

TABLE OF CHANGES – FORM
Form I-600A/I-600 Supplement 1, Listing of Adult Member of the Household
OMB Number: 1615-0028
11/26/2018

Reason for Revision: Comprehensive revision.

- Black font = Current text
- Red font = Changes

Expires 12/31/2018

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Current Page Number and Section	Current Text	Proposed Text
Page 1, Part 1. Information About an Adult Member of the Household	<p>[Page 1]</p> <p>Part 1. Information About an Adult Member of the Household</p> <p>You must complete Form I-600A/Form I-600, Supplement 1, for each adult member of your household 18 years of age or older. Note you do not need to complete one for yourself or your spouse (if married).</p> <p>Provide the following information about the Adult Member of the Household:</p> <p>1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p> <p>2. Other Names You Have Used (including maiden name, nicknames, and aliases, if any)</p> <p>Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p>	<p>[Page 1]</p> <p>START HERE - Type or print in black ink. You, the applicant or petitioner, must complete Form I-600A/Form I-600, Supplement 1, for EACH adult member of your household 18 years of age or older. Do not complete this separate Supplement 1 for yourself or your spouse (if married).</p> <p>Part 1. Information About an Adult Member of the Household</p> <p>[deleted]</p> <p>Provide the following information about the Adult Member of the Household.</p> <p>1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p> <p>2. Other Names Used by the Adult Member of the Household (if any)</p> <p>Provide all other names the adult member of the household has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 7. Additional Information.</p> <p>Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p>

