legal guardians' other children (under the age of 21 and unmarried) not physically residing with you for whom the parent or legal guardian provides or is required to provide at least 50 percent of financial support, as evidenced by a child support order or agreement, a custody order or agreement, or any other order or agreement specifying the amount of financial support to be provided by the parents or legal guardians; and
 - G. Any other individual to whom your parents or legal guardians provide or other individuals provide, or are required to provide, at least 50 percent of financial support or who are listed as a dependent on your parents' or legal guardians' federal income tax return.

In addition to listing each household member's name (including yourself), also provide in the appropriate columns of the table each individual's date of birth, relationship to you (for yourself, you must list "self"), A-Number (if any), and whether the individual is filing an immigration benefit with you. If the individual is not filing an immigration benefit form, enter "No" in the column labeled "Is this individual filing for an immigration benefit with you or has this individual already filed for one?".

NOTE: Your table will have at least one individual listed (yourself).

Part 3. Your Assets, Resources, and Financial Status

Your assets, resources, and financial status are factors USCIS considers when deciding whether you are inadmissible based on the public charge ground.

Household Income

Item Number 1. Household Income. In the table in **Part 3.**, list your and your household members' total income from the most recent federal income tax returns within the last three tax years, if any.

USCIS will consider your total household income which includes your annual gross (total) income, any additional income from individuals not included in your household who physically reside with you and whose income you will rely upon. Your household income should be at least 125 percent of the Federal Poverty Guidelines set by the U.S. Department of Health and Human Services (HHS) for the household size you listed in **Part 2.** See <https://aspe.hhs.gov/poverty-guidelines>.

You must provide an IRS transcript(s) of your federal income tax returns for the three most recent tax years and the IRS transcript(s) of the household members whose income you are including. For information on obtaining federal income tax transcripts without a fee, see <https://www.irs.gov/individuals/get-transcript>. You may also use IRS Form 4506-T to request tax transcripts from the IRS. You are not required to have the IRS certify the transcript or photocopy unless specifically instructed to do so by USCIS; a plain transcript is acceptable.

If you are filing Form I-944 between January 1 and April 15 of any year, and you and/or your household members have not yet filed the current year's federal income tax return, submit IRS transcript for the three most recent tax years. At the time of interview on your application, an officer may request the tax return transcripts for the current tax year. Submit any tax transcripts that you or your household members filed with any foreign government if you or your household members were residing outside of the United States during any time within the last three tax years and you were not required to file a federal individual income tax return with the United States government.

If you are a child (under the age of 21 and unmarried) and are listed as a dependent on your parents' income tax return, or if you are listed as a dependent on anyone else's income tax return, list the total income from that individual's most recent tax returns within the last three tax years and submit that individual's IRS tax transcripts in accordance with the instructions above.

If you were not required to file a federal income tax return in any of the prior three tax years, you may provide Form W-2 or a Social Security Statement providing history of total annual income (gross income). If you provide a W-2 or Social Security Statement provide the listed wages, tips, or other compensation. **Do not submit paystubs or letters from employers.**

If you need extra space to complete this section, use the space provided in **Part 10. Additional Information.**

Item Number 2. Additional Income. If you received additional income on a continuing monthly basis for the most recent full year (for example, child support) and it was NOT listed in your tax return transcript, provide the amount of additional income. If you provide a W-2 or Social Security Statement annotate any other income as listed on IRS Publication Number 17, available at <https://www.irs.gov/forms-pubs/about-publication-17-your-federal-income-tax-for-individuals>. Also provide evidence of the additional income from any source in the United States or outside the United States in U.S. dollars.

Assets and Resources

Item Number 3. Assets. List only the assets that can be converted into cash within 12 months. Provide the value of any asset held in the United States or outside the United States, in U.S. dollars.

If you own your home, you may include the net value of your home as an asset. The net value of the home is the appraised value of the home, minus the sum of all loans secured by a mortgage, trust deed, or other lien on the home. If you wish to include the net value of your home, then you must include documentation demonstrating that you own it, a recent appraisal by a licensed appraiser, and evidence of the amount of all loans secured by a mortgage, trust deed, or other lien on the home.

You may not include the net value of an automobile unless you show that you have more than one automobile, and at least one automobile is not included as an asset.

