

Application for Family Unity Benefits

Please read these instructions carefully to properly complete this form. If you need more space to complete an answer, use a separate sheet of paper. Write your name and A # at the top of each additional sheet of paper.

Use Form I-817 to apply for family unity benefits, including new family unity benefits under section 301 of Public Law 101-649, Immigration Act of 1990 (IMMACT 90) or under section 1504 of Public Law 106-554, Legal Immigration Family Equity Act Amendments (the LIFE Act).

You will need to submit:

- Four color photos
- I-765 Card, signature card
- Documents to support your request
- Translation of any non-English documents
- Filing fee of \$140.00
When required, a fingerprint fee of \$50.00

To file this application, see Step 3 for specific instructions.

Step 1. Choose a Reason for Requesting Family Unity Benefits

To prove eligibility for Family Unity Program benefits, you must meet the following conditions.

- You must have entered the United States prior to May 5, 1988, or December 1, 1988, as appropriate, and have been continuously residing in the United States since that date.
- You were the spouse or unmarried child under the age of 21 of a legalized alien as of May 5, 1988, or December 1, 1988, as appropriate, and you have been continuously eligible since that date for family-sponsored immigrant status, based on your relationship to that person.

NOTE: If you were an unmarried child under the age of 21 as of May 5, 1988 or December 1, 1988, as appropriate, who has since been married, you will be regarded as continuously eligible for family sponsored immigration benefits only if you were married after the legalized alien through whom your eligibility was gained naturalized as a U.S. citizen.

For information on the two dates, May 5, 1988 or December 1, 1988, cited above, go to Page 2 of these instructions and read "Relationship to a legalized alien."

To prove eligibility for Family Unity benefits, under section 1504, Public Law 106-554, the LIFE Act as amended.

- You are the spouse or unmarried child of an alien who is eligible for adjustment pursuant to section 1104(b) of Public Law 106-553 (the LIFE Act) and entered the United States before December 1, 1988, and resided in the United States on that date.

When Should I Use Form I-817?

You should use Form I-817 to request initial benefits under the Family Unity Program as well as to request an extension of such benefits. If you are granted family unity benefits, you are authorized to remain in the United States for two years (one year if you are applying pursuant to the LIFE Act) and you will receive an Employment Authorization Document (EAD) valid for the same period. You should file only the I-817 application with supporting documents to request authorization to remain in the United States and an EAD.

If after granted benefits under the Family Unity Program you intend to travel outside the United States temporarily, you must apply for advance parole using Form I-131, Application for Travel Document. Upon approval of the Form I-131, you will be issued a Form I-512, Authorization of Parole into the United States. Advance parole allows you to leave the United States and to be paroled back into the United States when you return.

How Do I File?

You must fill out a separate Form I-817 for each person who needs to apply for family unity benefits. Follow these three steps to complete the application process:

Step 1 - Choose a Reason for Requesting Family Unity Benefits

Step 2 - Fill Out the Form I-817

Step 3 - Organize and Submit Your Application

Important Notice

INS wants to make sure that you receive any immigration benefits to which you are entitled. To do this, we may ask for more evidence, interview you, and/or conduct an investigation. If you give us false documents, misrepresent facts, or otherwise engage in fraud, INS will take appropriate action. This means we will not only deny your application, you may also lose current and future immigration benefits. You may also face penalties including criminal and/or civil prosecution leading to fines and/or imprisonment.

A legalized alien is someone who obtained temporary or permanent residence in the United States as a Special Agricultural Worker under section 210 of the Immigration and Nationality Act (INA) or through Legalization under section 245A of the INA or under section 1104(b) of Public Law 106-553 (the LIFE Act). For the purposes of this form, a legalized alien is also someone who obtained permanent residence through a Cuban/Haitian Adjustment under section 202 of the Immigration Reform and Control Act of 1986.

If you, the applicant, are an adopted child, the adoption must have taken place before you reached the age of 16 and you must have resided with and been in the legal custody of your adoptive parent for two years. The custody and residence requirements may have been met prior to or after adoption. If you are a stepchild, your relationship must have been established before your 18th birthday.

The classes of individuals eligible to apply for family unity benefits are listed below. Check the box in **Part 2** of the Form I-817 that matches your request.

