

Form Packet GC100S
"Adjustment of Status (AOS) - Application for
Dependent Spouse"
Please type or print all information legibly

The processing and filing fee(s) will be paid by:

___ **My employer** - (Indicate name and address of employer / contact):

___ **Dependents over 14-How many?** _____

___ **Dependents under 14 - How many?** _____

___ **I-485** - Adjustment of status

___ **EAD** - Application for Employment Authorization Document

___ **AP** - Application for Travel Document



ACCEPTED

IF PAYING FULL AMOUNT BY CREDIT CARD:

___ Visa ___ MasterCard ___ American Express ___ Discover

Card # _____ Exp. Date: _____

Name of Card Holder: _____

Amount: _____

Principal Applicant's Name: _____

Date: _____

Occupation: _____

Nationality: _____

NOTE: ALL INFORMATION REQUESTED BELOW
PERTAUSCIS TO DEPENDENT SPOUSE

PART I

Biographic information about your spouse: ___Husband ___Wife

SECTION A:

Family Name: _____

For Wife, give Maiden
Name: _____

Given Name: _____ Middle Name: _____

Other names used (include maiden name) _____

Telephone numbers:
Daytime/Work: _____ Evening/Home: _____

Available Fax #: _____ Email address: _____

Current
Address: _____

Birthdate (Month / Day / Year): _____ Date of Marriage: _____

Place of Marriage (City, Province or State, Country): _____

Country of Birth (Nationality): _____

Country of Citizenship (if different than Country of Birth): _____

Spouse Birthplace:
City/Town/Village - _____

State/Province - _____

Spouse "Home Country" address:

Alien # (if known): _____ Spouse applying with you? ___Yes ___No

Spouse's U.S. Social Security Number, if any: _____

Information about Spouse's Father --

Family Name: _____
First (Given) Name: _____
Date of Birth: _____
City and Country of Birth: _____
City and Country of current residence (if deceased, so state): _____

Information about Spouse's Mother --

Family Name currently: _____
Family Name (BEFORE marriage): _____
First (Given) Name: _____
Date of Birth: _____
City and Country of Birth: _____
City and Country of current residence (if deceased, so state): _____

List your present and past membership in or affiliation with any professional organization and every political organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other place since your 16th birthday. Include any foreign military service in this part. If none, write "none". Include the name of organization, location, dates of membership from and to, and the nature of the organization. If additional space is needed, use separate paper:

PART II

Information about your Spouse's immigration status.

SECTION A:

Give your spouse's name **exactly** how it appears on their Arrival/Departure Record (I-94 Card):

Has an I-140 Petition for Immigrant Worker ever been filed on your spouse's behalf?

Yes No

If "yes", by whom / company name? _____

Date of Filing: _____ Was it approved? Yes No

Priority Date: _____

Alien # ("A#"), if known: _____

Has your spouse ever before applied for Adjustment of Status in the U.S.?

Yes No

If "yes", give date and place of filing and final disposition: _____

Current USCIS (non-immigrant) classification -- Circle one: **H-4** / **TD** / **Other:**

Nonimmigrant Visa Number (found in your spouse's passport at the bottom right of the visa stamp, usually a 7 or 8 digit number, in red ink):

U.S. Embassy / Consulate where most recent Visa was issued (City / Country): _____

Date Visa was issued (Month / Day / Year): _____

Most recent I-94 Card # (11 digit number usually at the top of the card):

Most recent I-94 Card Expires on (date): _____

Date of Very First Arrival into the U.S.A.: _____

Date of Last Arrival into the U.S. (Month/Day/Year): _____

Place of last entry into the U.S. (City/State): _____

In what status did your spouse last enter? (Visitor, Student, exchange alien, crewman, temporary worker, dependent of temporary worker, without inspection, etc.):

Was your spouse inspected by a U.S. Immigration Officer at the Port of Entry?

Yes No

Has your spouse ever before applied for employment authorization (filed a form I-765) from USCIS? Yes No

If "yes", Which USCIS office? _____

Date: _____

Results: Granted Denied - Attach all

SECTION B:

Answering the following questions will not affect your Spouse's Adjustment of Status processing, however, the answers will help us to determine which forms to file and what filing fees (or penalty fees) to include -- please answer the questions carefully:

Has your spouse ever been employed in the U.S. since 01/01/77 without USCIS authorization?

Yes No

Has your spouse ever been on an H-1B visa? Yes No

If "yes", when was the visa status changed to H-4 status:

Is your spouse now in lawful immigration status? Yes No

Has your spouse always maintained lawful immigration status while in the U.S. after 11/05/86?

Yes No

Your spouse and children

(use separate sheet of paper, if necessary):

Family name:_____ Given name:_____ Middle initial:_____

Date of birth:_____ Country of birth:_____ Relationship:_____

A#:_____ Applying with you on this application?_____

Family name:_____ Given name:_____ Middle initial:_____

Date of birth:_____ Country of birth:_____ Relationship:_____

A#:_____ Applying with you on this application?_____

Family name:_____ Given name:_____ Middle initial:_____

Date of birth:_____ Country of birth:_____ Relationship:_____

A#:_____ Applying with you on this application?_____

PART IV

Information about former spouse(s) -- if none, so state:

Family

Name: _____

For Wife, give Maiden

Name: _____

Given Name: _____

Middle Initial: _____ Date of Birth: _____

City and Country of

Birth: _____

Date and Place of Marriage:

Date and Place of Termination of

Marriage: _____

If you find it necessary to list additional former spouses, please list the required information on a separate sheet of paper and attach to this page.

PART V

Spouse's employment, past and present

SECTION A: Spouse's Present Employment

Spouse is currently ___employed ___unemployed.

