

# USCIS e-Request Tool Screen Shots



## Case Inquiry



Case outside  
normal  
processing time

*Think a case is taking  
longer than expected?*



Did not receive  
notice

*Think a notice  
is lost or missing?*



Did not receive  
card  
by mail

*Think a card  
is lost or missing?*



Did not receive  
document  
by mail

*Think a document  
is lost or missing?*

## Service Request



Disability  
Accommodations

*Request an  
accommodation*



Typographic  
Error

*Request a correction*

[View all USCIS Self Service Online Tools](#)

Case Inquiry:  
Case Outside Normal Processing Time



Case outside  
normal  
processing time  
*Think a case is taking  
longer than expected?*

## Outside Normal Processing Time

Do you have a case pending with USCIS that is outside the normal processing time? You can get an idea of how long it will take to process your case on our website at [Check Processing Times](#). For most forms, you can send us an inquiry if your case has been pending longer than the processing time posted.

If your application or petition type is not listed in the processing timetable displayed in **Check Processing Times**, please wait 6 months before submitting an inquiry. Our goal is to take action or make a decision on your application within 6 months of filing.

*NOTE: We are actively processing your case if, in the past 60 days, you:*

- >Received a notice from us about your case,
- >Responded to a request for evidence, OR
- >Received an online update to your case status.

### Processing Times for Certain Categories:

> **H-2A Agricultural Worker Petitions** – If you are a petitioner or attorney of record for an [H-2A Temporary Agricultural Worker](#), your Form I-129 has been pending longer than 15 days, **and** you have not received a decision or a Request for Evidence, you may contact USCIS at 800-375-5283 to inquire about your petition.

> **DACA Renewals** – If you are a DACA renewal applicant, please contact USCIS at (1-800) 375-5283 to inquire when your case has been pending longer than 105 days.

> **Rosario and CASA/ASAP class members** – If you are a member of the class action *Rosario v. USCIS*, Case No. c15-0813JLR (W.D. Wash. July 26, 2018) **AND** you are a member of either CASA de Maryland (CASA) or the Asylum Seeker Advocacy Project (ASAP) and are entitled to limited relief under the injunction in *CASA de Maryland Inc. et al. v. Chad Wolf et al.*, 8:20-cv-02118-PX (D. Md. Sept. 11, 2020), please see the [www.uscis.gov/rosario](http://www.uscis.gov/rosario) webpage for further information about the *Rosario* class action and how to determine the status of your employment application.

### What you'll need

- > Receipt Number
- > A-Number (if applicable)
- > Date when filed
- > Application or Petition filed
- > Email Address

## Case Information

Form Number

- Select One ▼

Form Sub Type

- Select One ▼

Receipt Number ?

Date Filed (MM/DD/YYYY) ?

Help messages for Receipt Number and Date Filed are the same across all Case Inquiry and Service Request types.



### Receipt Number Help



The receipt number is a unique 13-character identifier that USCIS provides for each application or petition it receives. The agency uses it to identify and track its cases. The receipt number consists of three letters-for example, EAC, WAC, LIN, SRC, NBC, MSC or IOE-and 10 numbers. You can find it on notices of action USCIS has sent you. Omit dashes ("-") when entering a receipt number. However, you can include all other characters, including asterisks ("\*"), if they are listed on your notice as part of the receipt number.

Ok



### Date Filed Help



The "Date Filed" refers to the date when your application or petition was properly filed and accepted by USCIS. For example, if you only know the date filed was during the month of May in 2020, enter 05/01/2020; if you only know that the date filed was during the year 2020, enter 01/01/2020.

Ok

### Applicant or Petitioner Information

First Name

Middle Name(optional)

Last Name

☐ No First Name

Please check if you do not have a first name

Date of Birth (MM/DD/YYYY)

A-Number(optional) ?

A-

☐ Member of the U.S. Military, or recently discharged from service, or spouse of a member of the U.S. Military

Help message for A-Number is the same across all Case Inquiry and Service Request types.



