

Sponsor's Notice of Change of Address

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-865

	Returned	Resubmitted	Remarks	Action Block						
Fo USC Us On	Date (mm/dd/yyyy)	Date (mm/dd/yyyy)								
	Date (mm/dd/yyyy)	Date (mm/dd/yyyy)		CSID Number:						
▶ S	► START HERE - Type or print in black ink.									
Par	Part 1. Information About You (Sponsor) Your New Mailing Address									
You	r Full Name		6.a. In Care Of	6.a. In Care Of Name (if any)						
1.a. 1.b.	Family Name (Last Name) Given Name (First Name)		6.b. Street Numb and Name 6.c. Apt.	over Ste. Flr.						
1.c.	Middle Name		6.d. City or Tow	6.d. City or Town						
Oth	er Information		6.e. State	6.f. ZIP Code						
2.	Date of Birth (mm/dd/yyyy)		6.g. Province							
You	r New Physical Address	5	6.h. Postal Code	6.h. Postal Code						
3.a.	Street Number		6.i. Country	6.i. Country						
3.b.	and Name Apt. Ste. Flr									
3.c.	City or Town		7. Effective D	Effective Date of Change of Address (mm/dd/yyyy)						
	State 3.e. ZIP C	lada								
	Province Province		Part 2. Infor Immigrants	mation About the Sponsored						
3.g.	Postal Code			sted information on the persons you are						
3.h.	Country		sponsoring.	auout 1						
			Sponsored Immi 1.a. Family Nan							
4.	Effective Date of Change of	Address (mm/dd/yyyy)	(Last Name 1.b. Given Name							
5.	Is your new physical address mailing address?	<u> </u>	(First Name No 1.c. Middle Nan							
	If you answered "No" to Iter new mailing address in Item		2. Alien Regis	tration Number (A-Number) (if any) • A-						

Part 2. Information About the Sponsored Immigrants (continued)	1.b. The interpreter named in Part 4. has also read to me every question and instruction on this notice, as well as my answer to every question, in				
Sponsored Immigrant 2	,				
3.a. Family Name (Last Name)	a language in which I am fluent. I understand every question and instruction on this notice as translated to				
3.b. Given Name (First Name)	me by my interpreter, and have provided complete, true, and correct responses in the language indicated above.				
3.c. Middle Name	2. I have requested the services of and consented to				
4. A-Number (if any) ► A-	who is is is not an attorney or a accredited representative, preparing this notice for me.				
Sponsored Immigrant 3					
5.a. Family Name (Last Name)	Sponsor's Contact Information				
5.b. Given Name (First Name)	3. Sponsor's Daytime Telephone Number				
5.c. Middle Name	4. Sponsor's Mobile Telephone Number (if any)				
6. A-Number (if any)					
► A-	5. Sponsor's Email Address (if any)				
Sponsored Immigrant 4					
7.a. Family Name (Last Name)	Sponsor's Certification				
7.b. Given Name (First Name)	Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand				
7.c. Middle Name	that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of				
8. A-Number (if any) • A-	any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.				
NOTE: If you are sponsoring more than four persons, use the space provided in Part 6. Additional Information to provide the information requested for each additional individual.	I furthermore authorize release of information contained in this notice, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.				
Part 3. Sponsor's Statement, Contact Information, Certification, and Signature	I certify, under penalty of perjury, that the information in my notice and any document submitted with my notice were provided by me and are complete, true, and correct.				
NOTE: Read the information on penalties in the Penalties section of the Form I-865 Instructions before completing this part.	Sponsor's Signature				
	6.a. Sponsor's Signature				
Sponsor's Statement	→				
NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.	6.b. Date of Signature (mm/dd/yyyy)				
1.a. I can read and understand English, and have read and understand every question and instruction on this notice, as well as my answer to every question.	NOTE TO ALL SPONSORS: If you do not completely fill out this notice or fail to submit required documents listed in the Instructions, USCIS may reject your notice.				

