

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

# Form G-639, Freedom of Information/Privacy Act Request

**NOTE:** Use of this form is optional. Any written format for a Freedom of Information or Privacy Act request is acceptable.

**START HERE - Type or print in black ink. Read instructions before completing this form.**

**1. Type of Request** (*Check appropriate box*)

- Freedom of Information Act (FOIA) (*Complete all items except Number 6.*)
- Privacy Act (PA) (*Number 6 must be completed in addition to all other applicable items.*)
- Amendment of Record (PA only) (*Number 5 must be completed in addition to all other applicable items.*)

**2. Requester Information**

Name of Requester ( <i>Last, First, and Middle Names</i> )		Date ( <i>mm/dd/yyyy</i> )	Daytime Telephone
Address ( <i>Street Number and Name</i> )		Apt. Number	
City	State	Zip Code	

**By my signature, I consent to pay all costs incurred for search, duplication and review of materials up to \$25** (*See instructions*)

Signature of Requester: \_\_\_\_\_

- Deceased Subject - **Proof of death must be attached** (*Obituary, Death Certificate, or other proof of death required*)

**3. Consent to Release Information** (*Complete if person is different from requester.*) (**Numbers 7 and 8 must be completed.**)

Print Name of Person/Record Subject Giving Consent	Signature of Person Giving Consent ( <i>Original signature required</i> )

**By my signature, I consent to allow the requester named in Number 2 above to review** (*Check applicable box*):

- All of my records
- A portion of my records (*If a portion, specify below what part, i.e., copy of application.*)

(*Consent is required for records of U. S. citizens (USC) and lawful permanent residents (LPR).*)

**4. Information Needed to Search for Record(s)**

Identify the documents, records, or information you are seeking. Be as specific as possible.

**Purpose:** (*Optional: You are not required to state the purpose of your request. However, doing so may assist USCIS in locating the records needed to respond to your request.*)

**5. Data Needed on Subject of Record** (*Note: Items marked with an asterisk (\*) must be provided if known.*)

*Family Name ( <i>Last Name</i> )	Given Name ( <i>First Name</i> )	Middle Name

**5. Data Needed on Subject of Record** (Continued)

*Other Names Used (if any)		* Name at time of entry into the U.S.	I-94 Admission #
*Alien Registration Number (A#)	* Petition or Claim Receipt #	* Country of Birth	*Date of Birth (mm/dd/yyyy)

**Names of other family members that may appear on requested record(s) (i.e., spouse, daughter, son):**

*Family Member's Name: Given Name (First Name)	Middle Name	Family Name (Last Name)	Relationship
*Father's Name: Given Name (First Name)	Middle Name	Family Name (Last Name)	
*Mother's Name: Given Name (First Name)	Middle Name	Family Name (Last Name) (including Maiden Name)	

Country of Origin (Place of Departure)	Port of Entry Into the U.S.	Date of Entry (mm/dd/yyyy)
Manner of Entry (Air, Sea, Land)	Mode of Travel (Name of Carrier)	

**6. Verification of Subject of Record's Identity** (See instructions for explanation. Check one box.)

In-Person With ID     Notarized Affidavit of Identity     Other (Specify): \_\_\_\_\_

**7. Signature of Subject of Record**

(Original signature required): \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_  
Telephone No. \_\_\_\_\_

**8. Notary** (Normally needed from persons who are the subject of the record sought or for a sworn declaration under penalty of perjury. See below.)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_  
Signature of Notary \_\_\_\_\_ My Commission Expires on \_\_\_\_\_

**NOTE:** If a declaration is provided in lieu of a notarized signature, it must state at a minimum the following (include notary seal or stamp in the appropriate space below):

**Executed outside the United States**

If executed outside the United States: "I declare (certify, verify, or state) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Signature \_\_\_\_\_

**Executed in the United States**

If executed within the United States, its territories, possessions, or commonwealths: "I declare (certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

Signature \_\_\_\_\_

Seal or Stamp

Seal or Stamp