

## Petition for Qualifying Family Member of a U-1 Nonimmigrant

**Department of Homeland Security** 

U.S. Citizenship and Immigration Services

USCIS Form I-929 OMB No. 1615-0106 Expires 02/28/2027

FOR USCIS USE ONLY								
Bene. A-file Yes reviewed No	Action Block				Bar Code (USCIS Use only)			
U-1 A-file Yes reviewed No								
Bene. filed I-485								
Yes No					Remarks			
U-1 adjusted								
Yes No								
U-1 I-485 pending								
Yes No								
START HERE T	YPE OR PRI	NT LEGI	BLY USING BI	LACK INF	<b>K</b>			
I am filing for my: (	(Select one)							
Spouse		Chile	d: Biologi	cal Child	Parent: B	Biological Parent		
			Stepchi	ld		tepparent		
			Adopted	d Child	P	arent who adopted me		
Part 1. Informat	ion About Yo	ou			Part 2. Information About Y	Your Alien Relative		
Las	st Name (Fami	ly Name)			Last Name (Fam	uily Name)		
First Name (Given Name)				First Name (Giv	ren Name)			
Middle Name				Middle Na	ame			
Current Address (USPS ZIP Code Lookup)				Current Address				
Street Number and Name Apt. Number			Street Number and Nan	ne Apt. Number				
City		State	Zip Code		City	State/Province		
					Country	Postal/Zip Code		
Safe Mailing Address If Other Than Above			1	Mailing Address If Ot	her Than Above			
	mber and Nam		Apt. Number					
Street iva	moer and ream		7 Apr. Trumoer					
City		Stata	Zin Codo					
City		State	Zip Code					
D-4 CT	Diseth		Number		Data of Divid	A N.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Date of I	OITUN	A-	Number		Date of Birth	A-Number		

Part 1. Information About	You (Cont'd)	Part 2. Information About Y	<b>Tour Alien Relative</b> (Cont'd)
Country of Birth	Social Security Number	Country of Birth	Social Security Number
Country of Citizens	ship/Nationality	Country of Citizer	ship/Nationality
Gender: (Select one) Mal	le Female	Gender: (Select one) Ma	ale Female
If you ever used other names,	provide them below:	If alien relative ever used other	r names, provide them below
Last Name (Family Name)	First Name (Given Name)	Last Name (Family Name)	First Name (Given Name)
Middle Name		Middle Name	<u> </u>
Last Name (Family Name)	First Name (Given Name)	Last Name (Family Name)	First Name (Given Name)
Middle Name		Middle Name	
Last Name (Family Name)	First Name (Given Name)	Last Name (Family Name)	First Name (Given Name)
Middle Name		Middle Name	<u> </u> 
Marital Status: (Select one)		Marital Status: (Select one)	
☐ Single (Never Married) ☐ Divorced	☐ Married ☐ Widowed	☐ Single (Never Married) ☐ Divorced	☐ Married ☐ Widowed
Spouse's Name:		Spouse's Name:	
Last Name (Family Name)	First Name (Given Name)	Last Name (Family Name)	First Name (Given Name)
Middle Name		Middle Name	
Place of M	□ Iarriage	Place of M	 ⁄Iarriage
		L	

Form I-929 Edition 04/01/24 Page 2 of 7

Part 1. Information About	You (Cont'd)	Part 2. Informa
Number of marriages including	current marriage:	Number of marr
List any previous marriages beg recent. If you need more space, of paper.	_	List any previou recent. If you no of paper.
Prior Spouse's Name:		Prior Spouse's N
Last Name (Family Name)	First Name (Given Name)	Last Name (F
Middle Name	Date of Marriage	Middle
Place of Ma	arriage	
Date of Termination Plan	ace of Termination	Date of Termina
Reason for Termination:		Reason for Term
Divorce Death Other	Annulment	Divorce Other
Prior Spouse's Name:		Prior Spouse's N
Last Name (Family Name)	First Name (Given Name)	Last Name (F
Middle Name	Date of Marriage	Middle
Place of Ma	arriage	
Date of Termination Plan	ace of Termination	Date of Termina
Reason for Termination:		Reason for Term
Divorce Death C	Annulment	☐ Divorce ☐ Other

Part 2. Information About	Your Alien Relative (Cont'd)
Number of marriages including	ng current marriage:
List any previous marriages b recent. If you need more spac of paper.	
Prior Spouse's Name:	
Last Name (Family Name)	First Name (Given Name)
Middle Name	Date of Marriage
Place of	Marriage
1 1400 01	Traininge
Date of Termination	Place of Termination
Other Prior Spouse's Name:	
-	First Name (Given Name)
Middle Name	Date of Marriage
Place of	Marriage
Date of Termination	Place of Termination
Reason for Termination:	
☐ Divorce ☐ Death ☐ Other	Annulment

