I-566, Interagency Record of Request - A, G, or NATO Dependent Employment Authorization or Change/Adjustment To/From A, G, or NATO Status

Pa	rt 1. Information About You (	The person seeking employme	ent authorization or	change/adjustment of status	s.)
ī.	Family Name	Given Name		Middle Name	
2.	Home Address - Street Number and I	Name			Apt.#
	City	St	ate	Zip	Code
3.	Mailing Address - Street Number and	d Name Apt. #	C/O (in care of)	:	
	City	State	Zip Code	Daytime Phone # (	(with area code)
ŀ.	Date of Birth (mm/dd/yyyy) 5. (	Country of Birth		<b>6.</b> Country of Citizenship	)
١.	Gender ☐ Male ☐ Female	<b>8.</b> Marital Status  Married Not N	Married	<b>9.</b> A-Number ( <i>if any</i> )	
10				10 DOG D 111 .: "	
lU.	U.S. Social Security # (if any)	<b>11.</b> I-94 # (Arrival-Depar	ture Document)	12. DOS Personal Identific	cation # (PID)
12	Data of Lost Entwy into the LLC (viv	//d/www.) 14 Cymnont Inc	miamation Status	15 Deletienskin to Deinsis	1 (:f1:1-1-)
IJ.	Date of Last Entry into the U.S. (mn	14. Current iiii	migration Status	15. Relationship to Princip	<u>pai (ij appiicabie)</u>
_		1 4 10			
	rt 2. Information About Princip			N.C. 1.11 N.T.	
L.	Family Name	Given Name		Middle Name	
,	Home Address - Street Number and	Nama A 4	City	State	Zip Code
٠.	Tionic Address - Street Number and	Name Apt.#	City	State	Zip Code
<b>1</b> 1	Date Tour of Duty Expected to End (	mm/dd/nnny) A Cour	L	5. Marital Status	
J• 1	Date Tour of Duty Expected to End (		tiry of Citizenship	Married	Not Married
6	Job Title		 urture Document)	8. DOS Personal Identi	
•	300 THE	To Total (Intival Depa	Ture Boeument)	O. DOSTEISONAI IACHA	meation # (11D)
<b>n</b> -	-4.2 T		1 1.00		
<u>a</u>	rt 3. Type of Request (See instru	* *	ion on the different	types of requests.)	
1.	I am requesting employment au				
		or daughter, age: , who	o: is a full-time	e, post-secondary student.	is disabled.
2.	☐ I am requesting change/adjustm				
		status to A, G, or NATO no	nimmigrant - specifi	ically to:	
		nt to A or G nonimmigrant. igrant status from A, G, or N	ATO specifically:	to:	
		or NATO nonimmigrant to im			
		onimmigrant applying under		ct of September 11, 1957.	
Pa	rt 4. Certification (Submit two cop	oies with original signatures -	Page 2 must also b	e attached.)	
ce	rtify under penalty of perjury that the for	egoing is true and correct. I unde	erstand false information	on is a basis for denial or termi	
	efit requested and for other penalties prove a criminal record. I have not violated U				
	I Social Security and all applicable taxes			worked megany in the Officed	States, and I have
	nature			Date (mm/d	d/yyyy)