Relationship to a legalized alien

- **I am the spouse of an alien who was legalized under section 245A of the INA and we have been married since at least May 5, 1988. Check box A if your relationship was established on or before May 5, 1988, and you currently meet the residence and continuous eligibility requirements.**
- **I am the spouse of an alien who was legalized as a Special Agricultural Worker under section 210 of the INA, and we have been married since at least December 1, 1988. Check box B if your relationship was established on or before December 1, 1988, and you currently meet the residence and continuous eligibility requirements.**
- **As of May 5, 1988, I was the unmarried child under the age of 21 of an alien who was legalized under 245A of the INA. I am currently the child, son, or daughter of the same parent. That parent is currently either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before May 5, 1988, and who maintained such status until his or her naturalization. Check box C if your relationship was established, on or before May 5, 1988, and you currently meet the residence and continuous eligibility requirements.**
- **As of December 1, 1988, I was the unmarried child under the age of 21 of an alien who was legalized as a Special Agricultural Worker under section 210 of the INA. I am currently the child, son, or daughter of the same parent. That parent is either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before December 1, 1988, and who maintained such status until his or her naturalization. Check box D if your relationship was established on or before December 1, 1988, and you currently meet the residence and continuous eligibility requirements.**
- **I am the spouse of a legalized alien who adjusted under section 202 of the Immigration Reform and Control Act of 1986 (Cuban/Haitian Adjustment) and we have been married since at least May 5, 1988. Check box E if your relationship was established on or before May 5, 1988, and you currently meet the residence and continuous eligibility requirements.**
- **As of May 5, 1988, I was the unmarried child under the age of 21 of a legalized alien who adjusted under section 202 of the Immigration and Control Act of 1986 (Cuban/Haitian Adjustment). I am currently the child, son, or daughter of the same parent. That parent is either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before May 5, 1988, and who maintained such status until his or her naturalization. Check box F if your relationship was established on or before May 5, 1998, and you currently meet the residence and continuous eligibility requirements.**

Relationship to an alien who is eligible for adjustment of status under the provisions of section 1104(b) of Public Law 106-553 (the LIFE Act):

- "I am the spouse of an an alien who is eligible for adjustment of status pursuant to section 1104(b) of Pub. L. 106-553. I entered the United States before December 1, 1988, and was in the United States on that date." Check box "G."
- "I am the unmarried child of an alien who is eligible for adjustment of status pursuant to section 1104(b) of Pub. L. 106-553. I entered the United States before December 1, 1988, and was in the United States on that date." Check box "H."

NOTE: When a legalized alien becomes a U.S. citizen, his or her spouse and unmarried children under the age of 21 become eligible to apply for an immigrant visa or to adjust status to become a permanent resident. If you are eligible to apply for an immigrant visa, you must follow Department of State requirements. To apply for adjustment of status, you must follow the requirements set forth in the INA.

I am requesting:

- **initial Family Unity benefits under section 301 of IMMACT 90.** Check box A if this is your first application requesting family unity benefits.
- **an extension of Family Unity benefits section 301 of IMMACT 90.** Check box B if you already have benefits under the Family Unity Program and you are requesting an extension. You must submit proof that an I-130, Petition for Alien Relative, has been filed on your behalf if the legalized alien through whom family unity benefits were obtained is a lawful permanent resident or naturalized U.S. citizen.
- initial family unity benefits under the LIFE Act as amended Check box "C" if this is your first application requesting family unity benefits under the LIFE Act as amended.

Step 2: Fill Out the Form I-817

Use **Black Ink Only**. Type or print clearly using **CAPITAL** letters. If an item does not apply to you, write "N/A" unless the specific instruction states otherwise.

The form is divided into Parts 1 through 8. The information below should help you fill out the form.

PART 1 - Information about you.

- **Family Name (Last Name) - Use your legal name. If you have two last names, include both and use a hyphen (-) between the names, if appropriate.**
- **INS A # -** This is your INS file number. If you do not have an A #, leave this blank.
- **Social Security # -** If you do not have a Social Security number, leave this blank.
- **Date of Birth -** Use eight numbers to show your date of birth (example: May 1, 1979, should be written 05/01/1979).
- **Country of Birth -** Give the name of the country where you were born.
- **Country of Citizenship -** Give the name of the country or countries of which you are a citizen.
- **Home Address -** Give your physical street address. This must include a street number and name or a rural route number. Do not put a post office box (P.O. Box) number here.
- **Daytime Phone -** Give a phone number where you can be reached during the day.

- **Mailing Address -** Give your U.S. mailing address, if different from home address.

PART 2 - Basis for my application.

- **Number 1 -** Check one box that applies to your particular circumstance.
- **Number 2 -** Check one box that relates to what you are requesting.

PART 3 - Additional information.

The information requested is about you. You must provide all the requested information in numbers 1 through 5. You must answer all the questions numbered 6 through 34.

PART 4 - Information about legalized alien or an applicant qualifying for legalization under the LIFE Act.

- The information requested is about the legalized alien through whom you are claiming eligibility or an applicant qualifying for legalization under the LIFE Act.

PART 5 - Complete only if legalized alien is your spouse or if your spouse is an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act.

- Provide the requested information about your qualifying marriage to the legalized alien or an applicant qualifying for legalization under the LIFE Act.

PART 6 - Complete only if legalized alien is your parent or your parent is an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act .

- Provide the requested information about your relationship to the legalized alien or an applicant qualifying for Legalization under the LIFE Act.
- If you are married, divorced or widowed, provide the requested information.

PART 7 - Your signature.

- You must sign and date your application. If you do not sign the form, the application will be returned as incomplete.
- A parent or legal guardian may sign the application on behalf of a child under the age of 14.

