

Application for Determination of Suitability to Adopt ntion Country

USCIS Form I-800A

and Security gration Services

OLYARTMIN .	a Child from a Conver
	Department of Homela
THAND SECTION	U.S. Citizenship and Immig

Returned	Resubmitted	Receipt	This application was filed by	y:	Action Block
			A Married Applicant		
Date	Date	-	An Unmarried Applica	nt	
			This application is approved	d for a	
Date	Date	-	Convention adoptee from:		
Reloc Sent	Reloc Rec'd	1	(Name of Convention Cou	intry)	
			Period of approval valid	until:	
Date	Date	-	Date		
To be Com	Sele	ect this box if	Attorney State Bar Number		ey or Accredited Representative
an Attor Accred	', 1'01	m G-28 or G-28I ttached.	(if applicable)	USCIS	Online Account Number (if any)
Representati					
	HERE - Type or prin	it in black ink.			
	sis of Filing				ari o
			ww.uscis.gov/g-1055, for inform		-
<u>—</u>	-	-			y to the Hague Adoption Convention
∐ You pre	viously filed a Form	I-800A; AND your 1	narital status changed while your	: I-800A a	application was pending
Part 2 Info	ormation About	Vou (Applicant)			
	the following inform		alf.		
	Name (Last Name)	nation about yours	Given Name (First Name)		Middle Name (if applicable)
Other N	ames Used (including	g maiden name if app	propriate)		
	,	•			
USCIS	Online Account Num	ber (if any) U	J.S. Social Security Number (if ar	ny)	
▶ 1	e a v e b	l a n k	•		
Date of	Birth (mm/dd/yyyy)	Place of Birth	(City/Town, State/Province, Co	untry)	
Curren	t Physical Address				
In Care	Of Name (if any)				
Street N	umber and Name			Apt. Ste	e. Flr. Number
City or	Γown			State	ZIP Code
					▼
Province	e	Pos	stal Code Country		

t 2. Information About You ((Applicant) (continued)	
Current Mailing Address (if di	ifferent from physical address)	
In Care Of Name (if any)		
Street Number and Name		Apt. Ste. Flr. Number
City or Town		State ZIP Code
		lacksquare
Province	Postal Code Cou	untry
I intend to adopt a child habitu	ually residing in the following Convent	tion country:
		in a country other than a Convention country, STOP . structions for additional filing information.
I am a habitual resident of the		C
X A person who is domiciled i	in the United States.	
	in the United States, even if temporarily	living outside the United States.
	a domicile in the United States on or be nce as a Convention adoptee.	fore the date of the child's admission to the United
A person domiciled outside child's 18th birthday for nat		ld to the United States after adoption and before the
I am:		
★ A citizen of the United State	es. I obtained my U.S. citizenship throug	gh:
Birth in the United State	es Parent(s) Naturalization	
Not a citizen of the United S file).	States. STOP. You may not file this appl	lication (see Pages 1 to 2 of instructions for eligibility to
If you derived or acquired citize citizenship?	nship through your parent(s), have you o	obtained your own certificate of Yes No
If "Yes," provide the following i	nformation:	
Name Under Which Certificate	of Citizenship Was Issued	
Certificate of Citizenship Numb	er Date of Issuance (mm/dd/yy	ууу)
Place of Issuance	Alien Registration Number	(A-Number) (if any)
	► A-	

