



Petition to Classify Orphan as an Immediate Relative

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

USCIS
Form I-600
OMB No. 1615-0028
Expires 02/28/2017

For USCIS Use Only		
The petitioner is: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried	The petition is: <input type="checkbox"/> Approved <input type="checkbox"/> Petitioner may adopt orphan ABROAD. <input type="checkbox"/> Orphan will come to the UNITED STATES for adoption. The preadoption requirements have been met. <input type="checkbox"/> Denied _____ _____ _____	Fee Stamp
Received Trans In Completed File Number Date of Favorable Determination	DD	Remarks District

▶ **START HERE** - Type or print legibly in black ink. Complete a separate petition for each child. *This petition is made to classify the named orphan as your immediate relative.*

Part 1. Information About You (Petitioner)

1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Courts Bari Lee

2. Other Names You Have Used (including maiden name, nicknames, and aliases, if any)

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

_____ _____ _____

3. U.S. Mailing Address (if any)

In Care Of Name

Street Number and Name Apt. Ste. Flr. Number

1139 Wellesley Avenue _____

City or Town State ZIP Code

Batavia OH 45103

4. Is your current U.S. mailing address the same as your U.S. physical address? Yes No

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.

5. U.S. Physical Address (if any)

Street Number and Name Apt. Ste. Flr. Number

_____ _____

City or Town State ZIP Code

_____ _____ _____

Part 1. Information About You (Petitioner) (continued)

6. Address Abroad (if any)

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

Province

Postal Code

Country

7. Date of Birth (mm/dd/yyyy)

8. City/Town/Village of Birth

▶ 11/12/1966

Cincinnati

9. State or Province of Birth

10. Country of Birth

Ohio

United States of America

11. Information About U.S. Citizenship

A. Are you a citizen of the United States?

Yes No

NOTE: If you answered "No," you may NOT file Form I-600. See the **What Are the Eligibility Requirements?** section of the Form I-600 instructions for more information.

B. How did you acquire your U.S. citizenship?

Birth Parents Naturalization

C. If you acquired your citizenship through your parents, have you obtained a Certificate of Citizenship in your own name?

Yes No

If "Yes," provide the following information about your Certificate of Citizenship:

Name Under Which the Certificate of Citizenship Was Issued

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Alien Registration Number (A-Number) (if any)

Certificate of Citizenship Number

▶ A-

Date of Issuance

Place of Issuance

(mm/dd/yyyy) ▶

D. If you acquired your citizenship through naturalization, provide the following information about your Certificate of Naturalization:

Name Under Which the Certificate of Naturalization Was Issued

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

A-Number (if any)

Certificate of Naturalization Number

▶ A-

Date of Naturalization

Place of Naturalization

(mm/dd/yyyy) ▶

Part 1. Information About You (Petitioner) (continued)

12. Have you, or any person through whom you claimed citizenship, **EVER** lost U.S. citizenship? Yes No

NOTE: If you answered "Yes," attach a detailed explanation on a separate sheet of paper; type or print your 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.

13. What is your marital status? Married Widowed Divorced Single

14. How many times have you been married (including your current marriage, if applicable)?

15. Date of Current Marriage (if applicable) 16. Place Where Current Marriage Occurred (if applicable)

17. Information About Your Current Spouse (if applicable)

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Other Names Your Current Spouse Has Used (including maiden name, nicknames, and aliases, if any)

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Date of Birth A-Number (if any) City/Town/Village of Birth

State or Province of Birth Country of Birth

Spouse's Immigration Status

18. How many times has your current spouse been married (including your current marriage, if applicable)?

19. Does your current spouse reside with you? Yes No

If you answered "No," provide your current spouse's physical address in **Item Number 20.**

20. Your Current Spouse's Physical Address

Street Number and Name Apt. Ste. Flr. Number

City or Town State ZIP Code

Province Postal Code Country

21. How many persons 18 years of age or older, other than your current spouse (if married), reside with you?

If you answered "1" or more, you **MUST** complete Form I-600A/I-600 Supplement 1, Listing of Adult Member of the Household, for each person.

Part 1. Information About You (Petitioner) (continued)

22. Have you ever previously filed Form I-600, Form I-600A, *Application for Advance Processing of an Orphan Petition*, Form I-800A, *Application for Determination of Suitability to Adopt a Child From a Convention Country*, or Form I-800, *Petition to Classify Convention Adoptee as an Immediate Relative*? Yes No

If "Yes," provide the following:

A. Type of Petition/Application Filed

- B. Result- Check the box that best describes the action taken by USCIS and/or U.S. Department of State on your petition and/or application.