	<p>3. U.S. Mailing Address (if any) In Care Of Name Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>4. Is your current U.S. mailing address the same as your U.S. physical address? Yes/No</p> <p>If you answered "No" to Item Number 4., provide your U.S. physical address in Item Number 5. or your address abroad in Item Number 6., as appropriate.</p> <p>5. U.S. Physical Address (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>6. Address Abroad (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State Province Postal Code Country</p> <p>7. Date of Birth (mm/dd/yyyy)</p> <p>8. City/Town/Village of Birth</p> <p>[Page 2]</p> <p>9. State or Province of Birth</p> <p>10. Country of Birth</p> <p>11. Alien Registration Number (A-Number) (if any)</p>	<p>Adult Member of the Household's Contact Information</p> <p>3. U.S. Mailing Address (if any) In Care Of Name (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>4. Is the current U.S. mailing address the same as the adult member of the household's U.S. physical address? Yes/No</p> <p>If you answered "No," provide the U.S. physical address in Item Number 5. or an address abroad in Item Number 6., as appropriate.</p> <p>5. U.S. Physical Address (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code</p> <p>6. Address Abroad (if any) Street Number and Name Apt. Ste. Flr. Number City or Town State Province Postal Code Country</p> <p>[Page 2]</p> <p>7. Daytime Telephone Number</p> <p>8. Mobile Telephone Number (if any)</p> <p>9. Email Address (if any)</p> <p>Adult Member of the Household's Biographical Information</p> <p>10. Date of Birth (mm/dd/yyyy)</p> <p>11. City/Town/Village of Birth</p> <p>12. State or Province of Birth</p> <p>13. Country of Birth</p> <p>14. Alien Registration Number (A-Number) (if any)</p>
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	<p><i>Duty of Disclosure</i></p> <p>You must answer each of the following questions. See the Duty of Disclosure section in the Form I-600A or Form I-600 instructions, concerning your ongoing duty to disclose information in response to these questions. If you answer "Yes" to any of these questions, provide a certified copy of the documentation showing the final disposition of each incident which resulted in arrest, indictment, conviction, and/or any other judicial or administrative action and a written statement giving details, including any mitigating circumstances about each arrest, signed by the adult member of the household under penalty of perjury under U.S. law. The written statement must show the date of each incident; place incident occurred (city/town, state/province, country); name of police department or other law enforcement administration or other entity involved; date of incarceration and name of facility, if applicable. Provide a description of any type of counseling, rehabilitation, or other information that you and the adult member of the household would like considered in light of this history on 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.</p> <p>12. Has the adult member of the household EVER, whether in or outside the United States:</p> <p>A. Been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations, but including driving or operating a vehicle while intoxicated or while impaired by</p>	<p>15. USCIS Online Account Number (if any)</p> <p><i>Duty of Disclosure</i></p> <p>You, the applicant or petitioner, must answer each of the following questions. See the Duty of Disclosure section in the Form I-600A or Form I-600 Instructions concerning your ongoing duty to disclose information in response to these questions. If you answer "Yes" to any of these questions, provide a certified copy of the documentation showing the final disposition of each incident which resulted in arrest, indictment, conviction, and/or any other judicial or administrative action and a written statement giving details, including any mitigating circumstances about each arrest. The written statement must be signed by the adult member of the household under penalty of perjury under U.S. law. The statement should include the following:</p> <p>16. If signed outside the United States: "I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that this statement is true and correct."</p> <p>Executed On (mm/dd/yyyy) Signature</p> <p>17. If signed within the United States (including territories, possessions, and commonwealths): "I declare (or certify, verify, or state) under penalty of perjury that this statement is true and correct. Executed on (date in mm/dd/yyyy format). (Signature)."</p> <p>The written statement must also show the date of each incident; place the incident occurred (city/town, state/province, country); name of the police department or other law enforcement administration or other entity involved; date of incarceration and name of facility, if applicable; and include your (the applicant's/petitioner's) name and A-Number (if any) at the top of each sheet. In your written statement, you should also provide a description of any type of counseling, rehabilitation, or other information that you and the adult member of the household would like considered in light of this history.</p> <p>18. Has the adult member of the household EVER, whether in or outside the United States:</p> <p>A. Been investigated, arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance? (Answer "Yes" even if the record of the arrest, conviction, or other adverse criminal history</p>
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	<p>1.B. If applicable, select the box for Item Number 2.</p> <p>1.A. I can read and understand English, and have read and understand every question and instruction on this supplement, as well as my answer to every question.</p> <p>1.B. The interpreter named in Part 6. has read to me every question and instruction on this supplement, as well as my answer to every question, in [Fillable field], a language in which I am fluent. I understand every question and instruction on this supplement as translated to me by my interpreter, and have provided complete, true, and correct responses.</p> <p>2. I have requested the services of and consented to [Fillable field], who is/is not an attorney or accredited representative, preparing this supplement for me.</p> <p><i>Adult Member of the Household's Contact Information</i></p> <p>3. Adult Member of the Household's Daytime Telephone Number</p> <p>4. Adult Member of the Household's Mobile Telephone Number (if any)</p> <p>5. Adult Member of the Household's Email Address (if any)</p> <p><i>Adult Member of the Household's Certification</i></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 to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine the suitability and eligibility of the applicant or petitioner as an adoptive parent.</p> <p>I furthermore authorize release of information contained in this supplement, 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>1. Adult Member of the Household's Statement Regarding the Interpreter (Select the box for either Item A. or B.)</p> <p>A. I can read and understand English, and I have read and understand every question and instruction on this supplement and my answer to every question.</p> <p>B. The interpreter named in Part 5. has read to me every question and instruction on this supplement and my answer to every question in [Fillable field], a language in which I am fluent, and I understood everything.</p> <p>2. Adult Member of the Household's Statement Regarding the Preparer (if applicable)</p> <p>At my request, the preparer named in Part 6., [Fillable field], prepared this supplement for me based only upon information I provided or authorized.</p> <p>[delete]</p> <p><i>Adult Member of the Household's Certification</i></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 to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine the suitability and eligibility of the applicant or petitioner as an adoptive parent.</p> <p>I furthermore authorize release of information contained in this supplement, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.</p>
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Page 3, Part 4. Adult Member of the Household's Duty of Disclosure	<p>[Page 3]</p> <p>Part 4. Adult Member of the Household's Duty of Disclosure</p> <p>Certification: I understand the ongoing duty to disclose information concerning any change of circumstance, as described in the Form I-600A and/or Form I-600 instructions, and I agree to notify the applicant, petitioner, and/or home study preparer and USCIS of any new information that I am required to disclose.</p> <p>Adult Member of the Household's Signature Date of Signature (mm/dd/yyyy)</p>	[combined and moved into previous Part]
Page 2, Part 2. Information About You (Applicant or Petitioner Filing Form I-600A/I-600)	<p>[Page 2]</p> <p>Part 2. Information About the Applicant or Petitioner Filing Form I-600A/I-600</p> <p>1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p> <p>2. Date of Birth (mm/dd/yyyy)</p> <p>3. City/Town/Village of Birth</p> <p>4. State or Province of Birth</p> <p>5. Country of Birth</p> <p>6. Alien Registration Number (A-Number) (if any)</p>	<p>[Page 4]</p> <p>Part 3. Information About You, the Applicant/Petitioner</p> <p>1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)</p> <p>2. Date of Birth (mm/dd/yyyy)</p> <p>3. City/Town/Village of Birth</p> <p>4. State or Province of Birth</p> <p>5. Country of Birth</p> <p>6. A-Number (if any)</p> <p>7. Daytime Telephone Number</p>