PART 8 -Signature of person preparing form, if other than applicant.

- If you do not fill out the Form I-817, the preparer must also sign, date, and give his or her address.
- If you do not fill out the Form I-817, the preparer must also sign, date, and give his or her address.

Step 3. Organize and Submit Your Application

You must include the following items in your application packet.

Your signed and completed Form I-817.

Your signed Form I-765 signature card.

Filing Fee. The filing fee for a Form I-817 is \$140.00. You must also pay a fingerprint fee of \$50.00 in the following cases.

- You are filing an initial application and you are age 14 or older.
- You were under the age of 14 when your initial application was filed but you are now 14 years of age or older and are filing for an extension.
- You are filing for an extension and INS has requested that you submit fingerprints.

NOTE: Replacement EAD - The fee to replace a lost, stolen, or mutilated EAD, or one that contains erroneous information is the standard fee as explained on Form I- 765, Application for Employment Authorization Document.

- Use the following guidelines when you prepare your check or money order.
- The check or money order must be drawn on a bank or other financial institution located in the United States and must be payable in U.S. currency. **DO NOT MAIL CASH.**
- Make the check or money order payable to **Immigration and Naturalization Service**, unless:
 - you live in Guam and are filing your application there; make it payable to **Treasurer, Guam**; or
 - you live in the U.S. Virgin Islands and are filing your application there; make it payable to **Commissioner of Finance of the Virgin Islands.**

NOTE: Please spell out Immigration and Naturalization Service; do not use the initials INS.

- Your check or money order must be honored by the bank or financial institution. If it is not, a charge will be imposed and your application and any document issued to you will not be valid.

Fingerprints. When required, fingerprints must be taken at an INS Application Support Center (ASC) after you file your application. INS will send you a notice about where to go to get your fingerprints taken.

Photos. You will need four (4) identical color photos of yourself taken no more than 30 days before the date of filing. Using a pencil, lightly write your name and INS A #, if applicable, on the back of each photo. The photos must:

- have a white background, be unmounted, have a glossy finish, and not be retouched;
- show a three-quarter frontal profile of the right side of your face, with your right ear visible and without earrings;
- show your head uncovered, unless you are wearing a headdress as required by your religion; and
- not be larger than 2 X 2 inches, with the distance from the top of the head to just below your chin about 1 1/4 inches.

Evidence. Attach copies, showing the front and back, of the documents you need to support your application. **DO NOT SEND ORIGINAL DOCUMENTS UNLESS INSTRUCTED TO DO SO.**

If you are requesting initial Family Unity benefits under section 301 of IMMACT 90. Copies of the following documents are evidence that the required relationship exists and that you may be eligible to file an initial application.

- A copy, front and back, of the document issued by INS to your legalized spouse or parent (for example: I-551, Permanent Resident Card; N-550, Certificate of Naturalization, etc.).
- **If the legalized alien is your spouse** - A copy, front and back, of a registered marriage certificate. If you or your spouse have been married before, submit a copy of a final divorce decree or death certificate.
- **If the legalized alien is your parent** - Give evidence of a valid parent-child relationship. This evidence can vary depending on the circumstances of your relationship.