Approved - Approval Date (mm/dd/yyyy) ▶ 06/15/2015

Denied - Denial Date (mm/dd/yyyy) ▶

NOTE: A copy of the denial notice must accompany this petition.

Other - Explain _____

- C. A detailed description of any previous Form I-600 or Form I-800 filing that resulted in a disruption prior to finalization of the adoption or that resulted in a completed adoption that was later dissolved either in the United States or abroad.

Attached I600A Form/Home Study

NOTE: If you need extra space to complete this question, attach a separate sheet of paper; type or print your A-Number (if any) at the top of each sheet; include the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.

Duty of Disclosure

You and your spouse (if married) must answer the following questions. See the **Duty of Disclosure** section in the Form I-600 instructions concerning your ongoing duty to disclose information in response to these questions. If you or your spouse answer "Yes" to any of the 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 you and/or your spouse (if married) 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 your spouse (if married) 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.

23. Have you EVER, whether in or outside the United States:

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 or under the influence of alcohol or other intoxicant, even if the record of the arrest, conviction, or other adverse criminal history was expunged, sealed, pardoned, or the subject of any other amelioration? Yes No

B. Been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action? Yes No

C. Received a suspended sentence, been placed on probation or parole, or in an alternative sentencing or rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication, or expungement of a criminal charge? Yes No

Part 1. Information About You (Petitioner) (continued)

D. At any time been the subject of any investigation by any child welfare agency, court, or other official authority in any state or foreign country concerning the abuse or neglect of any child, *other than* an investigation that has been completed and formally closed based on a finding that the allegation of abuse or neglect was unfounded or unsubstantiated? Yes No

24. Has your spouse **EVER**, whether in or outside the United States:

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 or under the influence of alcohol or other intoxicant, even if the record of the arrest, conviction, or other adverse criminal history was expunged, sealed, pardoned, or the subject of any other amelioration? Yes No

B. Been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action? Yes No

C. Received a suspended sentence, been placed on probation or parole, or in an alternative sentencing or rehabilitation program, such as diversion, deferred prosecution, deferred or withheld adjudication, or expungement of a criminal charge? Yes No

D. At any time been the subject of any investigation by any child welfare agency, court, or other official authority in any state or foreign country concerning the abuse or neglect of any child, *other than* an investigation that has been completed and formally closed based on a finding that the allegation of abuse or neglect was unfounded or unsubstantiated? Yes No

Part 2. Information About Orphan Beneficiary

1. Name at Birth

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
Mufwankolo	Exauce	

2. Current Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
Courts	Zalen	Exauce

3. Other Names the Orphan Has Used (including nicknames and aliases, if any):

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)

4. Gender

Male Female

5. Date of Birth (*mm/dd/yyyy*)

01/30/2010

6. City/Town/Village of Birth

Idiofa

7. State or Province of Birth

Bandundu

8. Country of Birth

Democratic Republic of Congo

9. The beneficiary is an orphan because (Select only one):

A. He or she has no parents due to death or disappearance of, abandonment or desertion by, or separation or loss from both parents.

B. He or she has only one sole or surviving parent who is incapable of providing proper care and who has irrevocably released the child for emigration and adoption in writing.

Part 2. Information About Orphan Beneficiary (continued)

10. If the orphan has only one sole or surviving parent, answer the following:

A. What happened to the other birth or previous parent?

B. Is the remaining parent capable of providing proper care for the orphan? Yes No

C. Has the remaining parent irrevocably released the orphan for emigration and adoption, in writing? Yes No

11. Did you and your spouse (if married) adopt the orphan abroad? Yes No

12. If you answered "Yes" to **Item Number 11.**, provide the following information:

A. Did you or your spouse (if married) personally see and observe the child before or during the adoption proceedings? Yes No

B. Date of Adoption

(mm/dd/yyyy) ▶ 08/28/2014

C. Place of Adoption

Kitwit Bandundu DRC

13. If you answered "No" to either **Item Numbers 11.** or **12A.**, provide the following information:

A. Do you and your spouse (if married) intend to adopt the orphan in the United States? Yes No

B. Have any pre-adoption requirements of the orphan's proposed state of residence been met? Yes No

C. If you answered "Yes" to **Item B.** in **Item Number 13.**, provide a written description of the pre-adoption requirements, if any, of the state of the child's proposed residence if you know that the child will be adopted in the United States. Cite any relative state statutes and regulations, and describe the steps you have taken or will take to comply with these requirements. Note and explain any pre-adoption requirements that you cannot meet at this time due to operation of state law.