		<p>8. Mobile Telephone Number (if any)</p> <p>9. Email Address (if any)</p> <p>10. USCIS Online Account Number (if any)</p>
<p>Page 4, Part 5. Applicant's or Petitioner's Statement, Contact Information, Certification, and Signature</p>	<p>[Page 4]</p> <p>Part 5. Applicant's or Petitioner's Statement, Contact Information, Certification, and Signature</p> <p><i>Applicant's or Petitioner's Statement</i></p> <p>Select the box for either Item Number 1.A or 1.B. If applicable, select the box for Item Number 2.</p> <p>1.A. I can read and understand English, and have read and understand every question and instruction on this supplement, as well as my answer to every question.</p> <p>1.B. The interpreter named in Part 6. has read to me every question and instruction on this supplement, as well as my answer to every question, in [Fillable field], a language in which I am fluent. I understand every question and instruction on this supplement as translated to me by my interpreter, and have provided complete, true, and correct responses.</p> <p>2. I have requested the services of and consented to [Fillable field], who is/is not an attorney or accredited representative, preparing this supplement for me.</p> <p><i>Applicant's or Petitioner's Contact Information</i></p> <p>3. Applicant's or Petitioner's Daytime Telephone Number</p> <p>4. Applicant's or Petitioner's Mobile Telephone Number (if any)</p>	<p>[Page 4]</p> <p>Part 4. Applicant's/Petitioner's Statement, Certification, and Signature</p> <p>NOTE: If you or any adult member of the household knowingly and willfully falsify or conceal a material fact or submit a false document with your Form I-600A/I-600, Supplement 1, USCIS will deny your Form I-600A or Form I-600 and may deny any USCIS benefit you request.</p> <p><i>Applicant's/Petitioner's Statement</i></p> <p>[delete]</p> <p>1. Applicant's/Petitioner's Statement Regarding the Interpreter (Select the box for either Item A. or B.)</p> <p>A. I can read and understand English, and I have read and understand every question and instruction on this supplement and my answer to every question.</p> <p>B. The interpreter named in Part 5. read to me every question and instruction on this supplement and my answer to every question in [Fillable field], a language in which I am fluent, and I understood everything.</p> <p>2. Applicant's/Petitioner's Statement Regarding the Preparer (if applicable)</p> <p>At my request, the preparer named in Part 6., [Fillable field], prepared this supplement for me based only upon information I provided or authorized.</p> <p>[delete]</p>