Part 5. Your Personal Information		
Your Name (family, given, middle)	Date of Birth (mm/dd/yyyy)	DOS Personal Identification # (PID)
For O	fficial Use Only	
Part 6. Certification by Diplomatic Mission, Internat	· · · · · · · · · · · · · · · · · · ·	HQ SACT, or
NATO Member State (Certifying official must he		
I certify that the information provided on the first page of the according to our official records.	his Form I-566 is true and correct	to the best of my knowledge and
As an applicant for employment authorization, I further cer	rtify that his or her eligibility has	been verified under the provisions of:
A bilateral agreement with:	A de facto agreeme	•
Check each of the following that apply:		
☐ Without a numerical limit ☐ Based on p	principal alien's G-4 status	
With a numerical limit and this applicant is within the	limit; and	
As an applicant for status as a principal alien, I further	and was notified to the I	OOS on (date):
certify that he or she is being offered the position of:	and was notified to the I	SOS on (ume).
Signature of Certifying Officer or Official Print	ted Name	
Signature of Certifying Officer of Official Frint	teu ivaine	Official Seal
Name and Address of Diplomatic Mission, International C	Droanization NATO/HO SACT	
NATO Member State	Jigamzation, Will Offic Direct	, , , ,
Duty/Title Phone Number (include	de area code) Date (mm/dd/yyy	(y)
Part 7. DOS, NATO/HQ SACT, and/or USUN Use C	Inly	
1. The Department of State, NATO/HQ SACT, and/or USU	•	
Recommends the request be granted	Recommends the r	request be denied
If the recommendation is for denial, provide a reason(s) for	or such recommendation:	
2. Date (mm/dd/yyyy) 3. Phone Number (include area of	4. Office:	
	Protocol US	UN NATO/HQ SACT Visa
4. Signature 1	Signature 2	
Part 8. USCIS Use Only		
1. From:		A NI mil m / E'l. Ni
Adjudicator's Identification # USCIS Office	Office Phone Number (with	area code) A-Number / File No.
2. To:  Protocol USUN NATO/HQ SACT Vis	sa Office (Subject filed under Section	on 13. Please advise USCIS of your findings.)
	on (mm/dd/yyyy) If change	of status granted, give new status:
Granted Denied		
	on (mm/dd/yyyy): Valid to (	mm/dd/yyyy): Classification:
Granted Denied		
5. DOS/NATO/HQ SACT/USUN/Visa Date of Notifica Office Notified:	ation (mm/dd/yyyy):	
Yes No		
Copy 1: USCIS Copy 2: DOS/NATO/HQ SACT/USUN/VISA OFFICE	<del></del>	Form I-566 (Rev. 03/26/09) Y Page 2

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

## OMB No. 1615-0027; Expires 03/31/11 **I-566, Interagency Record of Request -** A, G, or NATO Dependent Employment Authorization or Change/Adjustment To/From A, G, or NATO Status