#### A-Number Help

The A-number is assigned to noncitizens at the time their A-file is created by USCIS, ICE, or CBP. It is an "A" followed by a unique set of seven, eight or nine digits. For example: A12 345 678 or A200 345 678. The A-number for an individual will not change. An A-Number may be referred to interchangeably as a "USCIS number," "alien registration number," or "alien number."

Ok

### Mailing Address

In Care of Name (if any)

Street Number and Name

Apartment/Floor/Suite(optional)

Unit Number(optional)

City

State

ZIP Code

### Last Action Taken on Case

Based on the processing time table, you believe the case to be outside normal processing times. Please provide details of the last action that you received on your case in the space below. ?

#### Last Action Help

Be sure to note the last communication or notice or email you received from USCIS (for example, "I did not receive an appointment notice, but I did receive a receipt notice.").

Ok

An email address is required in order to receive a response from USCIS and a confirmation of the request

Email Address (example@example.com)

### Filed By

This form is completed by the

- Select One

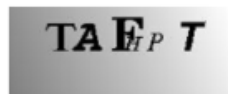
My First Name

My Last Name

Firm or Organization Name

### Security Check

Enter the letters shown below into the box. The letters are not case sensitive.  
Can't read the letters? Click the **Refresh Image** Button for new letters or try the **Audio** button.



Audio

Refresh Image

SUBMIT

### Filed By

This form is completed by the

- Select One

- Select One

Applicant or Petitioner  
Attorney/Accredited Representative  
Parent or Legal Guardian

ume

### Filed By

This form is completed by the

Applicant or Petitioner

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Parent or Legal Guardian

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Attorney or Accredited Representative

My First Name

My Last Name

Firm or Organization Name



## DHS Privacy Notice

**AUTHORITIES:** The information requested on this form, and the associated evidence, is collected under the Immigration and Nationality Act sections 101, 103, 221, and 245, and section 504 of the Rehabilitation Act of 1973, 29 U.S.C. section 794.

**PURPOSE:** The primary purpose for providing the requested information on this form is to respond to your request for assistance with an immigration benefit application, petition, or document.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay or prevent USCIS from responding to your inquiry.

**ROUTINE USES:** DHS may, where allowable under relevant confidentiality provisions, share the information you provide on this form 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/ICE/CBP-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-019 and DHS/USCIS/PIA-019(b) Customer Relationship Interface System (CRIS), which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

Case Inquiry:  
Did not receive notice



Did not receive  
notice

*Think a notice  
is lost or missing?*

## Non-Delivery of Notice

While your case is pending with USCIS, we may notify you through the mail and/or through your online account that certain actions have taken place on your case.

You may receive a notice that is a Request for Evidence (RFE), Request for Additional Information (RFI), or Request for an Original (RFO). USCIS also may notify you about your scheduled Application Support Center (ASC) appointment for biometric services or for your interview. Finally, you may receive a notice that a final decision has been issued on your case.

Before submitting any inquiry about a notice that you believe may have been issued on your case, but that you have not yet received, first check your case status using the [Case Status Online](#) tool to determine if USCIS has issued you a notice. If USCIS issued a notice and you have not received it or it does not appear in your online account, then you may submit an inquiry.

**NOTE:** You should receive a receipt notice within 30 days after filing an application or petition at a Service Center or Lockbox.

**NOTE:** Please do not submit an inquiry on a recently filed application or petition until after at least 60 days.

### What you'll need

- > Receipt Number
- > A-Number (if applicable)
- > Date when filed
- > Application or Petition filed
- > Item not received
- > Email Address

### Case Information

Form Number

- Select One ▼

Form Sub Type

- Select One ▼

Receipt Number ?

Date Filed (MM/DD/YYYY) ?

### Applicant or Petitioner Information

First Name

Middle Name(optional)

Last Name

☐ No First Name

Please check if you do not have a first name

Date of Birth (MM/DD/YYYY)

A-Number(optional) [?](#)

A-

☐ Member of the U.S. Military, or recently discharged from service, or spouse of a member of the U.S. Military

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### Mailing Address

In Care of Name (if any)

Street Number and Name

Apartment/Floor/Suite(optional)

- Select One ▼

Unit Number(optional)

City

State

- Select One ▼

ZIP Code

AILA Doc. No. 22012703. (Posted 1/27/22)

## Notice Type

What notice was not received?