	<p>5. Applicant's or Petitioner's Email Address (if any)</p> <p><i>Applicant's or Petitioner's Certification</i></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 to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my suitability and eligibility as an adoptive parent.</p> <p>I furthermore authorize release of information contained in this supplement, in supporting documents, and in my USCIS records; to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.</p> <p>I certify under penalty of perjury, that all of the information in my supplement and any document submitted with my supplement is complete, true, and correct.</p> <p><i>Applicant's or Petitioner's Signature</i></p> <p>6. Applicant's or Petitioner's Signature Date of Signature (mm/dd/yyyy)</p>	<p>[Page 5]</p> <p><i>Applicant's/Petitioner's Certification</i></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 to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my suitability and eligibility as an adoptive parent.</p> <p>I furthermore authorize release of information contained in this supplement, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.</p> <p>I certify, under penalty of perjury, that I provided or authorized all of the information in my supplement, I understand all of the information contained in, and submitted with, my supplement, and that all of this information is complete, true, and correct.</p> <p><i>Applicant's/Petitioner's Signature</i></p> <p>3. Applicant's/Petitioner's Signature Date of Signature (mm/dd/yyyy)</p>
<p>Page 4, Part 6. Interpreter's Contact Information, Certification, and Signature</p>	<p>[Page 4]</p> <p>Part 6. Interpreter's Contact Information, Certification, and Signature</p> <p>If the adult member of the household and/or applicant or petitioner used an interpreter, the interpreter must provide the following information:</p> <p><i>Interpreter's Full Name</i></p> <p>1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)</p> <p>2. Interpreter's Business or Organization Name (if any)</p> <p>[Page 5]</p> <p><i>Interpreter's Mailing Address</i></p> <p>3. Street Number and Name Apt. Ste. Flr.</p>	<p>[Page 5]</p> <p>Part 5. Interpreter's Contact Information, Certification, and Signature</p> <p>If the adult member of the household and/or applicant/petitioner used an interpreter to read and complete this supplement, provide the following information about the interpreter.</p> <p><i>Interpreter's Full Name</i></p> <p>1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)</p> <p>2. Interpreter's Business or Organization Name (if any)</p> <p><i>Interpreter's Mailing Address</i></p> <p>3. Street Number and Name Apt. Ste. Flr.</p>

	<p>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].</p> <p>I have read to this adult member of the household and/or applicant or petitioner every question and instruction on this supplement, as well as the answer to every question, in the language in which he and/or she is fluent; and</p> <p>The adult member of the household and/or applicant or petitioner has informed me that he and/or she understands every instruction and question on the supplement, as well as the answer to every question, and the adult member of the household and/or applicant or petitioner verified the accuracy of every answer.</p> <p><i>Interpreter's Signature</i></p> <p>6. Interpreter's Signature Date of Signature (mm/dd/yyyy)</p>	<p>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 5. Interpreter's Mobile Telephone Number (if any) 6. Interpreter's Email Address (if any)</p> <p>[Page 6]</p> <p><i>Interpreter's Certification</i></p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and [Fillable field], which is the same language specified in Parts 2. and 4., Item B. in Item Number 1., and I have read to this adult member of the household and/or applicant/petitioner in the identified language every question and instruction on this supplement and his or her answer to every question. The adult member of the household and applicant/petitioner informed me that he or she understands every instruction, question, and answer on the supplement, including the Adult Member of the Household's Certification and the Applicant's/Petitioner's Certification, and has verified the accuracy of every answer.</p> <p><i>Interpreter's Signature</i></p> <p>7. Interpreter's Signature Date of Signature (mm/dd/yyyy)</p>
<p>Page 5, Part 7. Name, Contact Information, Statement, Certification, and Signature of the Person Preparing this Supplement, If Other Than the Adult Member of the Household</p>	<p>[Page 5]</p> <p>Part 7. Name, Contact Information, Statement, Certification, and Signature of the Person Preparing this Supplement, If Other Than the Adult Member of the Household</p> <p>If the adult member of the household and/or applicant or petitioner used a preparer to complete this supplement, the preparer must provide the following information.</p> <p><i>Preparer's Full Name</i></p> <p>1. Preparer's Family Name (Last Name) Preparer's Given Name (First Name)</p>	<p>[Page 6]</p> <p>Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Supplement, If Other Than the Applicant/Petitioner or Adult Member of the Household</p> <p>If you, the applicant/petitioner or adult member of the household used a preparer to complete this supplement, provide the following information about the preparer.</p> <p><i>Preparer's Full Name</i></p> <p>1. Preparer's Family Name (Last Name) Preparer's Given Name (First Name)</p>