START HERE - Type or print in black ink.	
Part 1. Information About You (The person seeking employment authorization	or change/adjustment of status.)
1. Family Name Given Name	Middle Name
2. Home Address - Street Number and Name	Apt.#
_	
City State	Zip Code
3. Mailing Address - Street Number and Name Apt. # C/O (in care	ΔΑ.
3. Mailing Address - Street Number and Name Apt. # C/O (in care	<i>oj)</i> .
City State Zip Code	Daytime Phone # (with area code)
State Zip Code	Daytime Thome " ("" area code)
<b>4.</b> Date of Birth ( <i>mm/dd/yyyy</i> ) <b>5.</b> Country of Birth	<b>6.</b> Country of Citizenship
7. Gender 8. Marital Status	<b>9.</b> A-Number ( <i>if any</i> )
Male Female Married Not Married	
10. U.S. Social Security # (if any)  11. I-94 # (Arrival-Departure Document	12. DOS Personal Identification # (PID)
13. Date of Last Entry into the U.S. (mm/dd/yyyy)  14. Current Immigration Status	15. Relationship to Principal ( <i>if applicable</i> )
Part 2. Information About Principal Alien	
1. Family Name Given Name	Middle Name
2. Home Address - Street Number and Name Apt.# City	State Zip Code
<b>3.</b> Date Tour of Duty Expected to End ( <i>mm/dd/yyyy</i> ) <b>4.</b> Country of Citizensh	ip <b>5.</b> Marital Status  Married Not Married
<b>6.</b> Job Title <b>7.</b> I-94 # (Arrival-Departure Document)	
7. 194# (Arrivar-Departure Document)	8. DOS Tersonar Identification π (T1D)
Part 3. Type of Request (See instructions for complete information on the difference of the complete information of the comp	ent types of requests.)
1. I am requesting employment authorization as a:	
	full-time, post-secondary student. is disabled.
I am requesting change/adjustment of status. (Select one.)	ter ti
<ul> <li>Change of nonimmigrant status to A, G, or NATO nonimmigrant - spec</li> <li>Section 247(a), immigrant to A or G nonimmigrant.</li> </ul>	cifically to:
c. Change to other nonimmigrant status from A, G, or NATO - specifical	ly to:
<b>d.</b> Adjustment from A, G, or NATO nonimmigrant to immigrant.	
e. A-1, A-2, G-1, or G-2 nonimmigrant applying under Section 13 of the	•
Part 4. Certification (Submit two copies with original signatures - Page 2 must of	
certify under penalty of perjury that the foregoing is true and correct. I understand false infor penefit requested and for other penalties provided by law and regulation. If I am requesting en	
nave a criminal record. I have not violated United States immigration and/or visa laws, I have	
paid Social Security and all applicable taxes on all employment in the United States.  Signature	<b>Date</b> (mm/dd/yyyy)
	_ = ==== (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Par	t 5.	Your personal inform	nation									
You	r Nar	me (family, given, middle)			D	ate of Birth	(mm/dd/yyyy	y) 1	OOS Pe	rsonal	Identification	on # ( <i>PID</i> )
				For Of	fici	ial Use O	nly					
Par	t 6.	<b>Certification by Diple</b>	omatic N	Iission, Interna	atio	nal Orgar	nization, N	ATO/I	HQ SA	CT,	or NATO N	<b>Aember</b>
		State (Certifying officia		-								
		ify that the information pro		the first page of the	nis F	Form I-566 i	s true and co	orrect to	the bes	t of m	y knowledge	and
	according to our official records.  As an applicant for employment authorization, I further certify that his or her eligibility has been verified under the provisions of									sions of:		
A bilateral agreement with:								1				
	i	T STANGER AGE CONTINUE WITH	True facto agreement with.									
	_ Checl	k each of the following tha	ıt annly:		╛							
		Vithout a numerical limit.	и арргу.	Dagad on n	rina	cipal alien's	C 4 status					
	_	Vith a numerical limit and	this applic				G-4 status					
		n applicant for status as a p			11111							
	certif	fy that he or she is being o	ffered the	position of:		and wa	s notified to	the DC	S on (a	ate):		$\neg$
~.		0.00	0.000 1.1									
Sign	atur	e of Certifying Officer o	r Official	Printo	ed N	Name			$\neg  [$		Official Se	eal
L									<b>□</b> [			
		d Address of Diplomatic Iember State	Mission,	International O	rga	nization, N	ATO/HQ S	ACT,	r			
1 1/1	10 10	iember state										
L Dut	y/Titl	le	Phone	Number (include	e ar	ea code)	Date (mm/de	d/yyyy)				
	,			rumber (mema	cur		,	<u> </u>				
		DOS, NATO/HQ SA	-			ly						
1.	_	Department of State, NATO	_	CT, and/or USUN	<b>1</b> :	□ <b>n</b>		41	1	4	•	
		Recommends the request b recommendation is for de	•	ida a rassan(s) fa	<b></b> 011	·	ecommends	tne req	uest be	deniec	l	
,   	n me	recommendation is for de	mai, prov	ide a reason(s) io	ır su	ich recomm	endation:					
2. I	Date (	(mm/dd/yyyy) <b>3.</b> Pho	ne Numbe	er (include area o	code	<sup>2)</sup> <b>4.</b> Offic	201					
_, _				(		7 <b>4.</b> Omi	Protocol	USU	J $\square$ N	IATO	/LIO S A CT	□ Vice
4 S	ignat	ure 1				Signat		JUSUI	, [] I	NATO	/HQ SACT	∐ Visa
<b></b> 5	ignat	uic i				Signat	uic 2					
L												
Par		USCIS Use Only										
	rom:		USCIS	Office		Office Phor	ne Number (1	with ar	ea code	) A	-Number / F	ile No.
[	Aujuc	dicator's Identification #	USCIS	Office			ic runioci ()	wiii ai	- Couc	) ] [		
2. T	'o•											
<b>-</b> . [		otocol USUN N	ATO/HQ	SACT Vis	a O	ffice (Subjec	et filed under S	Section	13. Plea	se advi	se USCIS of y	our findings.)
3. A	– Adjust	tment or Change of Status	:	Date of Decision	n ( <i>m</i>	ım/dd/yyyy)	If ch	ange of	fstatus	grante	d, give new	status:
	Gra	anted Denied										
<b>4.</b> R	Leque	est for Employment Author	rization:	Date of Decision	n (n	nm/dd/yyyy	): Valid	d to (m	m/dd/yy	yy):	Classificati	on:
	Gra	anted Denied										
		NATO/HQ SACT/USUN	/Visa	Date of Notifica	atio	n ( <i>mm/dd/y</i> y						
(	Office	e Notified:										
	Ye	s No										