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- If your mother is the legalized alien, submit a copy of your birth certificate showing your mother's name.
 - If you were born in wedlock and the legalized alien is your natural father, submit a copy of your birth certificate, your parent's marriage certificate and proof of termination of any prior marriages.
If you are the adopted child of a legalized alien parent, submit a certified copy of your adoption decree showing that you were adopted while under the age of 16 years, a copy of the legal custody decree if your custody was obtained before adoption, and a statement showing the dates and places where you and your adoptive parent(s).
 - If you are the legitimate child of a legalized father, a copy of your birth certificate and evidence of your legitimation must be submitted. Legitimation may be established by the marriage certificate of your natural parents or by documents of legitimation issued by civil authorities. The legitimation must have occurred while you were unmarried and prior to your 18th birthday. You must also submit evidence of any legal termination of your parent's prior marriages if your legitimation resulted from your natural parent's marriage to each other.
 - If you were born out of wedlock and the legalized alien is your natural father, a copy of your birth certificate showing your father's name must be submitted. Evidence showing that a bona fide relationship exists must also be submitted. Such evidence may include but is not limited to the following: money order receipts or canceled checks showing your father's financial support, your father's income tax returns, your father's medical or insurance records showing you as a beneficiary, your school records, your father's work documents showing you as a beneficiary, correspondence, and/or notarized affidavits from witnesses who are knowledgeable about the relationship.
 - If the legalized alien is your stepparent, whether or not you were born in wedlock, provide evidence showing that you had not yet reached the age of 18 years at the time of the marriage creating your status as a stepchild. Submit a copy of your birth certificate showing the name of your natural parent to whom your stepparent is married. Also provide a copy of the marriage certificate that created the step-relationship and evidence of termination of any previous marriages of your natural parent and stepparent.
 - If you are the adopted child of a legalized alien parent, submit a certified copy of your adoption decree showing that you were adopted while under the age of 16 years, a copy of the legal custody decree if your custody was obtained before adoption, and a statement showing the dates and places where you and your adoptive parent(s).
- NOTE: If you or your parent have had any name changes, submit the document authorizing the name change(s).**
- **If you are requesting initial Family Unity benefits under section 1504 of Pub. L. 106-554, LIFE Act as amended.**
 - If alien who is eligible for adjustment pursuant to section 1104 (b) of Pub. L. 106-553, the LIFE Act, is your spouse - A copy, front and back, of a registered marriage certificate. If you or your spouse have been married before, submit a copy of a final divorce decree or death certificate.
 - If the alien who is eligible for adjustment pursuant to section 1104 (b) of Pub. L. 106-553, the LIFE Act, is your parent give evidence of a valid parent-child relationship. This evidence can vary depending on the circumstances of your relationship.
 - If your mother is an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act, submit a copy of your birth certificate showing your mother's name.
 - If you were born in wedlock and the alien who is eligible for adjustment pursuant to section 1104(b), Pub. L. 106-553, the LIFE Act, is your natural father, submit a copy of your birth certificate, your parent's marriage certificate and proof of termination of any prior marriages.
 - If you are the legitimated child of an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act, a copy of your birth certificate and evidence of your legitimation must be submitted. Legitimation may be established by the marriage certificate of your natural parents or by documents of legitimation issued by civil authorities. The legitimation must have occurred while you were unmarried and prior to your 18th birthday. You must also submit evidence of any legal termination of your parent's prior marriages if your legitimation resulted from your natural parent's marriage to each other.
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- If you were born out of wedlock and your natural father is an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act, a copy of your birth certificate showing your father's name must be submitted. Evidence showing that a bona fide relationship exists must also be submitted. Such evidence may include but is not limited to the following: money order receipts or canceled checks showing your father's financial support, your father's income tax returns, your father's medical or insurance records showing you as a beneficiary, your school records, your father's work documents.
- If the alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act, is your stepparent, whether or not you were born in wedlock, provide evidence showing that you had not yet reached the age of 18 years at the time of the marriage creating your status as a stepchild. Submit a copy of your birth certificate showing the name of your natural parent to whom your stepparent is married. Also provide a copy of the marriage certificate that created the step-relationship and evidence of termination of any previous marriages of your natural parent and stepparent.
- If you are the adopted child of an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act, as amended, submit a certified copy of your adoption decree showing that you were adopted while under the age of 16 years, a copy of the legal custody decree if your custody was obtained before adoption, and a statement showing the dates and places where you and your adoptive parent(s) have lived together.

NOTE: If you or your parent have had any name changes, submit the document authorizing the name change(s).

- **Secondary evidence (For applicants of both section 301 of IMMACT 90 and section 1504 of Pub. L. 106-554, the LIFE Act, as amended) -** Official documents must be issued by the civil registrar, vital statistics office, or other civil authority. If such documents are unavailable, you must file your application with evidence from those authorities establishing that the primary evidence is unavailable. You must then submit secondary evidence to establish the facts in question. Submit as many types of secondary evidence as possible to verify the claimed relationship. Any evidence submitted must contain enough information (dates, names, etc.) to establish the event you are trying to prove. Listed below are examples of secondary evidence.

- Baptismal certificate. A certificate under the seal of the church where the baptism took place. The certificate must have been issued within two months of the birth, show the date and place of the birth, the date of the baptism, and the names of the child's parents.
- Census record. State or federal census record showing the name(s) and place(s) of birth, and date(s) of birth or age(s) of the person(s) listed.
- If all forms of primary and secondary evidence are unavailable, you must file your application with evidence from those authorities establishing that such evidence is unavailable. You must also submit at least two affidavits sworn to or affirmed by persons who are not parties to the application and who have direct personal knowledge of the event or circumstances. The persons making the affidavits do not have to be U. S. citizens. Each affidavit must contain the full name, address, date and place of birth, and signature of the person attesting to the event. The affidavit must also explain the person's relationship to you, full information concerning the event, and complete details of how the person acquired the information.

Evidence of continuous residence requirements for Family Unity applicants of section 301 of IMMACT 90 - You must submit at least three documents that prove residence in the United States since May 5, 1988 or December 1, 1988. Such evidence may include but is not limited to:

- employment records, pay stubs, W-2 Forms, Federal and/or state tax returns, letter(s) from banks and other firms with whom you have done business. Your name and the name of the employer or other interested organization must appear on the form or letter. Employment letters must be in affidavit form and must be signed by the employer under penalty of perjury. The letters must include dates of employment, your home address at the time of employment and your duties with the company.
- hospital or medical records showing treatment or hospitalization of you or your children in the United States. The records must show the name of the medical facility or physician and the date(s) of the treatment or hospitalization.
- attestations by an official of a church, union or other organization indicating your residence, dates of membership and attendance. The statement must include the organization's seal and be on the letterhead of the organization, if the entity has letterhead stationary.