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Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Int	erpreter's Full Name							
1.a.	Interpreter's Family Name (Last Name)							
1.b.	Interpreter's Given Name (First Name)							
2.	Interpreter's Business or Organization Name (if any)							
Inte	erpreter's Mailing Address							
3.a.	Street Number and Name							
3.b.	Apt Ste Flr							
3.c.	City or Town							
3.d.	State 3.e. ZIP Code							
3.f.	Province							
3.g.	Postal Code							
3.h.	Country							
Inte	erpreter's Contact Information							
l.	Interpreter's Daytime Telephone Number							
5.	Interpreter's Email Address (if any)							
Inte	erpreter's Certification							
I cer	tify that:							
	fluent in English and his the same language provided in Part 3., Item Number,							
	re read to this sponsor every question and instruction on notice, as well as the answer to every question, in the							

language provided in Part 3., Item Number 1.b.; and

The sponsor has informed me that he or she understands every instruction and question on the notice, as well as the answer to every question, and the sponsor verified the accuracy of every answer.

Interpreter's Signature								
	•							
6.a.	Interpreter's Signature							
6.b.	Date of Signature (mm/dd/yyyy)							
ъ								
	rt 5. Contact Information, Statement, rtification, and Signature of the Person							
	eparing this Notice, If Other Than the Sponsor							
Prov	ide the following information about the preparer.							
Pre	parer's Full Name							
1.a.	Preparer's Family Name (Last Name)							
1.b.	Preparer's Given Name (First Name)							
2.	Preparer's Business or Organization Name (if any)							
Preparer's Mailing Address								
3.a.	Street Number and Name							
3.b.	Apt Ste Flr							
3.c.	City or Town							
3.d.	State 3.e. ZIP Code							
3.f.	Province							
3.g.	Postal Code							
3.h.	Country							
Preparer's Contact Information								
4.	Preparer's Daytime Telephone Number							
-	I a sylva a sala							
5.	Preparer's Fax Number							

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6.

Preparer's Email Address (if any)

Part 5. Contact Information, Statement, Certification, and Signature of the Person Preparing this Notice, If Other Than the Sponsor (continued)

Preparer's Statement							
7.a.		I am not an attorney or accredited representative but have prepared this notice on behalf of the sponsor and with the sponsor's consent.					
7.b.		I am an attorney or accredited representative and my representation of the sponsor in this case extends does not extend beyond the preparation of this notice.					
		NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this notice, you must submit a completed Form G-28, Notice of Entry					

of Appearance as Attorney or Accredited

Representative, with this notice.

Preparer's Certification

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this notice on behalf of, at the request of, and with the express consent of the sponsor. I completed this notice based only on responses the sponsor provided to me. After completing the notice, I reviewed it and all of the sponsor's responses with the sponsor, who agreed with every answer on the notice. If the sponsor supplied additional information concerning a question on the notice, I recorded it on the notice.

Pre	Preparer's Signature							
8.a.	Preparer's Signature							
8.b.	Date of Signature (mm/dd/yyyy)							

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Par	t 6. Additio	nal In	formation			4.a.	Page Number	4.b.	Part Number	4.c.	Item Number
within than compaper Page your 1.a.	n this notice, us what is provide olete and file wi r. Include your Number, Part answer refers; a Family Name (Last Name) Given Name (First Name)	se the spd, you in the this in name at Numband sign	rovide any addipace below. If may make copie notice or attach at the top of each oer, and Item Nor and date each	you need as of the same a separate the sheet t	ed more space is page to rate sheet of ; indicate the	4.d.					
1.c.	Middle Name										
2.a.	Page Number	2.b.	Part Number	2.c.	Item Number						
2.d.						5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
						5.d.					
3.a.	Page Number	3.b.	Part Number	3.c.	Item Number						
3.d.						6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
						6.d.					

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