We have a finalized adoption in DRC. In addition, we will complete a domestic adoption in Ohio, our state of residence.

NOTE: If you need extra space to complete this **Item Number**, attach a separate sheet of paper; type or print your A-Number (if any) at the top of each sheet; include the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

D. If you answered "No" to **Item B.** in **Item Number 13.**, will the pre-adoption requirements be met later? Yes No

14. To your knowledge:

A. Does the orphan have any special need, disability, and/or impairment? Yes No

B. If you answered "Yes" to **Item A.** in **Item Number 14.**, name or describe the special need, disability, and/or impairment.

15. Who has legal custody of the orphan?

Bari Lee Courts and Carolyn Kay Courts

Part 2. Information About Orphan Beneficiary (continued)

16. Information About the Attorney Abroad Representing You and/or Your Spouse (if married) in This Case (if any)

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
Diumasumbu	Doudou	Gabriel
Street Number and Name	Apt. Ste. Flr.	Number
2021 Nakanga Avenue	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
City or Town	State	ZIP Code
Lemba		
Province	Postal Code	Country
Kinshasa		DRC

17. Address in the United States Where the Orphan Will Reside (if any)

Street Number and Name	Apt. Ste. Flr.	Number
1139 Wellesley Avenue	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
City or Town	State	ZIP Code
Batavia	OH	45103

18. Present Address of the Orphan

In Care Of Name		
EAC Sunshine House Care Center		
Street Number and Name	Apt. Ste. Flr.	Number
3044/11 Kansangula Avenue	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
City or Town	State	ZIP Code
Macampagne		
Province	Postal Code	Country
Kinshasa		DRC

19. If the orphan resides in an institution, provide the full name of the institution.

EAC Sunshine House Care Center

20. If the orphan does not reside in an institution, provide the full name of the person with whom the orphan is residing or the name of the orphan's caretaker.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)

21. Provide any additional information necessary to locate the orphan, such as the name of a district, section, zone, or locality in which the orphan resides:

EAC Sunshine House Care Center C/O Samuel Bachunge, Mgr. Ecole le bambino: 3 eme
portail apres l'ecole le bambino

Part 2. Information About Orphan Beneficiary (continued)

22. Where do you wish to file your visa application? (Complete **one** of the options below.)

A. The USCIS office located at:

OR

B. The U.S. Embassy or U.S. Consulate located at:

U.S. Embassy Kinshasa, DRC

Part 3. Information About Your Home Study and Primary Adoption Service Provider

1. Your home study:

- A. Was previously submitted with your **approved** Form I-600A application
- B. Was previously submitted with your **pending** Form I-600A application
- C. IS attached to this Form I-600.
- D. IS **NOT** attached to this Form I-600 because of state requirements necessitating review and documentation. The appropriate state authority has indicated that it will submit the home study directly to U.S. Citizenship and Immigration Services (USCIS). (Do not submit your Form I-600 to USCIS until the state authority is ready to send your home study to USCIS.)

2. Provide the name and address of your primary adoption service provider in the United States. (A primary adoption service provider is the accredited agency or approved person who is responsible under 22 CFR Part 96.14 for ensuring the six adoption services defined in 22 CFR Part 96.2 are provided, supervising and being responsible for supervised providers where used, and developing and implementing a service plan in accordance with 22 CFR 96.44.)

A. Name of Primary Adoption Service Provider

European Adoption Consultants Inc

B. Point of Contact Within the Organization

Family Name (Last Name)

Demarest

Given Name (First Name)

Kim

C. Provider's Mailing Address

Street Number and Name

12608 Alameda Drive

Apt. Ste. Flr. Number

City or Town

Strongsville

State

OH

ZIP Code

44149

Province

Postal Code

Country

USA

D. Provider's Daytime Telephone Number

8005330098

E. Provider's Fax Number (if any)

4408461705

F. Provider's Email Address (if any)

k.demarest@eaci.com

3. The primary adoption service provider named above is one of the following:

A. An accredited agency in the United States.

Yes No

B. An approved person in the United States.

Yes No

Part 4. Accommodations for Individuals With Disabilities and/or Impairments

1. Are you requesting an accommodation because of disabilities and/or impairments? Yes No
2. If you answered "Yes" to **Item Number 1.**, select all applicable boxes below to indicate who has the disabilities and/or impairments.
 Petitioner Spouse Other Household Member
3. If you answered "Yes" to **Item Number 1.**, select all applicable boxes below. Provide information for each person with the disabilities and/or impairments.
- A. Deaf or hard of hearing and request the following accommodations (If requesting a sign-language interpreter, indicate for which language (e.g., American Sign Language)):