- Select One



Provide Last Action on Your Case




## Notice Type

What notice was not received?



- Select One



- Select One

Appointment  
Approval  
Asylum Referral  
Denial  
Request for Evidence  
Other



### Notice Type Help



**Appointment** – You may receive a notice directing you to go to a USCIS office to complete certain procedures. Examples of appointment notices that you may receive from USCIS include: Biometrics/Fingerprint Appointment, Interview Appointment, Naturalization/Citizenship Oath Ceremony, and InfoMod Office Appointment.

**Approval** – USCIS will issue a notice if your application, petition, or request for an immigration benefit is approved.

**Asylum Referral** - USCIS will issue a notice if your asylum application is referred to an immigration judge for a final decision.

**Denial** – USCIS will issue a notice if your application, petition, or request for an immigration benefit is denied.

**Request for Evidence (RFE)** – When USCIS requires initial or additional supporting evidence to decide your case, we will send you a notice asking you to submit evidence within a specific period of time (or, in certain instances, to bring original documents with you to an interview). Generally, USCIS will not grant additional time to respond to an RFE and your case may be considered abandoned or denied if you do not submit the requested evidence within the specified period of time. Please keep in mind that you must respond to the RFE and submit the requested documents and/or information **before** the deadline.

**Other** – Any other type of notice sent.

Ok



### Last Action Help



Be sure to note which notice you did not receive and the last communication or notice or email you received from USCIS. For example, “I did not receive an appointment notice, but I did receive a receipt notice.”

Ok

An email address is required in order to receive a response from USCIS and a confirmation of the request

Email Address (example@example.com)

### Filed By

This form is completed by the

- Select One

My First Name

My Last Name

Firm or Organization Name

### Security Check

Enter the letters shown below into the box. The letters are not case sensitive.  
Can't read the letters? Click the **Refresh Image** Button for new letters or try the **Audio** button.



Audio

Refresh Image

SUBMIT

### Filed By

This form is completed by the

- Select One

- Select One

Applicant or Petitioner  
Attorney/Accredited Representative  
Parent or Legal Guardian

ume

### Filed By

This form is completed by the

Applicant or Petitioner

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Parent or Legal Guardian

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Attorney or Accredited Representative

My First Name

My Last Name

Firm or Organization Name

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**PURPOSE:** The primary purpose for providing the requested information on this form is to respond to your request for assistance with an immigration benefit application, petition, or document.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay or prevent USCIS from responding to your inquiry.

**ROUTINE USES:** DHS may, where allowable under relevant confidentiality provisions, share the information you provide on this form 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/ICE/CBP-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-019 and DHS/USCIS/PIA-019(b) Customer Relationship Interface System (CRIS), which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

Case Inquiry:  
Did not receive card by mail



Did not receive  
card  
by mail

*Think a card  
is lost or missing?*



## Non-Delivery of Card

For certain types of immigration benefits USCIS will issue a card as proof of the benefit or legal status. Examples of cards USCIS may issue include an Employment Authorization Card (EAD) or a Permanent Resident Card (also known informally as a “Green Card”). If a card is lost, stolen, or mutilated, an individual can apply to USCIS for a replacement card. Also, if a card has a specific expiration date, the individual may need to apply to USCIS for renewal and to receive a new card. Once USCIS approves an immigration benefit for which a card is issued, USCIS will mail the card to your address of record. If you do not receive a card that was mailed to your address of record, you may submit an inquiry.

**NOTE:** Please do not submit an inquiry about a card associated with a recently approved application until at least 90 days after you receive the approval notice.

**NOTE:** You can check the status of your case using the [Case Status Online](#) tool. If the case status online indicates that a card was mailed to your address of record, you should receive a United States Postal Service tracking number. Use this number to track your card through the [U.S. Postal Service package delivery system](#) to determine when your card will be delivered.