If you list assets as a resource, submit evidence of the value of your assets. You must include a description of the asset, proof of ownership, and the basis for the owner's claim of its net cash value. Evidence of assets and resources include:

1. Checking and savings account statements;
2. Annuities;
3. Stocks and bonds (cash value)/certificates of deposit;
4. Retirement accounts and educational accounts;
5. Net cash value of real estate holdings; and
6. Any other evidence of substantial assets that can be easily converted into cash.

If you need extra space to complete this section, use the space provided in **Part 10. Additional Information**.

You can also provide any documentation from the household member's income and assets including but not limited to, the person's proof of income such as employment income, pensions, Social Security benefits, retirement accounts, or other supportive income. For additional information, see www.uscis.gov/greencard/public-charge.

Liabilities/Debts

Item Number 4. Liabilities/Debts. Provide a list of all your liabilities or debts. Examples of liabilities and debts include mortgages, car loans, unpaid child or spousal support, unpaid taxes, and credit card debt. Provide documentation accordingly. If you need extra space to complete this section, use the space provided in **Part 10. Additional Information**.

Credit Report and Score

Item Numbers 5. - 6. Credit Card Score and Report. USCIS will review your U.S. credit reports and the credit score submitted with your declaration, if available, to determine if you can support yourself and your household. If available, identify the latest credit score number.

You can obtain a free credit report once a year under the Fair Credit Reporting Act (FCRA) from each one of the three credit reporting agencies. You are only required to provide one credit report from any of the three credit reporting agencies. See <https://www.usa.gov/credit-reports> for more information. If there are any errors in the credit report, you should provide evidence from the credit reporting agency that demonstrates the error is under investigation or has been resolved.

If you have any negative history in your credit report, you may provide an explanation in the designated area of this form. Negative credit history may include delinquent accounts, debt collections, charge-offs (delinquent accounts deemed unlikely to be collected), repossession, foreclosure, judgments, tax liens, or bankruptcy on your credit report.

If you do not have a credit report or credit score, provide a credit bureau report of no record found. You may provide evidence of continued payment of bills if there is no report.

Item Numbers 7. Bankruptcy. Indicate whether or not you have ever filed for bankruptcy. If you answered "Yes," list all the times you filed for bankruptcy, including the type, place of filing and the date of the bankruptcy. Provide evidence of the resolution of each bankruptcy, if available.

Health Insurance

Item Number 8. Health Insurance. If you currently have health insurance, provide the following:

1. For each policy, a copy of each policy page showing the terms and type of coverage and persons covered;

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2. Letter on the company letter head or other evidence from your health insurance company stating you are currently enrolled in health insurance and providing the terms and type of coverage;
 3. You may also provide the latest Form 1095-B, Health Coverage; Form 1095-C, Employer-Provided Health Insurance Offer and Coverage (if available) with evidence of renewal of coverage for the current year.

A health insurance card is insufficient without effective and expiration dates. If you answered “No,” to **Item 8**, proceed to **Item A**.

Item A. Indicate whether you have enrolled in health insurance but your insurance coverage has not started yet. If you answer “Yes,” provide a letter or other evidence from the insurance company showing that you have enrolled in a health insurance plan that includes the terms, the type of coverage, and the person(s) covered.

If you answered “No,” you may provide information on how you plan to pay for reasonably anticipated medical costs. If you need extra space to complete this section, use the space provided in **Part 10. Additional Information**.

If you have Medicaid, or Medicare Part D with a premium and cost sharing subsidy for health insurance please include the benefit in **Items 8**, and **9**.

USCIS reviews Form I-693, Report of Medical and Vaccination Record or Medical Examination For Immigrant or Refugee Applicant, to determine whether you have a medical condition that will affect your ability to work, attend school, or care for yourself.

You may provide any documentation that may outweigh any negative factors related to a medical condition, including but not limited to, information provided by a civil surgeon or a panel physician on a medical examination. You may also provide an attestation from your treating physician regarding the prognosis of any medical condition and whether or not this medical condition impacts your ability to work or go to school. You may also provide evidence of sufficient assets and resources to pay the costs of medical treatment.

Application For or Receipt of Public Benefits

Item Number 9. Application for or Receipt of Public Benefits.