Spouse's Present Employment:

Full name and address of present employer:

Occupation or Job Title during this employment:

This employment has been from _____ to present.

SECTION B:

Going backward in time, list Spouse's previous employment activity (for the last 5 years).

Do not leave any period open...if spouse was unemployed, indicate "*unemployed*" for that period. It is **important to account for all time periods** for the last five years (even if this includes timeframes living outside the U.S.)!

Note for "traveling therapists": If spouse has worked as a "*traveling*" therapist, working in various assignments, it is not necessary to list various "*assignments*", nor is it necessary to list those periods of time between assignments. Simply list "*ABC Traveling Therapy Company*" 01/20/93 to 09/14/95", for example.

Full name and address of previous employer:

Occupation or Job Title during this employment:

Spouse's employment was from _____ to _____.

Full Name and address of previous employer:

Occupation or Job Title during this employment:

Spouse's employment was from _____ to _____.

Full name and address of previous employer:

Occupation or Job Title during this employment:

Spouse's employment was from _____ to _____.

If you find it necessary to list additional previous employment for spouse, please list the required information on a separate sheet of paper and attach to this page.

SECTION C: Indicate below spouse's last employment abroad (outside the U.S.):

Full name and address of last employer abroad:

Occupation or Job Title during this employment:

Spouse's employment was from _____ to _____.
(Month / Year) (Month / Year)

PART VI

Information about Spouses residences, past and present

SECTION A:

SPOUSE'S current residence.

My spouse currently resides in the U.S. at:

(Number) (Street) (Apt. #)

(City) (State) (Zip Code)

My spouse has lived at this address from _____ to the present
time. (Month / Year)

SECTION B:

Information about SPOUSE'S previous residences.

Going backward in time, list all spouse's residences for the last five (5) years -- it is not necessary to list the current residence again. You must account for all time...do not leave any timeframe open! Use the remainder of this page to give all information requested below or, if more space is needed, attach your list to this page.

___ Check here if residences are **exactly the same, for all time periods**, as "Principal Applicant". If such is the case, it is not necessary to complete this section!

INFORMATION REQUIRED FOR EACH PREVIOUS RESIDENCE FOR THE LAST FIVE YEARS:

(Number) (Street) (Apt. #)

(City) (Province or State) (Zip Code) (Country)

My spouse lived at this address from _____ to _____
(Month / Year) (Month / Year)

Indicate below your spouse's **last address outside the U.S.** at which they resided for more than one year:

(Street) (Apt #.) (Number)

(City) (Province or State) (Zip Code) (Country)

My spouse lived at this address from _____ to _____
(Month / Year) (Month / Year)

Do any of the following apply to you? Please read the questions thoroughly since answering incorrectly could affect the approval of your green card and/or citizenship application:

1. Have you ever, in or outside the U.S.:

a. knowingly committed any crime of moral turpitude or a drug-related offense for which you have not been arrested? ___Yes ___No

b. been arrested, cited, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations? ___Yes ___No

c. been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action? ___Yes ___No

d. exercised diplomatic immunity to avoid prosecution for a criminal offense in the U.S.? ___Yes ___No

2. Have you received public assistance in the U.S. from any source, including the U.S. government or any state, county, city, or municipality (other than emergency medical treatment), or are you likely to receive public assistance in the future? ___Yes ___No

3. Have you ever:

a. within the past 10 years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future? ___Yes ___No

b. engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling? ___Yes ___No

- c. knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the U.S. illegally? ___Yes ___No
- d. illicitly trafficked in any controlled substance, or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance? ___Yes ___No
4. Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to, any person or organization that has ever engaged or conspired to engage, in sabotage, kidnapping, political assassination, hijacking, or any other form of terrorist activity? ___Yes ___No
5. Do you intend to engage in the U.S. in:
- a. espionage? ___Yes ___No
- b. any activity a purpose of which is opposition to, or the control or overthrow of, the Government of the United States, by force, violence or other unlawful means? ___Yes ___No
- c. any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information? ___Yes ___No
6. Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party? ___Yes ___No
7. Did you, during the period March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion? ___Yes ___No
8. Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin, or political opinion? ___Yes ___No
9. Have you ever been deported from the U.S., or removed from the U.S. at government expense, excluded within the past year, or are you now in exclusion or deportation proceedings? ___Yes ___No
10. Are you under a final order of civil penalty for violating section 274C of the Immigration Act for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the U.S., or any other immigration benefit? ___Yes ___No

11. Have you ever left the U.S. to avoid being drafted into the U.S. Armed Forces?
 Yes No

12. Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver? Yes No

13. Are you now withholding custody of a U.S. Citizen child outside the U.S. from a person granted custody of the child? Yes No

14. Do you plan to practice polygamy in the U.S.? Yes No

Supporting Documentation Checklist for the Dependent Spouse

**NOTE: Original documents need not be sent...
but make sure all photocopies are good, clear, legible copies!**

I-797 Approval Notice(s) of Action - Case Types: I-129 and I-539 (copy each one received since the first entry into the U.S.)

Marriage / Divorce Certificates (to verify any name discrepancy on documents, as well as marital status)

Birth Certificate

Current and previous passports (copy all pages, including blank ones)

Current white I-94 Card (make sure arrival date is legible when making copies and make copies of both front and back)

2 Adit type photos per application (do not cut photos down or write on photos)

Previous passports (cover to cover, including all blank pages)

Medical exam w/vaccination supplement included in sealed envelope. To schedule the medical exam with a USCIS doctor, please call 1-800-375-5283. The 800 number will help you determine a USCIS doctor in your area.

Birth Certificates of all children, including children not applying.