If you became a citizen by naturalization, give the following information:									
Name Un	der Which Certificate of Citizens	hip Was Issued							
Naturaliza	tion Certificate Number	Date of Naturaliza	ition (m	ım/dd/y	ууу)				
Place of N	Jaturalization	Alien Registration	Numb	er (A-N	umber)	(if any)_		
		▶ A-							
Have you,	or any person through whom yo	u claimed citizenshi	p, ever	lost U.S	S. citize	nship?		Yes	☐ No
If "Yes," attach a detailed explanation including date, place, and circumstances on a separate sheet of paper.									
Provide the following information about your current marital status.									
I am:									
Single	e, never married.								
Single	e, with all previous marriages terr	minated. (If you sele	ct this b	ox, you	ı must c	complet	e Item Nu	mber 8.c.)	
Marri	ed, with no previous marriages. (If you select this bo	x, you n	nust cor	nplete I	Item N	umber 8.b	.)	
Marri	ed, with all previous marriages to	erminated. (If you se	lect this	s box, y	ou must	compl	ete Item N	umber 8.b.,	and 8.c.)
If married	, provide the following informati	on:							
Date of C	urrent Marriage (mm/dd/yyyy) I	Place of Current Mar	riage (0	City/Tov	wn, Stat	te/Provi	nce, Count	try)	
Informatio	on on all previous marriages, if ap	pplicable. Begin wi	th the m	ost rece	ent term	ination			
1. Nun	nber of Previous Marriages (Do r	not count current ma	rriage)						
Provide th	e following information on each	terminated marriage	e (if app	licable)):			<u> </u>	
	_		` 11	,					
∟ Nan	ne of Prior Spouse								
	1		How	Marria (ige End	ed [Divorce	Death	Other
2.b. Date	e Marriage Ended (mm/dd/vyvy)								
	<u> </u>								
∟ Nan	ne of Prior Spouse								
	1		How	Marria Marria	ige End	ed [Divorce	Death	Other
NOTE: If	You need more space to complet	te, use a separate she	⊐ eet of pa	iper. Wi	rite you	r name	and USCIS	S Account N	umber, if
									,
9. My contact information is (all phone numbers must include area code and country code, if					de, if ap	pplicable):			
Daytime 7	Telephone Number (with area/	Home	Γelepho	ne Num	ber (if	differer	nt from day	time	
country co	ode)	telepho	ne num	ber)					
E-Mail A	ddress (if any)								
	Place of N Have you, If "Yes," a de the follo I am: Single Marrie Marrie Marrie Informatio 1. Num Provide th 2.a. Date Nam NoTE: If known, at My contact Daytime Tountry co	If "Yes," attach a detailed explanation include the following information about your curl am: Single, never married. Single, with all previous marriages term Married, with no previous marriages. (Married, with all previous marriages term of Married, with all previous marriages term of Married, provide the following information of Current Marriage (mm/dd/yyyy) Information on all previous Marriages, if and the following information on each of Previous Marriages (Do reprovide the following information on each of Prior Spouse 2.b. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse NOTE: If you need more space to complete known, at the top of each sheet of paper and the provide the following information on each sheet of paper and the following information on each of Prior Spouse	Place of Naturalization Alien Registration ▶ A- Have you, or any person through whom you claimed citizenshi If "Yes," attach a detailed explanation including date, place, an de the following information about your current marital status. I am: Single, never married. Single, with all previous marriages terminated. (If you seled Imprived, with no previous marriages. (If you select this bound in Married, with all previous marriages terminated. (If you seled If married, provide the following information: Date of Current Marriage (mm/dd/yyyy) Information on all previous Marriages, if applicable. Begin with the following information on each terminated marriage (mm/dd/yyyy) Name of Previous Marriages (Do not count current marriage (mm/dd/yyyy) Name of Prior Spouse 2.a. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse NOTE: If you need more space to complete, use a separate she known, at the top of each sheet of paper and indicate the part and My contact information is (all phone numbers must include are Daytime Telephone Number (with area/ Home Telephone Telephone Number (with area/ telephone Telephone Number (with area/ telephone Telephone Telephone Telephone Number (with area/ telephone Tel	Place of Naturalization Alien Registration Numb A- Have you, or any person through whom you claimed citizenship, ever If "Yes," attach a detailed explanation including date, place, and circuid de the following information about your current marital status. I am: Single, never married. Single, with all previous marriages terminated. (If you select this box, you n Married, with no previous marriages terminated. (If you select this If married, provide the following information: Date of Current Marriage (mm/dd/yyyy) Place of Current Marriage (In Marriage) Information on all previous Marriages, if applicable. Begin with the m Number of Previous Marriages (Do not count current marriage) Provide the following information on each terminated marriage (if app 2.a. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse How NOTE: If you need more space to complete, use a separate sheet of paknown, at the top of each sheet of paper and indicate the part and num My contact information is (all phone numbers must include area code: Daytime Telephone Number (with area/ telephone num Home Telephone num	Place of Naturalization Alien Registration Number (A-N ▶ A- Have you, or any person through whom you claimed citizenship, ever lost U.S. If "Yes," attach a detailed explanation including date, place, and circumstance dethe following information about your current marital status. I am: Single, never married. Single, with all previous marriages terminated. (If you select this box, you must con Married, with no previous marriages. (If you select this box, you must con Married, with all previous marriages terminated. (If you select this box, you fl married, provide the following information: Date of Current Marriage (mm/dd/yyyy) Place of Current Marriage (City/Ton Information on all previous marriages, if applicable. Begin with the most recent that the following information on each terminated marriage (if applicable) 2.a. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse How Marriage Prior Spouse How Marriage Note: If you need more space to complete, use a separate sheet of paper. We known, at the top of each sheet of paper and indicate the part and number of the My contact information is (all phone numbers must include area code and country code) Home Telephone Num telephone number)	Place of Naturalization Alien Registration Number (A-Number) ▶ A- Have you, or any person through whom you claimed citizenship, ever lost U.S. citize If "Yes," attach a detailed explanation including date, place, and circumstances on a s de the following information about your current marital status. I am: Single, never married. Single, with all previous marriages terminated. (If you select this box, you must complete I Married, with no previous marriages terminated. (If you select this box, you must If married, provide the following information: Date of Current Marriage (mm/dd/yyyy) Place of Current Marriage (City/Town, Stat Information on all previous marriages, if applicable. Begin with the most recent term 1. Number of Previous Marriages (Do not count current marriage) Provide the following information on each terminated marriage (if applicable): 2.a. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse How Marriage End NOTE: If you need more space to complete, use a separate sheet of paper. Write you known, at the top of each sheet of paper and indicate the part and number of the item My contact information is (all phone numbers must include area code and country code) Home Telephone Number (if telephone number)	Place of Naturalization Alien Registration Number (A-Number) (if any ▶ A- Have you, or any person through whom you claimed citizenship, ever lost U.S. citizenship? If "Yes," attach a detailed explanation including date, place, and circumstances on a separate de the following information about your current marital status. I am: Single, never married. Single, with all previous marriages terminated. (If you select this box, you must complete Item Normalized, with no previous marriages. (If you select this box, you must complete Item Normalized, with all previous marriages terminated. (If you select this box, you must complete Item Normalized, with all previous marriages terminated. (If you select this box, you must complete of Current Marriage (City/Town, State/Provious Date of Current Marriage (City/Town, State/Provious Information on all previous marriages, if applicable. Begin with the most recent termination 1. Number of Previous Marriages (Do not count current marriage) Provide the following information on each terminated marriage (if applicable): 2.a. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse How Marriage Ended NOTE: If you need more space to complete, use a separate sheet of paper. Write your name known, at the top of each sheet of paper and indicate the part and number of the item to whic My contact information is (all phone numbers must include area code and country code, if an Daytime Telephone Number (with area/ Home Telephone Number (if different country code)	Place of Naturalization Alien Registration Number (A-Number) (if any) ▶ A- Have you, or any person through whom you claimed citizenship, ever lost U.S. citizenship? If "Yes," attach a detailed explanation including date, place, and circumstances on a separate sheet of pade the following information about your current marital status. I am: Single, never married. Single, with all previous marriages terminated. (If you select this box, you must complete Item Nu Married, with no previous marriages. (If you select this box, you must complete Item Number 8.b. Married, with all previous marriages terminated. (If you select this box, you must complete Item Number 8.b. Married, provide the following information: Date of Current Marriage (mm/dd/yyyy) Place of Current Marriage (City/Town, State/Province, Count Information on all previous marriages, if applicable. Begin with the most recent termination. 1. Number of Previous Marriages (Do not count current marriage) Provide the following information on each terminated marriage (if applicable): 2.a. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse How Marriage Ended Divorce NOTE: If you need more space to complete, use a separate sheet of paper. Write your name and USCIs known, at the top of each sheet of paper and indicate the part and number of the item to which the answ My contact information is (all phone numbers must include area code and country code, if applicable): Daytime Telephone Number (with area/ Home Telephone Number (if different from day telephone number)	Place of Naturalization Alien Registration Number (A-Number) (if any) ▶ A- Have you, or any person through whom you claimed citizenship, ever lost U.S. citizenship? Yes If "Yes," attach a detailed explanation including date, place, and circumstances on a separate sheet of paper. de the following information about your current marital status. I am: Single, never married. Single, with all previous marriages terminated. (If you select this box, you must complete Item Number 8.c.) Married, with no previous marriages. (If you select this box, you must complete Item Number 8.b.) Married, with all previous marriages terminated. (If you select this box, you must complete Item Number 8.b., If married, provide the following information: Date of Current Marriage (City/Town, State/Province, Country) Information on all previous Marriages (Do not count current marriage) Provide the following information on each terminated marriage (if applicable): 2.a. Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse How Marriage Ended Divorce Death NOTE: If you need more space to complete, use a separate sheet of paper. Write your name and USCIS Account N known, at the top of each sheet of paper and indicate the part and number of the item to which the answer refers. My contact information is (all phone numbers must include area code and country code, if applicable): Daytime Telephone Number (with area/ Home Telephone Number (if different from daytime country code)