Please provide the information requested about your (the alien’s) application for or receipt of public benefits. In the table provided, please provide all requested information about each public benefit regardless of whether the amount or the duration would be excluded as described below, as USCIS will calculate the amount to be considered in the public charge inadmissibility determination. If you require additional space, please use the space provided in **Part 10. Additional Information**.

In the table, indicate whether or not you have ever applied for or received, any of the following monetizable (cash) benefits:

1. Any Federal, State, local or tribal cash assistance for income maintenance including:
 - A. Supplemental Security Income (SSI);
 - B. Temporary Assistance for Needy Families (TANF); or
 - C. Federal, State or local cash benefit programs for income maintenance (often called “General Assistance” in the State context, but which may exist under other names).
2. The following monetizable (non-cash) benefits:
 - A. Supplemental Nutrition Assistance Program (SNAP, or formerly called “Food Stamps”);
 - B. Section 8 Housing Assistance under the Housing Choice Voucher Program; or
 - C. Section 8 Project-Based Rental Assistance (including Moderate Rehabilitation).

3. Any of the following non-monetizable (non-cash) public benefits:

- A. Medicaid;
- B. Any benefit for institutionalization for long-term care at government expense, for example, Intermediate Care Facilities for People with Intellectual disability (ICF/ID), Nursing Facility (NF), Preadmission Screening & Resident Review (PASRR), Inpatient Psychiatric Services for Individuals Under Age 21, and Services for individuals age 65 or older in an institution for mental diseases;
- C. Premium and Cost Sharing Subsidies for Medicare Part D; or
- D. Public Housing.

Amount and Duration of Benefit

- 1. **Monetizable (cash or non-cash) benefits:** USCIS will consider the benefits when the total receipt of all benefits cumulatively exceeds 15 percent of the Federal Poverty Guidelines (FPG) for a household of one within any period of 12 consecutive months, based on the per-month average FPG for the months during which the benefits are received. Note only the amount received by or attributable to the alien will be considered (for example, if the TANF is for a household of 4, only 25 percent of the total TANF benefit will be considered).
- 2. **Non-monetizable benefits (non-cash):** USCIS will generally consider the benefits when the benefit (or benefits) is received for longer than 12 months in the aggregate within a 36 month period (such that, for instance, receipt of 2 non-monetizable benefits in one month counts as two months). Note only the amount received by or attributable to the alien will be considered (for example, if the SNAP or housing benefit is for a household of 4, only 25 percent of the total SNAP or housing benefit will be considered).
- 3. **Combined Monetizable and Non-monetizable Public Benefits:** USCIS will generally consider the receipt of a combination of monetizable benefits, described above, where the cumulative value of such benefits is equal to or less than 15 percent of the FPG for a household size of one within any period of 12 consecutive months based on the per-month average FPG for the months during which the benefits are received, together with one or more non-monetizable benefits described above of this section if such non-monetizable benefits are received for more than 9 months in the aggregate within a 36 month period (such that, for instance, receipt of two non-monetizable benefits in one month counts as two months).

The following table provides a summary of how USCIS will consider the monetizable and non-monetizable public benefits.

Summary of Consideration Monetizable and Non-Monetizable Public Benefits	
Monetizable Benefit(s):	Non-Monetizable Benefit(s):
Cumulative value of benefits for a household of one within any period of 12 consecutive months, based on the per-month average FPG for the months during which the benefits are received.	Number of Benefits and Duration (Months) within 36-month period (such that, for instance, receipt of two non-monetizable benefits in one month counts as two months)
More than 15% of the FPG	Any benefits for any time period
Equal to or less than 15% of the FPG	1 or more benefits for longer than 9 aggregate months
Any benefits in an percentage of the FPG	1 or more benefit for longer than 12 aggregate months

Public Benefits Received by U.S. Armed Forces Service Members

When considering receipt of public benefits in the public charge determination, USCIS will not consider any public benefits if you were or are, either at the time of receipt of the benefit(s), the time of filing your immigration benefits application, or the time of USCIS' adjudication of the benefit application:

1. An alien serving in active duty or in the Ready Reserve component of the U.S. Armed Forces; or
2. The spouse or child of the service member (listed in 1, above).