- B. Blind or have low vision and request the following accommodations:

- C. Another type of disability and/or impairment (Describe the nature of the disability and/or impairment and accommodation you are requesting):

Part 5. Petitioner's Statement, ASC Acknowledgement (if applicable), Certification, Signature, and Contact Information

Petitioner's Statement

Select the box for either **Item 1.A.** or **1.B.** If applicable, select the box for **Item Number 2.**

- 1.A. I can read and understand English, and have read and understand each and every question and instruction on this petition, as well as my answer to each question. I have read and understand the **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable).
- 1.B. The interpreter named in **Part 9.** has read to me each and every question and instruction on this petition, as well as my answer to each question, in _____, a language in which I am fluent. I understand each and every question and instruction on this petition as translated to me by my interpreter, and have provided complete, true, and correct responses. The interpreter named in **Part 9.** also has read the **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable) to me, in the language in which I am fluent, and I understand this ASC Acknowledgement as read to me by my interpreter.
2. I have requested the services of and consented to _____, who is is not an attorney or accredited representative, preparing this petition for me. This person who assisted me in preparing my petition has reviewed the **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable) with me and I understand the ASC Acknowledgement.

Part 5. Petitioner's Statement, ASC Acknowledgement (if applicable), Certification, Signature, and Contact Information (continued)

Acknowledgement of Appointment at USCIS Application Support Center (if applicable)

I, Bari L Courts, understand that the purpose of a USCIS Application Support Center (ASC) appointment is for me to provide my fingerprints, photograph, and/or signature and to reverify that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my ASC appointment:

By signing here, I declare under penalty of perjury that I have reviewed and understand this petition as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with this petition that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be reverifying that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in my petition and all supporting documents submitted with my petition are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this Acknowledgement of Appointment at USCIS Application Support Center (if applicable) with me.

Petitioner's Certification

I certify, under penalty of perjury under the laws of the United States of America, that the information in this petition and any document submitted with this petition is complete, true, and correct.

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 my records that USCIS may need to determine whether the child I am petitioning for is eligible to be classified as my immediate relative.

I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration of U.S. immigration laws.

Petitioner's Signature

3. Petitioner's Signature Bari L Courts Date of Signature (mm/dd/yyyy) ▶ 7/17/15

Petitioner's Contact Information

4. Petitioner's Daytime Telephone Number 5137521214 5. Petitioner's Mobile Telephone Number (if any) 5132258939
6. Petitioner's Email Address (if any) BLCourts@gmail.com

Part 6. Petitioner's Duty of Disclosure

Certification: I understand the ongoing duty to disclose information concerning my suitability and eligibility as an adoptive parent, as described in the Form I-600 and/or I-600A instructions, and I agree to notify the home study preparer and USCIS of any new information that I am required to disclose.

Petitioner's Signature Bari L Courts Date of Signature (mm/dd/yyyy) ▶ 7/17/15

Part 7. Spouse's Statement, ASC Acknowledgement (if applicable), Certification, Signature, and Contact Information

Spouse's Statement

Select the box for either **Item 1.A.** or **1.B.** If applicable, select the box for **Item Number 2.**

- 1.A. I can read and understand English, and have read and understand each and every question and instruction on this petition, as well as my answer to each question. I have read and understand the **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable).
- 1.B. The interpreter named in **Part 9.** has read to me each and every question and instruction on this petition, as well as my answer to each question, in _____, a language in which I am fluent. I understand each and every question and instruction on this petition as translated to me by my interpreter, and have provided complete, true, and correct responses. The interpreter named in **Part 9.** also has read the **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable) to me, in the language in which I am fluent, and I understand this ASC Acknowledgement as read to me by my interpreter.
2. I have requested the services of and consented to _____, who is is not an attorney or accredited representative, preparing this petition for me. This person who assisted me in preparing this petition has reviewed the **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable) with me and I understand the ASC Acknowledgement.