### What you'll need

- > Receipt Number
- > A-Number (if applicable)
- > Date when filed
- > Application or Petition filed
- > Item not received
- > Email Address

### Case Information

Form Number

- Select One ▼

Form Sub Type

- Select One ▼

Receipt Number ?

Date Filed (MM/DD/YYYY) ?

Did Not Receive Card By Mail

### Applicant or Petitioner Information

First Name

Middle Name(optional)

Last Name

☐ No First Name

Please check if you do not have a first name

Date of Birth (MM/DD/YYYY)

A-Number(optional) [?](#)

A-

☐ Member of the U.S. Military, or recently discharged from service, or spouse of a member of the U.S. Military

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### Mailing Address

In Care of Name (if any)

Street Number and Name

Apartment/Floor/Suite(optional)

- Select One ▼

Unit Number(optional)

City

State

- Select One ▼

ZIP Code

AILA Doc. No. 22012703. (Posted 1/27/22)

## Card Type

What card was not received? ?

- Select One

Provide Last Action on Your Case ?

## Card Type

What card was not received? ?

- Select One

- Select One

Permanent Resident Card

Employment Authorization Document

Employment Authorization/Advance Parole Combo Card

### Card Type Help

**Permanent Resident Card** – A card issued by USCIS to individuals who have been granted permanent residence through adjustment of status or who entered the United States as lawful permanent residents after lawful admission pursuant to an immigration visa. The Permanent Resident Card (Form I-551 or informally known as “Green Card”) may be used as an identity document and to evidence authorization to work in the United States.

**Employment Authorization Document (EAD)** – A document issued by USCIS to individuals to authorize work in the United States (or as evidence of employment authorization pursuant to a specific nonimmigrant classification).

**Employment Authorization/Advance Parole Combo Card** – A card issued by USCIS as evidence of employment authorization and advance parole authorization.

*The grant of advance parole does not guarantee your re-admission to the United States. Your eligibility to be admitted to the United States will be determined by an inspector with U.S. Customs and Border Protection at an appropriate U.S. port of entry.*

### Last Action Help

Be sure to note which notice you did not receive and the last communication or notice or email you received from USCIS. For example, “I did not receive an appointment notice, but I did receive a receipt notice.”

Ok

Did Not Receive Card By Mail

An email address is required in order to receive a response from USCIS and a confirmation of the request

Email Address (example@example.com)

Filed By

This form is completed by the

- Select One

My First Name

My Last Name

Firm or Organization Name

Security Check

Enter the letters shown below into the box. The letters are not case sensitive.  
Can't read the letters? Click the **Refresh Image** Button for new letters or try the **Audio** button.



Audio

Refresh Image

SUBMIT

Filed By

This form is completed by the

- Select One

- Select One

Applicant or Petitioner  
Attorney/Accredited Representative  
Parent or Legal Guardian

ume

Filed By

This form is completed by the

Applicant or Petitioner

My First Name

My Last Name

Firm or Organization Name

Filed By

This form is completed by the

Parent or Legal Guardian

My First Name

My Last Name

Firm or Organization Name

Filed By

This form is completed by the

Attorney or Accredited Representative

My First Name

My Last Name

Firm or Organization Name

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**PURPOSE:** The primary purpose for providing the requested information on this form is to respond to your request for assistance with an immigration benefit application, petition, or document.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay or prevent USCIS from responding to your inquiry.

**ROUTINE USES:** DHS may, where allowable under relevant confidentiality provisions, share the information you provide on this form 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/ICE/CBP-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-019 and DHS/USCIS/PIA-019(b) Customer Relationship Interface System (CRIS), which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

Case Inquiry:  
Did not receive document by mail



Did not receive  
document  
by mail

*Think a document  
is lost or missing?*

## Non-Delivery of Document

For certain types of immigration benefits, USCIS issues certificates that reflect a person's status as a U.S. citizen as well as documents that permit an individual to travel or return to the United States from abroad. In certain instances, USCIS may send a document to you through the U.S. mail. The document will be sent to the mailing address you provided to USCIS. If your address has changed, it is important to notify USCIS of the change within 10 days so that you do not miss any important documents that may be mailed to your address of record. If you do not receive a document, you can create an inquiry with USCIS.

