

ATTACHMENT C

SUBJECT: Notice of Incomplete N-648 (Form N-648B)

Notice of Incomplete N-648

Medical Certification For Disability Exceptions

Applicant's Name _____

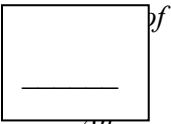
 A Number _____

For Official Use Only

NOTICE TO APPLICANT: The Form N-648, Medical Certification for Disability Exceptions that you have submitted is **incomplete**. Identified below in the boxes marked with an "X" is the information that your doctor needs to provide. Please return this letter to your doctor, along with the Form N-648, as soon as possible. Your doctor should complete the Form N-648 with the requested information, and you should return the completed N-648 as instructed by the Service. **NOTE:** If your doctor does not provide all requested information, your N-

NOTICE TO CERTIFYING DOCTOR: The Form N-648, Medical Certification for Disability Exceptions that you filled out on behalf of the above-named applicant is **incomplete**. The deficient information is identified below. Please read this Notice carefully, complete the Form N-648 with the requested information, and return the completed Form N-648 to the applicant. You may use additional sheets of paper to detail your responses if necessary. **NOTE:** If you do not provide all of the information requested below, in a clear and legible fashion

Physical And Mental Health Information: To qualify for a disability exception, the applicant must show that he or she suffers from a medically determinable disability or impairment or combination



of that results in functioning **so impaired** that it prevents him or her from learning or demonstrating knowledge of English and/or civics. The impairment must not be temporary (i.e., less than 12 months).

applicant will not qualify for the exception if the sole basis for the request is that he or she cannot learn or demonstrate knowledge of English and/or civics because of old age.

_____ Please provide a full and complete medical diagnosis of the applicant's disability or impairment, including, if applicable, the most recent DSM Code (Question #3 on the Form N-648). *Note: INS will not consider vague terms such as "organic brain syndrome" or "chronic brain syndrome" unless you identify the etiology.* Specific problem noted: _____

_____ Please explain how the disability or impairment prevents the applicant from learning or demonstrating knowledge of English and/or U.S. history and government (Question #3 of the Form N-648). Specific problem noted: _____

_____ Please provide your conclusion about whether the applicant is able to learn or demonstrate knowledge of English and/or U.S. history and government because of his or her condition (Question #3 on the Form N-648).

_____ Please state whether or not the applicant's condition resulted from the illegal use of drugs (Question #4 on the Form N-648).

_____ Please state whether or not the applicant's developmental disability first manifested itself before age 22 (Question #4 on the Form N-648).

_____ Please state whether the applicant's condition is temporary (less than 12 months) or permanent (Question #5 on the Form N-648).

_____ Other _____

Background Information: *You did not provide the requested background information or the background information was not legible.*

- _____ Please identify the date of your last examination of the applicant (Question #1 on the Form N-648).
- _____ Please identify if this was your first examination of the applicant and, if it was, the name of the regular attending doctor (Question #2 on the Form N-648).
- _____ Please identify your medical specialty or the qualifications and experience that permit you to make the assessment on the Form N-648 (Question #6 on the Form N-648).
- _____ Please sign under penalty of perjury the Form N-648, and identify the date of signing. *Note: You may not use a stamp in place of your original signature.*
- _____ Please type or print your last name, first name, and middle name on the bottom of page 2 of the Form N-648.
- _____ Please type or print your business address and telephone number on the bottom of page 2 of the Form N-648.
- _____ Please type or print your license number and licensing state on the bottom of page 2 of the Form N-648.
- _____ Other _____

• **The following are examples of incomplete responses to question # 3 --**

(a) The patient is a 75-year-old female who has hypertension and heart disease. She has suffered at least 2 heart attacks, once in 1996 and in 1997. Last year, she had a cerebral vascular accident (i.e. stroke) with paralysis on the left side. She is unable to learn English and basic U.S. history and civics. *(Note: The doctor failed to articulate how any of the conditions listed affect, for example, the patient's memory, ability to learn new tasks, ability to concentrate, or ability to perform basic mental activities, and therefore failed to show that the applicant's condition has so impaired her functioning that she is unable to learn or demonstrate knowledge of English and/or U.S. history and government.)*

(b) The patient suffers from Down's Syndrome. He should be exempted from the English language and U.S. civics requirements for civics. *(Note: The certifying doctor failed to identify the DSM Code, explain how the condition affects the applicant's ability to learn, and give an ultimate opinion on whether the condition diagnosed prevents the applicant from learning or demonstrating knowledge of English and/or civics.)*

• **The following are examples of complete responses to question # 3 --**

(a) The patient is a 75-year-old female who has hypertension and heart disease. She has suffered at least 2 heart attacks, once in 1996 and in 1997. Last year, she had a cerebral vascular accident (i.e. stroke) with paralysis on the left side. The patient's stroke has left her with severe and irreversible neurological damage. Because of the widespread damage to the brain tissue, she has suffered markedly decreased cerebral function and is incapable of remembering, articulating, or learning. In my professional medical opinion, the patient is unable to learn basic English and U.S. history and civics because of her mental and physical condition. *(Note: The certifying doctor identified the diagnosis, explained the effect the condition has on the applicant's ability to learn, and attested that the diagnosed condition prevents the applicant from learning or demonstrating knowledge of English and civics.)*

(b) The patient suffers from Down's Syndrome, DSM Code 318.1, which is a global impairment that affects the patient's cognition, language, and motor skills. Because of the patient's global impairment, he cannot learn new skills and is not capable of reasoning. His memory is deficient, and he is only capable of performing simple daily activities. In my professional medical opinion, the patient is incapable of learning a new language (even basic new words of a new language) and U.S. history and civics because of his mental disability. *(Note: The certifying doctor provided the mental impairment, including the DSM Code, an explanation for how the condition affects the applicant's ability to learn, and a conclusion that the impairment prevents the applicant from learning or demonstrating knowledge of English and civics.)*