- rent receipts, utility bills, or letters from companies showing the dates when you received service.
- school records (letters, report cards, etc.) from schools you or your children have attended in the United States which show the name of the school and periods of attendance.
- any other relevant document such as money order receipts, passport entries, insurance documents, birth certificates of children born in the United States, correspondence between you and another person or organization, automobile license receipts, deeds, mortgages, contracts to which you have been a party, insurance policies; etc.

Evidence requirements for Family Unity applicants of section 1504 of Pub. L. 106-554, the LIFE Act as amended, entry into the United States before December 1, 1988, and residence on that date. Such evidence may include but is not limited to:

- You must submit at least three documents that prove entry into the United States before December 1, 1988, and Service documents. Examples include, but are not limited to: a photocopy of the form I-94, Arrival-Departure Record; form I-862, Notice to Appear; form I-122, Notice to Applicant for Admission Detained for Hearing before an Immigration Judge; form I-221, Order to Show Cause; a photocopy of "other Service documents," including any application or petition for benefits under the Act filed by or on behalf of the applicant on or prior to December 1, 1988, or a fee receipt issued by the Service for such application or petition.
- Other government documentation issued by a Federal, State or local authority provided such other documentation bears the signature, seal, or other authenticating instrument of such authority, was dated at the time of issuance, and bears the date of issuance not later than November 30, 1998, when proving entry. Examples of documentation include: a State driver's license; a State identification card issued in lieu of a driver's license to a non-driver; a county or municipal hospital record inclusive of appropriate date; a public college or public school transcript inclusive of appropriate date; income tax records inclusive of appropriate date; property tax payment inclusive of appropriate date; private or religious school transcripts, which is registered with, or approved or licensed by appropriate State or local authorities or is accredited by the State or regional accrediting body or by the appropriate private school association, which were created prior to December 1, 1988 or on that date.

- Non-governmental documents that are inclusive of the appropriate dates, such as: employment records; pay stubs; W-2 forms; federal and/or state tax returns; letters from employers, or if you are self-employed, letters from banks and other firms with whom you have done business on this date, but your name and the name of the employer or interested organization must appear on the form or letter and must be in affidavit form, signed by the employer, under penalty of perjury, including dates of employment, home address at the time of employment and duties with the company; hospital or medical records showing treatment or hospitalization, showing name of the medical facility or physician and dates of the treatment; attestations by an official of a church, union or other organization indicating applicant's residence, dates of membership and attendance, including organization's seal and letterhead;
- Other relevant documents including, but not limited to: rent receipts, credit card statements, utility bills, school records, money orders, passport entries, insurance documents, birth certificates of children born in the United States, automobile license receipts, deeds, mortgages, and contracts to which applicant has been a party.
- **Document in a foreign language.** If you send us document in a foreign language, it must have a full English translation that the translator certifies as complete and correct. The translator must certify that he or she is competent to translate the foreign language into English.

Request for extension of family unity benefits.

Copies of the following documents are evidence that the required relationship exists and that you may be eligible to file an application for extension of benefits.

- **A copy, front and back, of the document issued by INS to your legalized spouse or parent (for example: I-551, Permanent Resident Card, N-550, Certificate of Naturalization, etc.).**
- If the legalized alien through whom family unity benefits were obtained is a lawful permanent resident or naturalized U.S. citizen, evidence that an I-130, Petition for Alien Relative, has been filed on your behalf.
- Evidence that you have been granted Family Unity benefits in the past.

- A signed statement reporting all trips you have made outside the United States since you were last granted Family Unity benefits. This statement must include the dates and reason for each absence. If you have not been outside the United States since your last I-817 was approved, provide a statement indicating you have not traveled abroad.
- Evidence that you have continuously resided in the United States since your last I-817 was approved.
- Fingerprints, if you were under the age of 14 years when your last I-817 was approved but are now 14 years of age or older, or if INS requests them.

LIFE Family unity applicants submit your application to:

**Immigration and Naturalization Service (INS)
P.O. Box 7219
Chicago, IL. 60680-7219**

Submit your application. You must mail your application package to the INS service center with jurisdiction over the place where you live.

- If you live in Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Puerto Rico, Rhode Island, Vermont, Virginia, West Virginia or the U. S. Virgin Islands, mail your application to:

**INS - Vermont Service Center
75 Lower Welden Street
St. Albans, VT 05479-0001**

- If you live in Arizona, California, Guam, Hawaii, or Nevada, mail your application to:

**INS - California Service Center
P.O. Box 10817
Laguna Niguel, CA 92607-1081**

- If you live in Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, New Mexico, North Carolina, Oklahoma, South Carolina, Tennessee, or Texas mail your application to:

**INS - Texas Service Center
P.O. Box 850965
Mesquite, TX 75185-0965**

- If you live anywhere else in the United States, mail your application to:

**INS - Nebraska Service Center
P.O. Box 87817
Lincoln, NE 68501-7817**

Service Processing Information

Our goal at INS is to process all applications fairly. The processing time will vary depending on the specific circumstances of each case. We may reject an incomplete application. However, you may send us another completed application later. We may ask for more information after accepting your application. We may deny your request for Family Unity benefits if you do not give us the requested information or do not go to a scheduled interview.