You must provide the following documentation:

A. Service Members:

- (1) Certified proof, issued by the authorizing official of the executive department in which you are serving.

B. Spouses and Children of Service Members:

- (1) Provide copies of marriage certificate for spouse and birth certificates for children; and
- (2) DD-1173, United States Uniformed Services Identification and Privilege Card (Dependent).

Medicaid Services Not Considered

In addition, in the public charge inadmissibility determination, USCIS will not consider any of the Medicaid benefits received by:

1. Children of U.S. citizens whose lawful admission for permanent residence and subsequent residence in the legal and physical custody of their U.S. citizen parent will result automatically in the child's acquisition of citizenship or whose lawful admission for permanent residence will result automatically in the child's acquisition of citizenship upon finalization of adoption in the United States by the U.S. citizen parent(s), or once meeting other eligibility criteria as required under INA 320.

For information on eligibility for citizenship under INA 320 and the evidentiary requirements to meet the qualifications to demonstrate citizenship, please see Form N-600, Application for Certificate of Citizenship. If you have not previously submitted any required evidence to comply with filing requirements of other benefit requests (such as the I-130 Petition for Alien Relative, I-600 Petition to Classify Orphan as an Immediate Relative, or I-800 Petition to Classify Convention Adoptee as an Immediate Relative), please submit them at this time with this form.

If you are currently residing abroad and entered the United States with a nonimmigrant visa in order to attend an interview in regard of an N-600K, Application for Citizenship and Issuance of Certificate Under INA Section 322, please provide a copy of the interview notice.

Further, USCIS will not consider Medicaid provided payment for "emergency medical condition," for services provided under the Individuals with Disabilities Education Act (IDEA), or for school-based non-emergency benefits provided to children who are at or below the oldest age of children eligible for secondary education as determined under State law. Please provide documentation of such payments under those conditions, and, if applicable, provide a statement and information regarding the "emergency medical condition" determination. USCIS will not consider these specific Medicaid provisions in the public charge determination. If you applied for or received Medicaid under these conditions, please indicate and explain so in **Part 10. Additional Information**.

Documentation of Public Benefit Receipt:

If you applied for, are currently receiving, or previously received, any of the public benefits listed above, provide evidence in the form of a letter, notice, certification or other agency documents that contain the following:

1. Your Name;
2. Name and contact information for the public benefit granting agency;
3. Type of Benefit;
4. Amount of benefit(s) received (indicate whether weekly, monthly, or annually. If other, explain);
5. Date Benefit Was Granted;
6. Date the Benefit Ended or Expires (mm/dd/yyyy) (if applicable); and
7. Number of Household Members Receiving the Benefit (if applicable).

If you have terminated the receipt of benefits, provide the documentation that indicates you will no longer receive the benefits with the applicable termination date.

Item Numbers 10 and 11. Future Application for or Receipt of Public Benefits. Indicate whether or not you anticipate applying for or receiving public benefits at any time in the future, including whether you have been certified or approved to receive future benefits or have been determined to be eligible for future benefits. If you anticipate requesting or receiving such benefits, please explain what public benefit(s) you expect to apply for or receive, for how long you expect to receive the benefit(s), the anticipated amount(s) of the public benefits you expect to receive, and why you would receive the benefit(s) in the space provided. If you need extra space to complete this section, use the space provided in **Part 10. Additional Information.**

Item Number 12. Applications for or Receipt of Immigration Fee Waivers. Indicate whether or not you have ever applied for or received a fee waiver when applying for an immigration benefit from USCIS. If you answered “Yes,” list when you received the fee waiver, for the type of immigration benefit for which you applied, and the receipt number for the application for which the fee was waived.

If you need extra space to complete this section, use the space provided in **Part 10. Additional Information.** You may also use this section to explain the circumstances that caused you to apply for a fee waiver and if those circumstances have changed. If those circumstances have changed, please provide any documents you may have to support your explanations.