**NOTE:** You can check the status of your case using the [Case Status Online](#) tool. If Case Status Online indicates that your document has been mailed, please allow approximately 30 days to receive your document.

### What you'll need

- > Receipt Number
- > A-Number (if applicable)
- > Date when filed
- > Application or Petition filed
- > Document not received
- > Email Address

### Case Information

Form Number

- Select One ▼

Form Sub Type

- Select One ▼

Receipt Number ?

Date Filed (MM/DD/YYYY) ?

Applicant or Petitioner Information

First Name	Middle Name(optional)	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

☐ No First Name  
Please check if you do not have a first name

Date of Birth (MM/DD/YYYY)

A-Number(optional) [?](#)

A-

☐ Member of the U.S. Military, or recently discharged from service, or spouse of a member of the U.S. Military

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Mailing Address

In Care of Name (if any)

Street Number and Name

Apartment/Floor/Suite(optional)

- Select One ▼

Unit Number(optional)

City

State	ZIP Code
- Select One ▼	<input type="text"/>

AILA Doc. No. 22012703. (Posted 1/27/22)



## Document Type

What document was not received? ?

- Select One

Provide Last Action on Your Case ?

## Document Type

What document was not received? ?

- Select One

- Select One

Naturalization Certificate

Citizenship Certificate

Refugee Travel Document

Re-Entry Permit

Advance Parole Document

### Document Type Help

**Naturalization Certificate** – Document issued by USCIS once the person has completed all of the requirements for naturalization and has been sworn in as a U.S. citizen.

**Citizenship Certificate** – Document issued by USCIS as evidence of U.S. citizenship derived upon birth to a U.S. citizen parent outside of the United States or acquired after birth through a U.S. citizen parent(s).

**Refugee Travel Document** – Travel document issued by USCIS to a person who has been granted refugee or asylum status, or to a lawful permanent resident who obtained permanent residence as a refugee or asylee.

**Re-Entry Permit** – Document issued by USCIS that allows a lawful permanent resident or conditional resident who is otherwise admissible and who is determined not to have abandoned his or her permanent resident status to return to the United States without having to obtain a visa from a U.S. Embassy or consulate abroad.

**Advance Parole Document** – Document issued by USCIS solely to authorize the temporary parole of a person into the United States.

*The grant of advance parole does not guarantee your re-admission to the United States. Your eligibility to be admitted to the United States will be determined by an inspector with U.S. Customs and Border Protection at an appropriate U.S. port of entry.*

### Last Action Help

Be sure to note which notice you did not receive and the last communication or notice or email you received from USCIS. For example, "I did not receive an appointment notice, but I did receive a receipt notice."

Ok

Did Not Receive Document By Mail

An email address is required in order to receive a response from USCIS and a confirmation of the request

Email Address (example@example.com)

Filed By

This form is completed by the

- Select One

My First Name

My Last Name

Firm or Organization Name

Security Check

Enter the letters shown below into the box. The letters are not case sensitive.  
Can't read the letters? Click the **Refresh Image** Button for new letters or try the **Audio** button.



Audio

Refresh Image

SUBMIT

Filed By

This form is completed by the

- Select One

- Select One

Applicant or Petitioner  
Attorney/Accredited Representative  
Parent or Legal Guardian

ume

Filed By

This form is completed by the

Applicant or Petitioner

My First Name

My Last Name

Firm or Organization Name

Filed By

This form is completed by the

Parent or Legal Guardian

My First Name

My Last Name

Firm or Organization Name

Filed By

This form is completed by the

Attorney or Accredited Representative

My First Name

My Last Name

Firm or Organization Name

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Service Request:  
Disability Accommodations



Disability  
Accommodations

*Request an  
accommodation*

## Disability Accommodation Requests for the Public

If you need a disability accommodation, make your request

Examples of disability accommodations are:

- *Naturalization study materials in braille*
- *In-hospital appointment because of a serious medical condition*

For more information about USCIS disability accommodations, visit [uscis.gov/accommodationsinfo](https://uscis.gov/accommodationsinfo)

## Do Not Make a Disability Accommodation Request If...

- Do not make a request for accommodation here if you do not have a disability or medical condition.
- Do not make a request for accommodation if you are a naturalization applicant seeking a medical exception from the English and/or civics testing requirements. You must make your request by completing the Form N-648, Medical Certification for Disability Exceptions.
- Do not make a request if your only question is whether a particular building is wheelchair-accessible. All USCIS facilities are wheelchair-accessible. You do not need to make a request unless you have other needs.

### What you need

- Receipt Number or A-Number
- Appointment Notice (if your accommodation request is for an appointment)
- Email Address
- Phone Number

If you need an accommodation but you do not have a receipt number or A-number, call the USCIS Contact Center at 800-375-5283 (TTY 800-767-1833).

### Case Information

Form Number

- Select One ▼

Form Sub Type

- Select One ▼

Receipt Number ?

Date Filed (MM/DD/YYYY) ?

---

### Applicant or Petitioner Information

First Name

Middle Name(optional)

Last Name

☐ No First Name

Please check if you do not have a first name

Date of Birth (MM/DD/YYYY)

A-Number(optional) ?

A-

☐ Member of the U.S. Military, or recently discharged from service, or spouse of a member of the U.S. Military

### Contact Information

In Case Of Name (if any)

Street Number and Name

Apartment/Floor/Suite(optional)

- Select One ▼

Unit Number(optional)

City

State

- Select One ▼

ZIP Code

Phone Number (required)

An email address is required in order to receive a response from USCIS and a confirmation of the request

Email Address (example@example.com)

## Disability Accommodations

### Disability Accommodations

Disability Type



- Select One



If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☐ Yes ☐ No

Date of Appointment



Time of Appointment

Location of Appointment

If you need a sign language interpreter, check here. ☐

If you need braille, check here. ☐

If you need large print, check here. ☐

If you need your USCIS appointment to take place in the hospital, other healthcare facility, or your home, due to a serious medical condition that prevents you from attending your appointment at USCIS facilities, check here. ☐

If you need an accommodation for a disability or medical condition that is not listed above, check here. ☐

### Accommodations

Disability Type



- Select One



- Select One

Deaf, Hard of Hearing

Mobility, Dexterity

Blind, Low Vision

Speech Disability

Other Disability

eking and a brief reason for the



## Disability Accommodations

Disability Type



- Select One



If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☐ Yes ☐ No

Date of Appointment



Time of Appointment

Location of Appointment

If you need a sign language interpreter, check here. ☐

If you need braille, check here. ☐

If you need large print, check here. ☐

If you need your USCIS appointment to take place in the hospital, home, due to a serious medical condition that prevents you from a USCIS facilities, check here. ☐

If you need an accommodation for a disability or medical condition that prevents you from attending an appointment, check here. ☐

If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☒ Yes ☐ No

Type of Appointment

- Select One



If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☒ Yes ☐ No

Type of Appointment

- Select One



- Select One  
Biometrics  
Interview  
Oath Ceremony  
InfoMod  
Other



## Disability Accommodations

### Disability Accommodations

Disability Type



- Select One



If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☐ Yes ☐ No

Date of Appointment



Time of Appointment

Location of Appointment

If you need a sign language interpreter, check here. ☐

If you need braille, check here. ☐

If you need large print, check here. ☐

If you need your USCIS appointment to take place in the hospital, other healthcare facility, or your home, due to a serious medical condition that prevents you from attending your appointment at USCIS facilities, check here. ☐

If you need an accommodation for a disability or medical condition that is not listed above, check here. ☐

If you need a sign language interpreter, check here. ☒

What type of sign language interpreter do you need?

- Select One



If you need a sign language interpreter, check here. ☒

What type of sign language interpreter do you need?