To request INS forms, call our toll-free forms line number **1-800-870-3676**. You may also get INS forms and information on immigration laws and regulations by telephoning our **National Customer Service Center (NCSC) at 1-800-375-5283** or from the INS internet website at www.ins.usdoj.gov.

If you change your address, you must fill out and give us a Form AR-11, Alien's Change of Address Card. Notification of changes in address are required by law.

Privacy Act Notice. INS will use the information and evidence requested on Form I-817 to determine your eligibility for Family Unity Program benefits. We may provide information from your application to other Government agencies.

Paperwork Reduction Act Notice. You are not required to respond to this form unless it displays a currently valid OMB control number. INS strives to create forms and instructions that are accurate, easy to understand, and impose the least possible burden on you to provide the information and evidence needed to process your application.

For this application, we estimate that it takes 30 minutes to learn about the law, form, and process. We estimate that it takes an estimated 2 hours to complete, assemble and file the application, including average travel time. The total preparation time is estimated at 2 hours and 30 minutes. If you have comments about this estimate or suggestions for simplifying this form, you can write to:

Immigration and Naturalization Service
425 "I" Street, N.W., Room 4034
Washington, D C. 20536

DO NOT MAIL YOUR COMPLETED APPLICATION TO THIS ADDRESS. Mail your application to the INS Service Center having jurisdiction over your residence.

Application Checklist

- Did you completely fill out and sign the form?
- Did you sign the I-765 EAD Signature Card?
- Did you attach all required evidence?
- Did you attach four (4) color photos?
- Did you attach a check or money order for \$120.00 plus \$25.00 if you are required to obtain fingerprints?

For your records, keep copies of your application and supporting documents.

Application for Family Unity Benefits

Print or type information requested. Use **BLACK** ink. Use **CAPITAL**

FOR INS USE ONLY

Part 1. Information about you. (Person requesting Family Unity benefits.)

Family Name (Last Name)

Given Name (First Name) Full Middle Name

INS A # Social Security # Date of Birth (Month/Day/Year)

Country of Birth Country of Citizenship Sex
 Male
 Female
Home Address:
Street Number and Name (include apartment number)

City State

Zip Daytime Phone (Area Code and Number)

Mailing Address: (if different from home address)
Street Number and Name/P.O. Box Number

Care Of (for use if you do not have your own mailing address)

City State Zip Code

FOR INS USE ONLY

Part 2. Basis for my application.

1. If you are applying for family unity benefits, select one and place a check in the box describing your relationship to a legalized alien or an alien who is eligible or applied for adjustment of status pursuant to the LIFE Act.

- A. I am the spouse of an alien who was legalized under section 245A of the INA and we have been married since at least May 5, 1988.
- B. I am the spouse of an alien who was legalized as a Special Agricultural Worker under section 210 of the INA and we have been married since at least December 1, 1988.
- C. As of May 5, 1988, I was the unmarried child under the age of 21 of an alien who was legalized under 245A of the INA. I am currently the child, son, or daughter of the same parent. That parent is currently either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before May 5, 1988, and who maintained such status until his or her naturalization.
- D. As of December 1, 1988, I was the unmarried child under the age of 21 of an alien who was legalized as a Special Agricultural Worker under section 210 of the INA. I am currently the child, son, or daughter of the same parent. That parent is either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before December 1, 1988, and who maintained such status until his or her naturalization.
- E. I am the spouse of a legalized alien who adjusted under section 202 of the Immigration Reform and Control Act of 1986 (Cuban/Haitian Adjustment) and we have been married since at least May 5, 1988.
- F. As of May 5, 1988, I was the unmarried child under the age of 21 of a legalized alien who adjusted under section 202 of the Immigration Reform and Control Act of 1986 (Cuban/Haitian Adjustment). I am currently the child, son, or daughter of the same parent. That parent is either a legalized alien or a naturalized U.S. citizen who was a legalized alien on or before May 5, 1988, and who maintained such status until his or her naturalization.

G. I am the spouse of an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the **LIFE** Act. I entered the United States before December 1, 1988, and was in the United States on that date.

H. I am the unmarried child of an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the **LIFE** Act. I entered the United States before December 1, 1988, and was in the United States on that date.

2. Select one and place a check in the box. I am requesting:

A. initial family unity benefits under section 301 of the IMMACT 90.

B. an extension of family unity benefits under section 301 of IMMACT 90.

C. initial family unity benefits under section 1504 of Public Law 106-554, the LIFE Act as amended.

Part 3. Additional Information. (Information about you, the applicant for Family Unity benefits.)