Par	t 2. Information About You (continued)		
Have	you ever, whether in or outside the United States:		
10.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?	Yes	☐ No
10.b.	Been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action?	Yes	☐ No
10.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
10.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, <i>other than</i> 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
and/c each occur invol other	Tied copy of the documentation showing the final disposition of each incident which resulted in arrest, indice or any other judicial or administrative action and a written statement giving details, including any mitigating arrest, signed under penalty of perjury under U.S. law. The written statement must show the date of each incred (city/town, State/province, country); name of police department or other law enforcement administration ved; date of incarceration and name of facility, if applicable. Provide a description of any type of counseling information that you would like considered in light of this history on a separate sheet of paper.	g circumstand cident; place on or other en	ces, about e incident ntity
Par	t 3. Information About Your Spouse		
1.	If you are married, provide the following information about your spouse:		
	Family Name (Last Name) Given Name (First Name) Middle Na	ame (if appli	cable)
	Other Names Used (including maiden name if appropriate)		
	Date of Birth (mm/dd/yyyy) Place of Birth (City/Town, State/Province, Country) U.S. Social Secur	ity Number ((if any)
	►		
	Alien Registration Number (A-Number) (if any) USCIS Online Account Number (if any)		
	▶ A- ▶		

Par	rt 3. Information About Your Spouse (continued)	
2.	Does your spouse reside with you? If "No," provide the following information. NOTE: If you are still legally married file this application unless your spouse will join in the submission of Form I-800/4 Convention Adoptee as an Immediate Relative, and the adoption of the Convention	A, subsequent Form I-800, Petition to Classify
	Spouse's Physical Address	
	In Care Of Name (if any)	
	Street Number and Name	Apt. Ste. Flr. Number
	City or Town	State ZIP Code
	Province Postal Code Country	
	Spouse's Current Mailing Address (if different from home address) In Care Of Name (if any)	
	Street Number and Name	Apt. Ste. Flr. Number
	City or Town	State ZIP Code
	Province Postal Code Country	
	Spouse's Contact Information Daytime Telephone Number (with area/ E-Mail Address (if any) country code)	
3.a.	Prior to your current marriage, has your spouse been previously married? If "Yes," provide the following information. Begin with the most recent terminate.	Yes No
3.b.	Number of Previous Marriages (Do not count current marriage)	
3.c. 3.d.	Provide the following information on each terminated marriage (if applicable): Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse	
	How Marriage Ended	Divorce Death Other
3.e.	Date Marriage Ended (mm/dd/yyyy) Name of Prior Spouse	
	How Marriage Ended	Divorce Death Other