Part 4. Your Education and Skills

Item Number 1. Form I-140 Approval. Indicate whether you have an approved Form I-140 or I-129. If you answered “Yes,” skip this Part and proceed to **Part 5.** If you answered “No,” proceed to **Item Number 2.**

Item Numbers 2. and 3. Indicate whether or not you have graduated high school or earned an equivalent of a high school diploma. If you did not graduate high school, list the highest grade completed. Also list all educational programs you attended in the table, such as high school, college, or other higher education. Provide the name of the program or school, the degree or certificate received, if any, the field of study, and the start and end dates. Enter your degree program start date and end date in mm/dd/yyyy format. If your degree program does not start and end on a specific day (i.e. “dd”), provide your best estimate of the day. If available, you must provide evidence of any degrees or certifications received, such as transcripts, diplomas, degrees, and trade profession certificates or equivalent (you should provide an explanation if such evidence is unavailable and, if possible, evidence of unavailability such as a letter from the issuing institution). Foreign education should include an evaluation of equivalency to education or degrees acquired at accredited colleges, universities, or educational institutions in the United States. For a list of organizations that provide equivalency evaluation see the National Association of Credential Evaluation Services (NACES), at <http://www.naces.org/members.htm>.

If, as part of your approved Form I-140, the petitioner had to demonstrate that you have certain educational requirements, you do not need to resubmit your educational information.

Item Number 4. Occupational Skills. List any relevant occupational skills, including any certifications and licenses, when these were obtained, who issued the certification or license, license numbers, and expiration/renewal date. This includes but is not limited to workforce skills, training, licenses for specific occupations or professions, and certificates documenting mastery or apprenticeships in skilled trades or professions. If available, you must provide evidence of any training, licenses for specific occupations or professions, and certificates documenting mastery or apprenticeships in skilled trades or professions (you should provide an explanation if such evidence is unavailable and, if possible, evidence of unavailability such as a letter from the issuing institution).

If, as part of your approved Form I-140, the petitioner had to demonstrate that you have certain occupational skills, you do not need to resubmit your occupational information.

Item Number 5. English and Other Language Skills. List your proficiency in English and other languages in addition to English. Provide any evidence of language certifications, including any language or literacy classes you took or are currently taking, or other evidence of proficiency.

Item Number 6. Unemployment. Indicate whether or not you are unemployed and if you are unemployed, for how long you have been unemployed. Also indicate whether you are receiving unemployment benefits and the date of termination of benefits. Provide proof of any unemployment benefits received and a letter or document or other evidence of termination from employment and the date of termination of employment.

Item Number 7. Retirement. Indicate whether or not you are retired and provide the date of retirement, if applicable. Provide proof of income from pensions, social security or other retirement benefits.

Item Number 8. Employment History. List where you have worked full-time or part-time during the last five years. Provide information for the complete time period. If you do not know your start or end days (i.e. “dd”), provide your best estimate. Begin by providing information about your current and most recent employment or unemployment, if applicable. Provide the locations and dates where you worked. If you worked for yourself, type or print “self-employed.” If you were unemployed, type or print “unemployed.” Select the box to indicate if you currently work for the employer. As part of the evaluation of employment history, USCIS will consider whether you had authorization from USCIS to accept employment.

Part 5. Accommodations for Individuals With Disabilities and/or Impairments

USCIS is committed to providing reasonable accommodations for qualified individuals with disabilities and/or impairments that will help them fully participate in USCIS programs and benefits.

Reasonable accommodations vary with each disability and/or impairment. They may involve modifications to practices or procedures. There are various types of reasonable accommodations that we may offer. Examples include but are not limited to:

1. If you are deaf or hard of hearing, USCIS may provide you with a sign-language interpreter at an interview or other immigration benefit-related appointment;
2. If you are blind or have low vision, USCIS may permit you to take a test orally rather than in writing; or
3. If you are unable to travel to a designated USCIS location for an interview, USCIS may visit you at your home or a hospital.

If you believe that you need USCIS to accommodate your disability and/or impairment, select “Yes” and then any applicable box in **Part 5., Items A. - C. in Item Number 1.**, that describes the nature of your disabilities and/or impairments. Also, describe the types of accommodations you are requesting on the lines provided. If you are requesting a sign-language interpreter, indicate for which language. If you need extra space to complete this section, use the space provided in **Part 10. Additional Information.**

NOTE: All domestic USCIS facilities meet the Accessibility Guidelines of the Americans with Disabilities Act, so you do not need to contact USCIS to request an accommodation for physical access to a domestic USCIS office. However, in **Part 5.** of this declaration, you can indicate whether you use a wheelchair. This will allow USCIS to better prepare for your visit.