If you need additional space to answer 1 through 5, attach a separate sheet of paper

1. At the time of your last entry into the United States, you:

a. were inspected and admitted were inspected and paroled entered without inspection

b. Date of last arrival (Month/Day/Year) I-94, Arrival/Departure Document # Current or most recent immigration status Date status expires (Month/Day/Year) Date continuous U.S. residence began (Month/Day/Year)

<input type="text"/>				
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2. Give the U.S. address where you lived on May 5, 1988 (Sec. 245A/Cuban Haitian Adjustment) or December 1, 1988 (Sec. 210).

Street Number and Name (include apartment number)

City

State

Zip Code

<input type="text"/>	<input type="text"/>	<input type="text"/>
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3. Have you ever applied before for the Family Unity Program? Yes No

If "Yes," provide the following information:

Name under which you applied

City and State where application was filed

<input type="text"/>	<input type="text"/>
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Date filed (Month/Day/Year)

INS A#

INS action taken on application

Approved

Denied

4. If separate applications for the Family Unity Program are being submitted at this time for other relatives, give the following information.

Family Name (Last Name)	Given Name (First Name)	Relationship	INS A #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

5. List all other names you have used (including maiden name)

<input type="text"/>	<input type="text"/>
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Part 3. Additional Information (continuation). (Information about you, the applicant for Family Unity benefits)

If you need additional space to answer 1 through 5, attach a separate sheet of paper

6. Do you have or have you ever had:
- a. a communicable disease of public health significance (including chancroid, gonorrhea, granuloma inguinale, human immunodeficiency virus (HIV) infection, infectious leprosy, lymphogranuloma venereum, infectious stage syphilis, and active tuberculosis)? Yes No
 - b. a physical or mental disorder and behavior associated with the disorder which has posed or may pose a threat to the property, safety or welfare of yourself or others? Yes No
7. Have you ever:
- a. knowingly committed a crime for which you have not been arrested? Yes No
 - b. been convicted of a felony or three (3) or more misdemeanors in the United States? Yes No
 - c. been convicted of two (2) or more offenses for which the aggregate sentences were five (5) or more years of confinement? Yes No
 - d. been arrested, cited, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations? Yes No
 - e. been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action? Yes No
 - f. illicitly trafficked in any controlled substance or knowingly assisted, abetted or colluded with others in the illicit trafficking of any controlled substance? Yes No
 - g. committed a criminal offense in the United States and asserted immunity from prosecution? Yes No
8. Have you, at any time within the past three (3) years, engaged in the non-medical use of any drug listed in section 202 of the Controlled Substances Act (including, but not limited to, sedative, hypnotic, or anxiolytic substances[tranquilizers], amphetamines, cannabinoids, cocaine, hallucinogens, opioids, phencyclidine [PCP], and related substances)? Yes No
9. Have you, at any time within the past two (2) years, engaged in the use of any psychoactive substance not listed in section 202 of the Controlled Substance Act (including, but not limited to alcohol and inhalants) which resulted in behavior that has posed a threat to the property, safety or welfare of yourself or others or which behavior is likely to recur or to lead to other harmful behavior? Yes No
10. Have you ever committed an act of juvenile delinquency which if committed by an adult would be classified as follows: [If you are a LIFE Act applicant skip this question]
- a. a felony crime of violence that has an element the use or attempted use of physical force against another? Yes No
 - b. a felony offense that by its nature involves a substantial risk that physical force against another may be used in the course of committing the offense? Yes No
11. Do you intend to engage solely, principally, or incidentally in prostitution in the United States, or are you now or have you within the past 10 years, engaged in, procured, or received income from prostitution? Yes No
12. Have you been or do you intend to be involved in any commercial vice? Yes No
13. Have you ever practiced or do you intend to practice polygamy? Yes No
14. Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents, or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States, or any immigration benefit? Yes No
15. Have you ever falsely represented yourself to be a citizen of the United States for any purpose or benefit under the Immigration and Nationality Act or any Federal or State law? Yes No
16. Are you a former citizen of the United States who renounced your United States citizenship for the purpose of avoiding taxation by the United States? Yes No
17. Have you ever been an F-1 nonimmigrant student who violated status by attending a public elementary or secondary school in violation of immigration law? Yes No
18. Have you ever failed or refused to attend or remain in attendance at a hearing to determine your admissibility to or deportability from the United States? Yes No
19. Have you ever been identified by INS as having obtained transportation to the United States without the consent of the owner, charterer, master or person in charge of the vessel or aircraft through concealment on board, such vessel or aircraft on which you arrived? Yes No

Part 3. Additional Information (continuation). (Information about you, the applicant for Family Unity benefits)

If you need additional space to answer 1 through 5, attach a separate sheet of paper