NOTE: If you need more space than what is provided, use a separate sheet of paper to complete and file with this application. Type or print your name and USCIS Online Account Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which you answer refers; and sign and date each sheet.

Part 3. Information About Your Spouse (continued) 4. Your spouse: X Is a citizen of the United States through: Birth in the United States Parent(s) ☐ Naturalization Is a non-citizen national of the United States. Is an alien who has been lawfully admitted for permanent residence. Is an alien who has **not** been lawfully admitted for permanent residence. (Provide a full explanation on a separate sheet of paper. Copies of any relevant documents relating to any other immigration status must be attached to Form I-800A. If your spouse is an alien who does not live in the United States, provide a complete explanation.) If your spouse derived citizenship through his or her parent(s), has he or she obtained his or her own □No 5. Yes certificate of citizenship? If "Yes," provide the following information: Name Under Which Certificate of Citizenship Was Issued Naturalization Certificate Number Date of Naturalization (mm/dd/yyyy) Place of Naturalization Alien Registration Number (A-Number) (if any) **A**-If your spouse became a citizen by naturalization, give the following information: 6. Name Under Which Certificate of Naturalization Was Issued Naturalization Certificate Number Date of Naturalization (mm/dd/yyyy) Place of Naturalization Alien Registration Number (A-Number) (if any) Has your spouse, or any person through whom he or she claimed citizenship, ever lost U.S. citizenship? ☐ Yes ☐ No 7. If "Yes," attach a detailed explanation on a separate sheet of paper. Has your spouse ever, whether in or outside the United States: 8.a. Been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law Yes ☐ No 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? **8.b.** Been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action? Yes □ No **8.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? **8.d.** At any time been the subject of any investigation by any child welfare agency, court, or other official ☐ Yes ☐ No 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?

Part 3. Information About Your Spouse (continued)

Each of the above questions must be answered. See "Duty of Disclosure" on Page 7 of the instructions to Form I-800A concerning your ongoing duty to disclose information in answer to these questions. If the answer is "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 your spouse 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 would like considered in light of this history on a separate sheet of paper.

					General Information	rt 4. G
					home study:	The
				cation.	Is attached to this applica	\times
		y to USCIS. (D	ome study direct	application because of State icated that it will submit th authority is ready to send the	State authority has indica	
	2. Name and Address of Adoption Service Provider. Provide the name and address of either (Check one):					
2.a. The adoption service provider that is responsible for your home study (either the accredited agency or temporarily accredited agency, as defined in 22 CFR 96.2, that prepared and approved your home study or reviewed and approved your home study after it was prepared by another authorized home study preparer, or the public domestic authority, as defined in 22 CFR 96.2, that both prepared and approved your home study); or						
accredited agency of ed in 22 CFR Part	ited or temporarily ption services defi	r is an accredite or the six adopti	n service provide CFR Part 96.14 f	ption service provider who provider. (A primary adop who is responsible under a ervising and being respons	adoption service prapproved person w	2.b.
				Provider	ne of Adoption Service Pr	Nam
				International	l God's Children I	All
rith area/	lephone Number (v	Daytime Telep		erson within the organizati	nt of Contact (contact pers	Poin
	country code)	(IAS)	Adoption Speciali	ur International A	You	
r	t. Ste. Flr. Numbe	Apt. S			et Number and Name	Stree
] 🔀 🔲 201			ue	00 NE 136th Avenue	140
de	te ZIP Co	State			or Town	City
	A	WA			ncouver	Van
		ntry	e Cou	Postal 0	vince	Prov
			USA			
and regulations. y preadoption	evant State statutes e requirements. Ar	tion to the relevant	including a cital planned to con	on of the preadoption require adopted in the United State already been taken or that be met at the time Form I-	wn that the child will be a cribe the steps that have a direments which cannot be	knov Desc requ
and y pro	evant State statutes e requirements. Ar	ne State of the clear cion to the relevant ply with these rese of the operation	ents, if any, of t including a cita e planned to con A is filed becau	e adopted in the United Sta e already been taken or tha	wn that the child will be a cribe the steps that have a direments which cannot be lained.	knov Deso requ expl