- Select One



- Select One

American Sign Language

American Sign Language and Deaf Interpreter

Other Sign Language [please specify]

Disability Accommodations

Disability Accommodations

Disability Type ?  
- Select One

If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☐ Yes ☐ No

Date of Appointment ?

Time of Appointment

Location of Appointment

If you need a sign language interpreter, check here. ☐

If you need braille, check here. ☐

If you need large print, check here. ☐

If you need your USCIS appointment to take place in the hospital, other healthcare facility, or your home, due to a serious medical condition that prevents you from attending your appointment at USCIS facilities, check here. ☐

If you need an accommodation for a disability or medical condition that is not listed above, check here.  
☐

If you need braille, check here. ☒

What type of braille do you need?  
- Select One

What do you need in braille? For example, provide the title of the USCIS document(s) or whether you need to take the English reading test in braille.

If you need braille, check here. ☒

What type of braille do you need?  
- Select One  
- Select One  
English contracted  
English uncontracted  
Other braille [please specify]

For example, provide the  
to take the English r

## Disability Accommodations

Disability Type



- Select One



If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☐ Yes ☐ No

Date of Appointment



Time of Appointment

Location of Appointment

If you need a sign language interpreter, check here. ☐

If you need braille, check here. ☐

If you need large print, check here. ☐

If you need your USCIS appointment to take place in the hospital, other healthcare facility, or home, due to a serious medical condition that prevents you from attending your appointment at USCIS facilities, check here. ☐

If you need an accommodation for a disability or medical condition that is not listed above, check here. ☐

If you need large print, check here. ☒

Please provide your requirements, including font type and size.  
If you do not specify, we will use 20-point sans serif bold print

Please provide the title of the USCIS document(s) you want in large print.  
For example, you could say 'civics test study materials' or 'English reading test'.

## Disability Accommodations

### Disability Accommodations

Disability Type 

- Select One 

If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☐ Yes ☐ No

Date of Appointment 

Time of Appointment

Location of Appointment

If you need a sign language interpreter, check here. ☐

If you need braille, check here. ☐

If you need large print, check here. ☐

If you need your USCIS appointment to take place in the hospital, other healthcare facility, or your home, due to a serious medical condition that prevents you from attending your appointment at USCIS facilities, check here. ☐

If you need an accommodation for a disability or medical condition that is not listed above, check here. ☐

If you need your USCIS appointment to take place in the hospital, other healthcare facility, or your home, due to a serious medical condition that prevents you from attending your appointment at USCIS facilities, check here. ☒

Please provide a brief description of your medical condition.

USCIS will contact you and ask you to provide medical information and/or documentation to support your request.



## Disability Accommodations

### Disability Accommodations

Disability Type



- Select One



If you need an accommodation for a USCIS appointment, have you received an Appointment Notice from USCIS? ☐ Yes ☐ No

Date of Appointment



Time of Appointment

Location of Appointment

If you need a sign language interpreter, check here. ☐

If you need braille, check here. ☐

If you need large print, check here. ☐

If you need your USCIS appointment to take place in the hospital, other healthcare facility, or your home, due to a serious medical condition that prevents you from attending your appointment at USCIS facilities, check here. ☐

If you need an accommodation for a disability or medical condition that is not listed above, check here.

☐

If you need an accommodation for a disability or medical condition that is not listed above, check here.



What specific accommodation do you need?

What is your disability or health condition?

### Filed By

This form is completed by the

- Select One

My First Name

My Last Name

Firm or Organization Name

### Accommodation Request

☐ By selecting Submit, I certify that the person identified above has a disability or medical condition for which an accommodation is needed from USCIS.

### Security Check

Enter the letters shown below into the box. The letters are not case sensitive.  
Can't read the letters? Click the **Refresh Image** Button for new letters or try the **Audio** button.