20. Have you been ordered deported, excluded, or removed from the United States? Yes No
21. Have you ever departed the United States after having been unlawfully present for 180 days but less than 365 days? Yes No
22. Have you ever departed the United States after having been unlawfully present for 365 days or longer? Yes No
23. Have you ever knowingly encouraged, induced, assisted, abetted, or aided, anyone to enter the United States in violation of the law? Yes No
24. Were you a guardian required to accompany an individual certified as helpless who was found to be inadmissible to the United States? Yes No
25. Have you detained, retained, or withheld the custody of a U.S citizen child outside the United States from a person granted custody of such child by a U.S. court order? Yes No
26. Have you ever engaged in, conspired to engage in, or do you intend to engage solely, principally, or incidentally in:
- a. any activity to violate any U. S. law relating to espionage or sabotage? Yes No
 - b. any activity to violate or evade any law prohibiting the export from the United States of goods, technology, or sensitive information? Yes No
 - c. any other activity the purpose of which is in opposition to, or the control of, or overthrow of the government of the United States, by force, violence, or other unlawful means? Yes No
 - d. any other unlawful activity? Yes No
27. Have you:
- a. ever engaged in, conspired to engage in or do you intend to engage in a terrorist activity? Yes No
 - b. ever incited terrorist activity with intent to cause death or serious bodily harm? Yes No
 - c. ever been a representative of a terrorist organization or a member of an organization which you knew or or should have known is a terrorist organization? Yes No
28. Have you ever engaged in or do you intend to engage in any activity in the United States that would have potentially serious adverse foreign policy consequences for the United States? Yes No
29. Have you:
- a. ever been or are you now a member of the Communist or other totalitarian party? Yes No
 - b. ever engaged in genocide, or ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, national origin, membership in a particular social group, or political opinion? Yes No
30. During the periods of March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, did you ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion? Yes No
31. Have you ever left the United States to avoid being drafted into the U.S. Armed Forces? Yes No
32. Have you received public assistance from any source, including the U.S. government or any state, county, city, or other municipality; or are you likely to request public assistance in the future? Yes No
33. Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with the requirement? Yes No
34. Have you ever voted in violation of any Federal, State, or local constitutional provision, statute, ordinance, or regulation? Yes No

If you answered "Yes" to any of the above questions, provide a full explanation on a separate sheet of paper.

Part 4. Information about legalized alien or an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act.

1. Provide the following information about the legalized alien through whom you are claiming your eligibility.

Family Name (Last Name)		Given Name (First Name)		Full Middle Name	
<input type="text"/>		<input type="text"/>		<input type="text"/>	
INS A #	Class of Admission	Social Security #	Date of Birth (Month/Day/Year)	Sex	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	

Part 4. Information about legalized alien or an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act (continuation).

Home Address: Street Number and Name (include apartment number)

City State Zip Code Daytime Phone (Area Code and Number)

2. List all other names used (including maiden name)

Part 5. Complete only if legalized alien is your spouse or if your spouse is an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act .

1. Provide the following information about you and your spouse.

Number of times you have been married

Number of times your spouse has been married

2. Provide the following information about your current marriage:

Date of Marriage (Month/Day/Year)

Place of Marriage (City and State or Country)

Type of Ceremony: Religious Civil None

We are: Living together Not living together

Part 6. Complete only if you are the child of a legalized alien or the child of an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act.

1. If the legalized alien is your parent or if your parent is an alien who is eligible for adjustment pursuant to section 1104(b) of Pub. L. 106-553, the LIFE Act; please indicate how that parent is related to you:

biological mother.

biological father who was married to my mother when I was born.

biological father who was not married to my mother when I was born.

stepparent based on marriage to my parent which occurred before my 18th birthday.

adoptive parent and

a. the adoption occurred before my 16th birthday.

Yes No

b. my adoptive parent had legal custody of me for at least two years prior to May 5, 1988 or December 1, 1988, as appropriate.

Yes No

c. I lived with my adoptive parent for at least two years prior to May 5, 1988 or December 1, 1988, as appropriate.

Yes No

parent based on circumstances not described above. (Explain in detail on a separate sheet of paper.)

2. Give the following information about your present marital status:

Single Married Divorced Widowed

3. Give the following information if you are married, divorced or widowed:

Date of Marriage
(Month/Day/Year)

Place of Marriage
(City and State or Country)

If Divorced or Widowed, Date Marriage Ended
(Month/Day/Year)

Place Marriage Ended
(City and State or Country)

Type of Ceremony: Religious Civil None

We are: Living together Not living together

Part 7. Your signature.

I certify, under penalty of perjury under the laws of the United States, that this application and the evidence submitted with it is all true and correct.
I authorize the release of any information from my records which INS needs to determine eligibility for the benefit I am seeking.

Applicant's Signature

Date (Month/Day/Year)

Signature of Parent or Legal Guardian (If filed in behalf of a child under age 14)

Date (Month/Day/Year)

Part 8. Signature of person preparing form, if other than above.

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Preparer's Printed Name

Preparer's Signature

Preparer's Address

Date (Month/Day/Year)

Name of Business/Organization (if applicable)

Daytime Phone (Area Code and Number)

**MAKE SURE YOUR APPLICATION PACKAGE IS COMPLETE BEFORE FILING.
REFER TO THE LAST PAGE OF THE INSTRUCTIONS FOR AN APPLICATION CHECKLIST.**