NOTE: If you need more space than what is provided, use a separate sheet of paper to complete and file with this application. Type or print your name and USCIS Online Account Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which you answer refers; and sign and date each sheet.

Part	4. General Information (continued)						
You j	plan to (Select one box):							
4.a.	Complete the proposed adoption in the Convention country.							
4.b.	Obtain legal custody of the chi Number 4.b., make sure that y		•		tes. (If you selected Item			
5.	Do you plan to concurrently adopt more than one child from the same Convention country? (Home Yes study must contain a specific recommendation for the number of children you plan to adopt.)							
	If "Yes," how many?							
	Have you ever previously filed Form Form I-600, Petition to Classify Orp Determination of Suitability to Ado Classify Convention Adoptee as an	bhan as an Immed pt a Child From a	iate Relative, Form I-86 Convention Country, o	00A, Application for	Yes No			
f"Y	es," provide the following:							
6.a.	Type of Application/Petition Filed							
6.b.	Result - Check the box that best des or petition.	cribes the action t	aken by USCIS and/or	U.S. Department of State	on your application and/			
	Approved - Approval Date (m	m/dd/yyyy):						
	Denied - Denial Date (mm/	dd/yyyy):						
	NOTE: A copy of the written	denial notice must	t accompany this applic	cation.				
	Other - Explain:							
	NOTE: If you need more space that Type or print your name and USCIS Number, and Item Number to white	S Online Account	Number (if any) at the	top of each sheet; indicate				
7.	Other than a spouse, is there any pe	rson 18 years of a	ge or older residing wit	h you?	Yes No			
	If "Yes," you must complete Form	I-800A Supplem	nent 1, Listing of Adult	Member of the Househol	d, for each person.			
8.	List all your children under 18 years of age. Also include any child under 18 years of age residing in your household even if you are not the parent of such child.							
	Name (First/Middle/Last)	Date of Birth (mm/dd/yyyy)	Country of Birth	A# (if applicable)	Relationship to You (if any)			

Part 5. Applicant's Statement, Certification, and Signature

NOTE: Read the Penalties section of the Form I-800A Instructions before completing this section.

Ap	pli	cant	'S	Statement
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- 1. Applicant's Statement Regarding the Interpreter (Select the box for either Item A. or B.)
 - **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.

В.	The interpre	eter named in Part 7. has read to me every ques	tion and instruction or	n this supplement and my ans	wer to every
	question in		, a language in which	I am fluent, and I understood	everything.

2. Applicant's Statement Regarding the Preparer (if applicable)

At my request, the preparer named in Part 8.,		, prepared this supplement for me
based only upon information I provided or auth	orized.	

Applicant's Certification

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.

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.

I understand that USCIS will require me to appear for an appointment to take my biometrics (for example, fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:

- 1. I reviewed and provided or authorized all of the information in my application;
- 2. I understood all of the information contained in, and submitted with, my application; and
- 3. All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in and submitted with my application, and that all of this information is complete, true, and correct.

Applicant's Duty of Disclosure

I understand the ongoing duty to disclose information concerning my suitability and eligibility to adopt, as described in the Form I-800A and/or Form I-800 instructions, and I agree to notify my home study preparer and USCIS of any new information that I am required to disclose.