TAEP T

Audio

Refresh Image

SUBMIT

### Filed By

This form is completed by the

- Select One

- Select One

Applicant or Petitioner  
Attorney/Accredited Representative  
Parent or Legal Guardian

ame

### Filed By

This form is completed by the

Applicant or Petitioner

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Parent or Legal Guardian

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Attorney or Accredited Representative

My First Name

My Last Name

Firm or Organization Name

## DHS Privacy Notice

**AUTHORITIES:** The information requested on this form, and the associated evidence, is collected under the Immigration and Nationality Act sections 101, 103, 221, and 245, and section 504 of the Rehabilitation Act of 1973, 29 U.S.C. section 794.

**PURPOSE:** The primary purpose for providing the requested information on this form is to respond to your request for assistance with an immigration benefit application, petition, or document.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay or prevent USCIS from responding to your inquiry.

**ROUTINE USES:** DHS may, where allowable under relevant confidentiality provisions, share the information you provide on this form 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/ICE/CBP-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-019 and DHS/USCIS/PIA-019(b) Customer Relationship Interface System (CRIS), which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.



Service Request:  
Typographic Error



Typographic  
Error  
*Make typographic  
corrections for a case*

## Typographic Error

Did you receive a notice, document, or card from USCIS that you believe contains a typographical error?

USCIS may correct an error if we determine that the information reflected on the notice, document, or card does not match the information you provided to us to establish your identity or the evidence you provided as biographic information to qualify for an immigration benefit. You may be required to submit evidence to support any request for a change or correction.

### What you'll need

- > [Receipt Number](#)
- > [A-Number \(if applicable\)](#)
- > [Item that contains the error](#)
- > [Date when filed](#)
- > [Email Address](#)

### Case Information

Form Number

- Select One ▼

Form Sub Type

- Select One ▼

Receipt Number ?

Date Filed (MM/DD/YYYY) ?

Applicant or Petitioner Information

First Name	Middle Name(optional)	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

☐ No First Name  
Please check if you do not have a first name

Date of Birth (MM/DD/YYYY)

A-Number(optional) [?](#)

A-

☐ Member of the U.S. Military, or recently discharged from service, or spouse of a member of the U.S. Military

---

Mailing Address

In Care of Name (if any)

Street Number and Name

Apartment/Floor/Suite(optional)

- Select One ▼

Unit Number(optional)

City

State	ZIP Code
<div>- Select One</div>	<input type="text"/>

## Typographic Error

### Typographic Error

What has the Typographic error ?

- Select One

Please describe the error

Please enter the correction

### Typographic Error

What has the Typographic error ?

- Select One

- Select One

Other – Provide Detail  
Advance Parole Document  
Re-Entry Permit  
Refugee Travel Document  
Naturalization Certificate  
Employment Authorization Card  
Combo Card  
Permanent Resident Card  
Notice  
Citizenship Certificate



#### Typographic Error Help

**USCIS Issued Cards** – Examples of USCIS issued cards are Permanent Resident Cards (Form I-551 or “Green Card”) and Employment Authorization Documents (EAD).

**USCIS Issued Notices** – Examples of USCIS issued notices are Requests for Evidence, Interview Notices, Appointment Notices for biometric services, Receipt Notices, Notices of Final Decision.

**USCIS Issued Documents** – Examples of USCIS issued documents are Naturalization Certificates, Citizenship Certificates, Refugee Travel Documents, Re-Entry Permits, and Advance Parole Documents.

Ok

## Typographic Error

An email address is required in order to receive a response from USCIS and a confirmation of the request

Email Address (example@example.com)

### Filed By

This form is completed by the

- Select One

My First Name

My Last Name

Firm or Organization Name

### Security Check

Enter the letters shown below into the box. The letters are not case sensitive.  
Can't read the letters? Click the **Refresh Image** Button for new letters or try the **Audio** button.



Audio

Refresh Image

SUBMIT

### Filed By

This form is completed by the

- Select One

- Select One

Applicant or Petitioner  
Attorney/Accredited Representative  
Parent or Legal Guardian

ume

### Filed By

This form is completed by the

Applicant or Petitioner

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Parent or Legal Guardian

My First Name

My Last Name

Firm or Organization Name

### Filed By

This form is completed by the

Attorney or Accredited Representative

My First Name

My Last Name

Firm or Organization Name

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