

TYPE OR PRINT ALL ANSWERS CLEARLY

U.S. DEPARTMENT OF STATE



APPLICATION TO DETERMINE RETURNING RESIDENT STATUS

INSTRUCTIONS: This is an application for Special Immigrant Status under Section 101(a)(27)(A) of the Immigration and Nationality Act, for lawfully admitted permanent residents who are returning from a temporary visit abroad. To qualify you must submit with this application evidence that:

- (1) You had the status of an alien lawfully admitted for permanent residence at the time of departure from the United States;
- (2) You departed from the United States with the intention of returning and you have not abandoned this intention; and
- (3) You are returning to the United States from a temporary visit abroad and, if the stay abroad was protracted, this was caused by reasons beyond your control and for which you are not responsible.

Applicants must submit evidence with this application to support the above requirements, including proof of lawful permanent residence. (Examples: Form I-151, I-551, Reentry Permit, etc.), dates of travel abroad, (Example: airline tickets, passport stamps, etc.), proof of ties to the United States and intent to return, (Example: tax returns, and evidence of economic, family and social ties to the United States), and proof a protracted stay was for reasons beyond the applicant's control., (Examples: medical incapacitation, employment with a U.S. company, accompanying a U.S. citizen spouse, etc). All documents will be returned to you.

1. NAME (Last name) (First name) (Middle name)

2. OTHER NAMES USED, ALIASES (If married woman, give maiden name)

3. CURRENT HOME ADDRESS AND TELEPHONE NUMBER

4. PLACE OF BIRTH (City, Province, Country)

5. DATE OF BIRTH (Month, Day, Year)

6. MARITAL STATUS

- Married Single Widowed Divorced

If married, information about spouse -

- a. Name: _____
- b. Address: _____
- c. Place of Birth: _____
- d. Date of Birth: _____
- e. U.S. Residence Status, if any (U.S. citizen, LPR, etc.): _____

7. LIST BELOW ALL CLOSE FAMILY MEMBERS IN THE UNITED STATES

<u>FULL NAME</u>	<u>RELATIONSHIP</u>	<u>RESIDENT STATUS</u>	<u>PLACE OF RESIDENCE</u>

8. PREVIOUS IMMIGRATION RECORD

- a. INS "A" Number: _____
- b. Immigration Category: _____
- c. Previous Immigrant Visa: _____
- d. Adjustment of Status _____
- DATE OF ISSUE PLACE OF ISSUE DATE OF ADJUSTMENT OF STATUS WITH I.N.S. (IF ANY) PLACE OF ADJUSTMENT OF STATUS WITH I.N.S. (IF ANY)
- e. Initial Entry into the United States: _____
- f. Last Entry into the United States: _____
- DATE OF ENTRY PORT OF ENTRY DATE OF ENTRY PORT OF ENTRY

9. MOST RECENT DEPARTURE FROM UNITED STATES

Date of Departure: _____ Destination: _____
Reason: _____

10. WHAT CONTINUING TIES HAVE YOU MAINTAINED WITH THE UNITED STATES? WHAT EFFORTS HAVE YOU MADE TO AVOID ABANDONING YOUR PERMANENT RESIDENT STATUS IN THE UNITED STATES?

11. REASONS FOR NOT RETURNING TO THE UNITED STATES UNTIL TIME OF THIS APPLICATION

12. LIST BELOW ALL PERIODS THAT YOU HAVE LIVED ABROAD FOR SIX MONTHS OR LONGER SINCE YOUR INITIAL ENTRY INTO THE UNITED STATES AS A PERMANENT RESIDENT
DATES (FROM - TO) COUNTRY

13. HAVE YOU BEEN EMPLOYED ABROAD? YES NO
If "Yes" complete the following:
NAME OF EMPLOYER ADDRESS FROM-TO

14. I WISH TO RETURN TO THE UNITED STATES ON OR ABOUT _____
(Date)

15. I swear or affirm that all statements which appear on this application are true and complete to the best of my knowledge and belief. I understand that any false or misleading statement or willful concealment of a material fact may subject me to permanent exclusion from the United States. I understand that if this application for special immigrant status is approved, I must apply for an immigrant visa within six months from the date of approval.

Signature of Applicant Date

DO NOT WRITE IN THIS SPACE - OFFICIAL USE ONLY

Approved 101(a)(27)(A) Disapproved
Reason:

Signature of Consular Officer Date At: _____ Post

REVIEWED: Concur Do NOT Concur

Signature of Reviewing Officer Date