

<b>1. Family Name</b> ( <i>Capital Letters</i> )	First Name	Middle Name	"A" File Number
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<b>2. Last Permanent Address in United States</b> ( <i>Number and Street</i> )	( <i>City</i> )	( <i>State</i> )	( <i>Zip Code</i> )
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<b>3. Date of Birth</b> ( <i>mm/dd/yyyy</i> )	Country of Birth	Country of Citizenship
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<b>4. Date of Last Departure From the United States</b> ( <i>mm/dd/yyyy</i> )	Name of Vessel, Airline or Other Means of Departure	Port of Departure From the United States
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**5. Intended or Actual Permanent Address Abroad**

**6(a).** I voluntarily, willingly and affirmatively  am abandoning  have abandoned my status as a lawful permanent resident of the United States because:

**6(b).** Documents Surrendered:

**6(c).** Date of Abandonment of Status as a Lawful Permanent Resident of the United States (*mm/dd/yyyy*):

**6(d). Remarks of Immigration/Consular Officer:** If you waive your right to a hearing now, you can have a hearing at any time hereafter before an Immigration Judge to determine your admissibility by presenting yourself at a port of entry to the United States and seeking entry. If you do seek a later hearing, the Immigration Judge can and will take into account all statements you have made concerning your abandonment of residence in the United States.

**Signature:** \_\_\_\_\_ **Office:** \_\_\_\_\_

**6(e).** I have read and understand the above statements, or they have been read to me, and the statements are true and correct. I also understand (if I am at this time an applicant for admission into the United States) that I have the right to appear before an Immigration Judge for a hearing to determine my admissibility into the United States as a returning lawful permanent resident. I freely waive my right to a hearing before an Immigration Judge.

**Signature of Alien:** \_\_\_\_\_

**Date** (*mm/dd/yyyy*): \_\_\_\_\_

**For Government Use Only**

**7. I hereby certify that the above signatory was personally interviewed by me and that he (or) she fully understands the nature of this action.**

Signature of Immigration/Consular Officer: \_\_\_\_\_

Signature of Witness: \_\_\_\_\_

Signature of Interpreter: \_\_\_\_\_ Language \_\_\_\_\_

Address of Interpreter: \_\_\_\_\_

Signature of Supervisor: \_\_\_\_\_

**8. Disposition of Documents:**

<b>9. To Files Control Office:</b> _____	(City)	(State)	(For Inclusion in Alien's File)	Date ( <i>mm/dd/yyyy</i> )
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**10. Copy Furnished**  Alien  Third Person/Agency on \_\_\_\_\_ Date (*mm/dd/yyyy*)