	<p>2. Preparer's Business or Organization Name (if any)</p> <p>[Page 6]</p> <p><i>Preparer's Mailing Address</i></p> <p>3. Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country</p> <p><i>Preparer's Contact Information</i></p> <p>4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number (if any) 6. Preparer's Email Address (if any)</p> <p><i>Preparer's Statement</i></p> <p>7. A. I am not an attorney or accredited representative but have prepared this supplement on behalf of the adult member of the household and/or applicant or petitioner and with the adult member of the household's and/or applicant's or petitioner's consent.</p> <p>7.B. I am an attorney or accredited representative and my representation of the adult member of the household and/or applicant or petitioner in this case extends does not extend beyond the preparation of this supplement.</p> <p>NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this supplement, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or Form G-28I, Notice of Entry of Appearance as Attorney in Matters Outside the Geographical Confines of the United States, with this supplement.</p> <p><i>Preparer's Certification</i></p> <p>By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this supplement on behalf of, at the request of, and with the express consent of the adult member of the household and/or applicant or petitioner. I</p>	<p>2. Preparer's Business or Organization Name (if any)</p> <p><i>Preparer's Mailing Address</i></p> <p>3. Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code Province Postal Code Country</p> <p><i>Preparer's Contact Information</i></p> <p>4. Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any) 6. Preparer's Email Address (if any)</p> <p>[Page 7]</p> <p><i>Preparer's Statement</i></p> <p>7. A. I am not an attorney or accredited representative but have prepared this supplement on behalf of the adult member of the household and/or applicant/petitioner and with the adult member of the household's and/or applicant's/petitioner's consent.</p> <p>B. I am an attorney or accredited representative and my representation of the adult member of the household and/or applicant/petitioner in this case extends/does not extend beyond the preparation of this supplement.</p> <p>[delete]</p> <p><i>Preparer's Certification</i></p> <p>By my signature, I certify, under penalty of perjury, that I prepared this supplement at the request of the applicant/petitioner and/or adult member of the household. The applicant/petitioner and adult member of the</p>
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	<p>completed this supplement based only on responses the adult member of the household and/or applicant or petitioner provided to me. After completing the supplement, I reviewed it and all of the adult member of the household's and/or applicant's or petitioner's responses with the adult member of the household and/or applicant or petitioner, who agreed with every answer on the supplement. If the adult member of the household supplied additional information concerning a question on the supplement, I recorded it on the supplement.</p> <p><i>Preparer's Signature</i></p> <p>8. Preparer's Signature Date of Signature (mm/dd/yyyy)</p>	<p>household then reviewed this completed supplement and informed me that he or she understands all of the information contained in, and submitted with, this supplement, including the Adult Member of the Household's Certification and the Applicant's/Petitioner's Certification, and that all of this information is complete, true, and correct. I completed this supplement based only on information that the applicant/petitioner and/or adult member of the household provided to me or authorized me to obtain or use.</p> <p><i>Preparer's Signature</i></p> <p>8. Preparer's Signature Date of Signature (mm/dd/yyyy)</p>
New		<p>[Page 8]</p> <p>Part 7. Additional Information</p> <p>If you need extra space to provide any additional information within this supplement, 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 supplement or attach a separate sheet of paper. If you attach a separate sheet of paper, type or print your full 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) Given Name (First Name) Middle Name</p> <p>2. A-Number (if any)</p> <p>3. A. Page Number B. Part Number C. Item Number D. [Fillable field]</p> <p>4. A. Page Number B. Part Number C. Item Number D. [Fillable field]</p> <p>5. A. Page Number B. Part Number C. Item Number D. [Fillable field]</p> <p>6. A. Page Number B. Part Number C. Item Number D. [Fillable field]</p>