NOTE: USCIS also ensures that limited English proficient (LEP) individuals are provided meaningful access at an interview or other immigration benefit-related appointment, unless otherwise prohibited by law. LEP individuals may bring a qualified interpreter to the interview.

USCIS considers requests for reasonable accommodations on a case-by-case basis, and we will make our best efforts to reasonably accommodate your disabilities and/or impairments. USCIS will not exclude you from participating in USCIS programs or deny your declaration because of your disabilities and/or impairments. Requesting and/or receiving an accommodation will not affect your eligibility for an immigration benefit.

For hearings before the Immigration Court: Interpreters are provided, at the government's expense, to individuals whose comprehension of the English language is inadequate to fully understand and participate in removal proceedings. In general, the Immigration Court endeavors to accommodate the language needs of all respondents and witnesses. The Immigration Court will arrange for an interpreter both during the individual calendar hearing and, if necessary, the master calendar hearing. The Immigration Court is also committed to addressing the needs of individuals with disabilities and/or impairments. If your case is pending before the Immigration Court, you should notify the court of any such need before your first hearing with an immigration judge. The Immigration Court considers all requests to address such needs on a case-by-case basis.

Part 6. Declarant's Statement, Contact Information, Declaration, Certification, and Signature

Item Numbers 1 - 6. Select the appropriate box to indicate whether you read this declaration yourself or whether you had an interpreter assist you. If someone assisted you in completing the declaration, select the box indicating that you used a preparer. Further, you must sign and date your declaration and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every declaration **MUST** contain the signature of the declarant (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.

Part 7. Interpreter's Contact Information, Certification, and Signature

Item Numbers 1 - 7. If you used anyone as an interpreter to read the Instructions and questions on this declaration to you in a language in which you are fluent, the interpreter must fill out this section; provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the declaration.

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Declaration, if Other Than the Declarant

Item Numbers 1 - 8. This section must contain the signature of the person who completed your declaration, if other than you, the declarant. If the same individual acted as your interpreter and your preparer, that person should complete both **Part 7.** and **Part 8.** If the person who completed this declaration is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this declaration **MUST** sign and date the declaration. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your declaration is an attorney or accredited representative, he or she may also need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your declaration.

Part 9. Signature at Interview

Do not complete this part. The USCIS Officer will ask you to complete this part at your interview.

Part 10. Additional Information

Item Numbers 1 - 6. If you need extra space to provide any additional information within this declaration, use the space provided in **Part 10. Additional Information.** If you need more space than what is provided in **Part 10.**, you may make copies of **Part 10.** to complete and file with your declaration or attach a separate sheet of paper. 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.

We recommend that you print or save a copy of your completed declaration to review in the future and for your records.

What Evidence Must You Submit?

You must submit all evidence requested in these Instructions with your declaration. If you fail to submit required evidence, USCIS may reject or deny your declaration for failure to submit requested evidence or supporting documents in accordance with 8 CFR 103.2(b)(1) and these Instructions.

What Is the Filing Fee?

There is currently no filing fee for Form I-944.

Filing Form I-944 With Form I-485, I-539 or I-129

Submit Form I-944 at the same time you submit Form I-485. You may be requested to provide Form I-944 with Form I-539 or Form I-129.

Where To File?

Please see our website at www.uscis.gov/I-944 or visit the USCIS Contact Center at www.uscis.gov/contactcenter to connect with a USCIS representative for the most current information about where to file this declaration.

If you are in proceedings in Immigration Court (that is, if you have been served with Form I-221, Order to Show Cause and Notice of Hearing; Form I-122, Notice to Applicant for Admission Detained for Hearing Before an Immigration Judge; Form I-862, Notice to Appear; or Form I-863, Notice of Referral to Immigration Judge, that DHS filed with the Immigration Court), you should file this declaration with the appropriate Immigration Court.

The DHS attorney will provide you with Pre-Order Filing Instructions regarding background and security investigations. You must also submit a copy to USCIS. Please see our website at www.uscis.gov/laws/immigration-benefits-eoir-removal-proceedings or call our National Contact Center for the most current information about where to file the copy of the application that you file with the Immigration Court.