Form I-929 Edition 04/01/24 Page 3 of 7

Part 1. Information About You (Cont'd)				Part 2. Information	n About Yo	ur Alien Relative (Cont'd)	
Prior Spouse's Name:				Prior Spouse's Name	e:		
Last Name (Family Name)	First Name (	Given Name)		Last Name (Fami	lly Name)	First Name (Given Name)	
Middle Name	Date of	Marriage		Middle Na	me	Date of Marriage	
Place of Ma	 arriage			Place of Marriage			
Date of Termination Pla	ace of Termin	ation		Date of Termination	n Pla	ace of Termination	
Reason for Termination:				Reason for Terminat	tion:		
Divorce Death Other	Annulment			☐ Divorce ☐ Death ☐ Annulment ☐ Other			
Check o	one:			Complete if you	ır relative i	is in the United States	
I am a Lawful Permanent l	Resident			Date of Admission Place of Admission			
I obtained my Lawful Permanent Residence on:							
My Form I-485 is currently	y pending			Class of Admission Date Authorized to Stay			
Receipt	Number						
Part 3. Information About Y	Your Alien	Relative's Chi	ldren				
Last Name (Family Nam	ne)	First	Name (Given Name) Middle Name			Middle Name	
Date of Birth	Place of I	Birth		Biological Child	Stepcl	nild Adopted Child	
			G	ender: (Select one)	Male Male	Female	
Street Number and	d Name	Apt	. Numbe	r City	7	State/Province	
Country Postal/Zip			Code	A-Number		Country of Birth	
Name of Mother							
Last Name (Family Name) First			Name (C	Given Name)	1	Middle Name	
Name of Eather							
Name of Father  Last Name (Family Name) First			Name (C	Given Name)		Middle Name	
2337 1 10000 (1 0000) 11000	,	1 1131	( C				
		L					

Form I-929 Edition 04/01/24 Page 4 of 7

Part 3. Information About Your Alien Relative's Children (Cont'd)								
Last Name (Family Name)		First Name (Given Name)			Middle Name			
Date of Birth	Place of Birth		I	Biological Child	Stepchild Adopted Child			
			Gend	ler: (Select one)	Male	Female		
Street Number and Na	me	Apt. Num	ber	City		State/Province		
Country	Posta	al/Zip Code		A-Number	(	Country of Birth		
Name of Mother								
Last Name (Family Name)		First Name	(Give	n Name)	Middle Name			
Name of Father								
Last Name (Family Name)		First Name	(Give	n Name)	Middle Name			
Last Name (Family Name)		First Name	(Give			Middle Name		
Last Name (Family Name)		THSt Name	(GIVE	ii ivaille)		Widdle Name		
Date of Birth	Place of Birth			Biological Child	Stepchi	ld Adopted Child		
			Gend	ler: (Select one)	Male	Female		
Street Number and Na	me	Apt. Num	ber	City		State/Province		
Country	Posta	al/Zip Code		A-Number	(	Country of Birth		
Name of Mother		First Name	(Civo	n Nama)		Middle Name		
Last Name (Family Name)		FIRST Name	(Give	ii ivaille)		Middle Name		
Name of Father					J [			
Last Name (Family Name)		First Name (Given Name)			Middle Name			
Last Name (Family Name)		First Name	(Give	n Name)		Middle Name		
Zastiane (raminy rame)		_ 1150 1 (41110	(3176					
Date of Birth	Place of Birth		H	Biological Child	Stepchi	ld Adopted Child		
			Gend	ler: (Select one)	Male	Female		

Form I-929 Edition 04/01/24 Page 5 of 7

Part 3. Information About Your Alien Relative's Children (Cont'd)							
Street Number and Name		Apt. Number	City	y	State/Province		
Country	Posta	al/Zip Code	A-Number	7	Country of Birth		
Name of Mother		E' (N) (G'	<b>3</b> .1		AC 1 II AT		
Last Name (Family Name)		First Name (Gi	ven Name)	7	Middle Name		
Name of Father							
Last Name (Family Name)		First Name (Gi	ven Name)		Middle Name		
Zust France (Family France)		That I tallie (GI	ven rame)		Windare Ivanie		
Last Name (Family Name)		First Name (Gi	ven Name)	Middle Name			
Date of Birth Place of B	irth		Biological Child	Stepch	ild Adopted Child		
		Ge	ender: (Select one)	Male	Female		
Street Number and Name		Apt. Number	City	V	State/Province		
		Tip with warmen		)			
Country	Posta	ıl/Zip Code	A-Number		Country of Birth		
Name of Mother							
Last Name (Family Name)		First Name (Gi	ven Name)		Middle Name		
Name of Father							
Last Name (Family Name)		First Name (Gi	ven Name)	Middle Name			
Name and address of your alien relative in the language written in the country where he/she currently resides.							
Last Name (Family Name)		First Name (Gi	ven Name)		Middle Name		
Lust Paine (Fainity Paine)		That rame (or	ven runie)		Tyriddio Tydric		
C/O: (In Care Of)			Street Number and N	J L Jame	Apt. Number		
		-					
City/State or Province			Country		Postal/Zip Code		

Form I-929 Edition 04/01/24 Page 6 of 7

Part 4. Processing Information								
1. Select one:								
a.  The person named in <b>Part 2</b> is now in the Ur	nited States.							
b.   The person named in Part 2 is now outside the United States. (Indicate below at which U.S. Embassy or consulate your relative will apply for a visa.)								
U.S. Embassy or consulate at:								
	City and Country							
2. Is the person named in Part 2 or has this person eve	er been in deportation or removal proceedings in the United	d States?						
a. No								
b. Yes (Indicate when and where):								
1 es (indicate when and where).								
Part 5. Signature								
I certify, or if outside the United States, I swear or affirm, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it, is all true and correct. I authorize the release of any information from my record that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking.								
Signature (sign in ink)	Print Your Full Name	Date						
Part 6. Preparer's Information, If Other Than P								
I declare that I prepared this petition at the request of the a	above person, and it is based on all the information that I have	ave knowledge.						
Signature (sign in ink)  Print Your Full Name  Date								
Firm Name	m Name Street Number and Name Suite N							
City/State or Province	rovince Postal/Zip Code Telephone Nur							

Form I-929 Edition 04/01/24 Page 7 of 7