<p>Page 7, USCIS Privacy Act Statement</p>	<p>[Page 7]</p> <p>USCIS Privacy Act Statement</p> <p>AUTHORITY: The information requested on this application, petition, and/or supplement, and the associated evidence, is collected under Section 101(b)(1)(F) of the Immigration and Nationality Act (INA) [8 USC 1101], 8 CFR 204.3, and 8 CFR 204.311.</p> <p>PURPOSE: The purpose of Supplement 1 is to collect information on any adult members of the household.</p> <p>This Supplement must be completed for any individual, other than you and your spouse (if married), who has the same principal residence as you and is 18 years of age or older on or before the date that Form I-600A or Form I-600 is filed. Residence is defined as the place of general abode or a person's principal, actual dwelling place in fact, without regard to intent. USCIS reserves the right to request information on any household member who has not yet reached his or her 18th birthday before the date when Form I-600A or Form I-600 is filed, or who does not actually live at the same residence, but whose presence in the residence is relevant to the issue of your and your spouse's suitability to adopt.</p> <p>DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of your application or petition.</p> <p>ROUTINE USES: DHS may share the information you provide on this supplement with other Federal, state, local, and foreign government agencies and authorized organizations following approved routine uses described in the associated published system of records notices [DHS-USCIS-005– Inter-Country Adoptions Security and DHS-USCIS-001 - Alien File, Index, and National File Tracking System of Records] which you can find at www.dhs.gov/privacy. The information may also be shared, as appropriate, for law enforcement purposes or in the interest of national security.</p>	<p>[Page 9]</p> <p>DHS Privacy Notice</p> <p>AUTHORITIES: The information requested on this supplement, and the associated evidence, is collected under the Immigration and Nationality Act sections 101(b)(1)(F), 201, and 204, and 8 CFR sections 204.3, 204.301, and 204.311.</p> <p>PURPOSE: This supplement must be completed for every adult member of the household, other than the applicant/petitioner and spouse (if married). USCIS may request submission of this supplemental form for additional individuals. The purpose of this supplement is to collect information on any individual who has the same residence as the applicant/petitioner and is 18 years of age or older on or before the date the applicant/petitioner files Form I-600A or Form I-600, any household member who has not yet turned 18 years of age before the applicant/petitioner files Form I-600A or Form I-600, and any individual who does not actually live at the same residence as the applicant/petitioner, but whose presence USCIS deems relevant to determine the applicant/petitioner’s suitability to adopt. USCIS will determine suitability by conducting background and security checks on adult household members to assist in assessing the suitability of the applicant/petitioner.</p> <p>DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of the underlying adoption-related application and/or petition.</p> <p>ROUTINE USES: The Department of Homeland Security (DHS) may share the information you provide on this supplement 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-005– Inter-Country Adoptions Security] and the published privacy impact assessments [DHS/USCIS/PIA-007(b) Domestically Filed Intercountry Adoptions Applications and Petitions and DHS/USCIS/PIA-051 Case and Activity Management for International Operations] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law</p>
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		<p>enforcement purposes or in the interest of national security.</p> <p>PRIVACY ACT WAIVER: Except as permitted by the Privacy Act, 5 USC 552a, applicable routine uses, and information related to adult members of your household as noted below, USCIS may not disclose or give access to any information or record relating to any applicant/petitioner, spouse (if married), or adult member of your household to any individual or entity other than that person, including but not limited to an accredited agency, approved person, exempted provider, supervised provider, or other adoption service provider, unless you give written consent.</p> <p>If you want to give consent for USCIS to disclose information about your case to an individual or entity, you must complete Form I-600A/I-600, Supplement 2, Consent to Disclose Information. You are not required to give this consent to file Form I-600.</p> <p>NOTICE TO ADULT MEMBERS OF THE HOUSEHOLD: You are not the prospective adoptive parent who is filing Form I-600A application or Form I-600 petition. As an adult member of the prospective adoptive parent's household, however, information about you may be relevant to the adjudication of the prospective adoptive parent's Form I-600A or Form I-600. Under 8 CFR 103.2(b)(16), the prospective adoptive parent is entitled to review any information that may be used to deny a Form I-600A or Form I-600. By signing the Form I-600A/Form I-600, Supplement 1, you consent to USCIS disclosing to the prospective adoptive parents, adoption service provider, home study preparer, if applicable, and any individual or entity identified by the prospective adoptive parent, if applicable, information that USCIS may obtain about you that is relevant to the adjudication of the prospective adoptive parent's Form I-600 or Form I-600A, even if the Privacy Act, 5 USC 552a, might otherwise prevent disclosure of the information to the prospective adoptive parents.</p>
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