Address Change

A declarant who is not a U.S. citizen must notify USCIS of his or her new address within 10 days of moving from his or her previous residence. For information on filing a change of address, go to the USCIS website at www.uscis.gov/addresschange.

If you are already in proceedings in Immigration Court, you must also notify the Immigration Court on EOIR Form 33/IC, Alien's Change of Address Form/Immigration Court, of any changes of address within five days of the change in address. The EOIR Form 33/IC is available on the EOIR website at <http://www.justice.gov/eoir/formlist.htm>.

NOTE: Do not submit a change of address request to the USCIS Lockbox facilities because the Lockbox does not process change of address requests.

Processing Information

You must be physically present in the United States and provide a United States address to file this declaration. USCIS will reject any declaration that is not signed and will send you a rejection notice. You may fix the problem and resubmit Form I-944. Form I-944 is not considered properly filed until USCIS accepts it.

Initial Processing. Once USCIS accepts your declaration, we will check it for completeness. If you do not completely fill out this declaration, you will not establish a basis for your eligibility and USCIS may reject or deny your declaration.

Requests for More Information. USCIS may request that you provide more information or evidence to support your declaration. We may also request that you provide the originals of any copies you submit. If we request an original document from you, it will be returned to you after USCIS determines it no longer needs your original.

Requests for Interview. We may request that you appear at a USCIS office for an interview based on your declaration. At the time of any interview or other appearance at a USCIS office, we may require that you provide your biometrics to verify your identity and/or update background and security checks.

USCIS Forms and Information

To ensure you are using the latest version of this declaration, visit the USCIS website at www.uscis.gov where you can obtain the latest USCIS forms and immigration-related information.

Instead of waiting in line for assistance at your local USCIS office, you can schedule an appointment online at www.uscis.gov. Select “Make an Appointment” and follow the screen prompts to set up your appointment. Once you finish scheduling an appointment, the system will generate an appointment notice for you.

Penalties

If you knowingly and willfully falsify or conceal a material fact or submit a false document with your Form I-944, we will deny your Form I-944 and may deny any other immigration benefit. In addition, you will face severe penalties provided by law and may be subject to criminal prosecution.

USCIS Compliance Review and Monitoring

By signing this declaration, you have stated under penalty of perjury (28 U.S.C. section 1746) that all information and documentation submitted with this declaration are complete, true, and correct. You also authorize the release of any information from your records that USCIS may need to determine your eligibility for the immigration benefit you are seeking and consent to USCIS verifying such information.

The Department of Homeland Security (DHS) has the authority to verify any information you submit to establish eligibility for the immigration benefit you are seeking at any time. USCIS’ legal authority to verify this information is in 8 U.S.C. sections 1103, 1155, and 1184, and 8 CFR Parts 103, 204, 205, and 214. To ensure compliance with applicable laws and authorities, USCIS may verify information before or after your case is decided.

Agency verification methods may include, but are not limited to: review of public records and information; contact through written correspondence, the Internet, facsimile, other electronic transmission, or telephone; unannounced physical site inspections of residences and locations of employment; and interviews. USCIS will use information obtained through verification to assess your compliance with the laws and to determine your eligibility for an immigration benefit.

Subject to the restrictions under 8 CFR 103.2(b)(16), USCIS will provide you with an opportunity to address any adverse or derogatory information that may result from a USCIS compliance review, verification, or site visit after a formal decision is made on your case or after the agency has initiated an adverse action which may result in revocation or termination of an approval.

DHS Privacy Notice

AUTHORITIES: The information requested on this declaration, and the associated evidence, is collected under the Immigration and Nationality Act (INA) section INA 212(a)(4).

PURPOSE: The primary purpose for providing the requested information on this form is to provide documentation to demonstrate that you are not likely to become a public charge. DHS uses the information you provide to grant or deny the immigration benefit you are seeking.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result in denial of your form.

ROUTINE USES: DHS may share the information you provide on this declaration and any additional requested evidence with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-007 - Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-016a Computer Linked Application Information Management System and Associated Systems,] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 4 hours per response, including the time for reviewing instructions, gathering the required documentation and information, completing the declaration, preparing statements, attaching necessary documentation, and submitting the declaration. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-XXXX. **Do not mail your completed Form I-944 to this address.**