USCIS
Form G-1566
OMB No.
1615-0156
Expires
~~02/28/2026~~

Request for a Certificate of Non-Existence

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

► START HERE - Type or print in black ink. You may request information for one subject of record per form

Part 1. Certificate Request

1. Certificate Type (select only one):

☐ Certificate of Non-Existence of Naturalization

☐ Certificate of Non-Existence of any U.S. Citizenship and Immigration Services (USCIS) records

☐ Other (provide an explanation about the type of records about which you seek a Certificate of Non-Existence):

2. Number of Certificates Requested: ►

Part 2. Information About Subject of Record

Provide the following information about the person for whom you are requesting a Certificate of Non-Existence.

1. Name

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

2. Other Names Used (including maiden name, aliases, and nicknames). Providing other names or alternate spellings of the subject of record's name may assist USCIS's search for relevant records.

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

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

   A. Is this an approximate date? ☐ Yes ☐ No

   B. If applicable, provide any additional dates of birth the subject of record may have used. This information may assist our search for relevant records.

   Date 1 (mm/dd/yyyy)   Date 2 (mm/dd/yyyy)

4. Country of Birth

5. A. Date of Entry into the United States (mm/dd/yyyy)

   B. Is this an approximate date? ☐ Yes ☐ No

6. Provide any Alien Registration Numbers (A-Number) that may be associated with the subject of record. An A-Number may also be called a USCIS Number.

   ► A-

7. Provide any other identifying or reference numbers found on documents issued by USCIS or the former Immigration and Naturalization Service (INS).

Part 2. Information About Subject of Record (continued)

8. Spouse's Name(s):

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

9. Children's Name(s):

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

Part 3. Requestor Information

1. Requestor's Full Name

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

2. Email Address:

3. Mailing Address

Street Number and Name	Apt. Ste. Flr.	Number
	☐ ☐ ☐	

City or Town	State	ZIP Code

Province	Postal Code	Country

4. Is a self-addressed, prepaid return envelope submitted with your Form G-1566?

NOTE: USCIS will send Certificates to an international address only if a prepaid envelope with sufficient postage for international shipping is submitted with Form G-1566.

☐ Yes, a return envelope is included

☐ No, a return envelope is not included

Part 4. Verification of Identity and Subject of Record Consent

- If the Subject of Record named in Part 1. is alive, they must sign in either Item Number 1. or 2.

- If you are both the Subject of Record and the requestor, you must sign in either Item Number 1. or 2.

- If the Subject of Record was born less than 100 years ago and is deceased, you must attach an obituary, death certificate, or other proof of death. The requestor named in Part 3. must provide a signature in Item Number 8.

- If the Subject of Record listed in Part 2. was born 100 years ago or more and is deceased, proof of death is not required. The requestor named in Part 3. must provide a signature in Item Number 8.

Part 4. Verification of Identity and Subject of Consent (continued)

Declaration Under Penalty of Perjury

By my signature, I consent to USCIS providing a Certificate of Non-Existence or a response to the requestor named in Part 3. I certify, swear, or affirm, under penalty of perjury under the laws of the United States of America, that the information in this request is complete, true, and correct.

1. Signature

   ➡

   Date of Signature (mm/dd/yyyy)

Notarized Affidavit of Identity

IMPORTANT: Do NOT sign and date below until the notary public provides instructions to you.

By my signature, I consent to USCIS providing a Certificate of Non-Existence or a response to the requestor named in Part 3.

2. Signature

   Date of Signature (mm/dd/yyyy)

3. Subscribed and sworn to before me on this day of [ ] in the year [ ] .

4. Daytime Telephone Number   Daytime Telephone Number

5. Signature of Notary   6. My Commission Expires on (mm/dd/yyyy)

Subject of Record Deceased

7. [ ] Subject of Record is deceased

Signature of Requestor

By my signature, I certify that I understand all of the information contained in this request is complete, true, and correct.

8. Signature   Date of Signature (mm/dd/yyyy)

If you need extra space to provide any additional information within this request, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this request or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.

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

2. A-Number (if any)   ▶ A-

3. A.   Page Number   B.   Part Number   C.   Item Number

   D.

4. A.   Page Number   B.   Part Number   C.   Item Number

   D.

5. A.   Page Number   B.   Part Number   C.   Item Number

   D.

6. A.   Page Number   B.   Part Number   C.   Item Number

   D.

7. A.   Page Number   B.   Part Number   C.   Item Number

   D.