Acknowledgement of Appointment at USCIS Application Support Center (if applicable)

I, Carolyn K. Courts, understand that the purpose of a USCIS Application Support Center (ASC) appointment is for me to provide my fingerprints, photograph, and/or signature and to reverify that all of the information in this petition is complete, true, and correct and was provided by me or my spouse. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my ASC appointment:

By signing here, I declare under penalty of perjury that I have reviewed and understand this petition as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with this petition that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be reverifying that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in this petition and all supporting documents submitted with my petition are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable) with me.

Spouse's Certification

I certify, under penalty of perjury under the laws of the United States of America, that the information in this petition and any document submitted with this petition is complete, true and correct.

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 my records that USCIS may need to determine whether the child my spouse is petitioning for is eligible to be classified as our immediate relative.

I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration of U.S. immigration laws.

Spouse's Signature

3. Spouse's Signature

Carolyn K. Courts

Date of Signature

(mm/dd/yyyy) ▶

2/12/15

Part 7. Spouse's Statement, ASC Acknowledgement (if applicable), Certification, Signature, and Contact Information (continued)

Spouse's Contact Information

4. Spouse's Daytime Telephone Number

5137521214

5. Spouse's Mobile Telephone Number (if any)

5132903214

6. Spouse's Email Address (if any)

CKCourts@gmail.com

Part 8. Spouse's Duty of Disclosure

I understand the ongoing duty to disclose information concerning my suitability and eligibility as an adoptive parent, as described in the Form I-600 and/or I-600A instructions, and I agree to notify the home study preparer and USCIS of any new information that I am required to disclose.

Spouse's Signature

Carolyn K Courts

Date of Signature

(mm/dd/yyyy)

2/17/15

Part 9. Interpreter's Name, Contact Information, Certification, and Signature

If you and/or your spouse (if married) used an interpreter to read and complete this petition, the interpreter must provide the following information:

Interpreter's Full Name

1. Interpreter's Family Name (Last Name)

Interpreter's Given Name (First Name)

2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

3. Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Email Address (if any)

Part 9. Interpreter's Name, Contact Information, Certification, and Signature (continued)

Interpreter's Certification

I certify that:

I am fluent in English and

I have read and accurately translated to this petitioner and/or the petitioner's spouse (if married) every question and instruction on this petition, as well as the answer to each question, in the language in which he and/or she is fluent.

I have read and accurately translated the Acknowledgement of Appointment at USCIS Application Support Center (ASC) (if applicable) to the petitioner and/or the petitioner's spouse, in the language in which he and/or she is fluent.

The petitioner and/or the petitioner's spouse has informed me that he and/or she understands every instruction and question on the petition, as well as the answer to each question.

The petitioner and/or the petitioner's spouse also has informed me that he and/or she understands the ASC Acknowledgement and that by appearing for a USCIS ASC biometric services appointment and providing his and/or her fingerprints, photograph, and/or signature, he and/or she will be reaffirming that the contents of this petition and all supporting documentation are complete, true, and correct.

Interpreter's Signature

6. Interpreter's Signature

Date of Signature

(mm/dd/yyyy) ▶

Part 10. Name, Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner and/or Spouse

If you and/or your spouse (if married) used a preparer to complete this petition, the preparer must provide the following information:

Preparer's Full Name

1. Preparer's Family Name (Last Name)

Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

3. Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Part 10. Name, Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner and/or Spouse (continued)

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5. Preparer's Fax Number (if any)

6. Preparer's Email Address (if any)

Preparer's Statement

7.A. I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and/or the petitioner's spouse (if married) and with the petitioner's and/or petitioner's spouse's consent.

7.B. I am an attorney or accredited representative and my representation of the petitioner and/or the petitioner's spouse (if married) in this case (choose one) extends does not extend beyond the preparation of this petition.

Preparer's Certification

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this petition on behalf of, at the request of, and with the express consent of the petitioner and/or the petitioner's spouse (if married). I completed this petition based only on responses the petitioner and/or the petitioner's spouse provided to me. After completing the petition, I reviewed it and all of the petitioner's and/or the petitioner's spouse's responses with the petitioner and/or the petitioner's spouse, who agreed with each and every answer on the petition. If the petitioner and/or the petitioner's spouse supplied additional information concerning a question on the petition, I recorded it on the petition. I also have read the **Acknowledgement of Appointment at USCIS Application Support Center** (if applicable) to the petitioner and/or the petitioner's spouse and the petitioner and/or the petitioner's spouse has informed me that he and/or she understands the ASC Acknowledgement.

Preparer's Signature

8. Preparer's Signature

Date of Signature

(mm/dd/yyyy) ▶