Applicant's Signature

3.	Applicant's Signature	Date of Signature (mm/dd/yyyy)
\Rightarrow		

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 6. Your Spouse's Statement, Certification, Duty of Disclosure, and Signature

NOTE: Read the Penalties section of the Form I-800A and Form I-800 Instructions before completing this section.

Your Spouse's Statement

1.	Your Spouse's S	Statement Regarding t	the Interpreter (select	t the box for either l	Item A. or B.)
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- **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.
- B. The interpreter named in Part 7. has read to me every question and instruction on this supplement and my answer to every question in a language in which I am fluent, and I understood everything.
- 2. Your Spouse's Statement Regarding the Preparer (if applicable)

Your Spouse's Certification

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.

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.

I understand that USCIS will require me to appear for an appointment to take my biometrics (for example, fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:

- 1. I reviewed and provided or authorized all of the information in my application;
- 2. I understood all of the information contained in, and submitted with, my application; and
- 3. All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in and submitted with my application, and that all of this information is complete, true, and correct.

Your Spouse's Duty of Disclosure

I understand the ongoing duty to disclose information concerning my suitability and eligibility to adopt, as described in the Form I-800A and/or Form I-800 instructions, and I agree to notify my home study preparer and USCIS of any new information that I am required to disclose.

You	Your Spouse's Signature				
3.	Your Spouse's Signature	Date of Signature (mm/dd/yyyy)			
\Rightarrow					



	Part 7. Inter	rpreter's Contac	t Information,	Certification.	and Signature
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If you and/or your spouse (if married) used an interpreter to read and complete this supplement, provide the following information about the interpreter.

Int	erpreter's Full Name				
1.	Interpreter's Family Name (Last Name)		Interpreter's Given Name (F	irst Name)	
2.	Interpreter's Business or Organization Name (if any)		I		
In	terpreter's Mailing Address				
3.	Street Number and Name			Apt. St	e. Flr. Number
	City or Town			State	ZIP Code
	Province Postal Code	<u>e</u>	Country		
Int	erpreter's Contact Information				
4.	Requestor's Daytime Telephone Number	5.	Requestor's Mobile Teleph	none Numbe	r (if any)
6.	Requestor's Email Address (if any)				
In	terpreter's Certification				
I cei	tify, under penalty of perjury, that:				
I am	fluent in English and		which is the sa	ıme languago	e specified in Parts 5.
	6., Item B in Item Number 1., and I have read to this a				
	tion and instruction on this application and their answe hat he or she understands every instruction, question, a				
	Your Spouse's Certification, and has verified the accu			ne rappnem	it is continued and
In	terpreter's Signature				
7.	Interpreter's Signature			Date of Si	gnature (mm/dd/yyyy)
\Rightarrow					

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant and Spouse

If you and/or your spouse (if married) used a preparer to complete this application, provide the following information about the preparer.

Pr	reparer'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)				
Pre	eparer's Mailing Address				
3.	Street Number and Name	Apt. Ste. Flr. Number			
	City or Town	State ZIP Code			
	Province Postal Code	Country			
Pro	eparer's Contact Information				
4.	Preparer's Daytime Telephone Number 5.	Preparer's Mobile Telephone Number (if any)			
6.	Preparer's Email Address (if any)				
Pre	eparer's Statement				
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 and with the adult member of the household's and/or applicant's consent.				
	B. I am an attorney or accredited representative and my representation of the adult member of the household and/or applicant in this case extends/does not extend beyond the preparation of this supplement				
Preparer's Certification					
appliinfor	my signature, I certify, under penalty of perjury, that I prepared this icant's spouse (if married). The applicant and the applicant's spousermed me that he or she understands all of the information contained blicant's Certification and the Your Spouse's Certification, and pleted this application based only on information that the applicant	se (if married) then reviewed this completed application and ed in, and submitted with, his or her application, including the that all of this information is complete, true, and correct. I			
Preparer's Signature					
8. →	Preparer's Signature	Date of Signature (mm/dd/yyyy)			