PID#:	
(For Staff Use Only)	

IMMIGRATION ASSISTANCE REQUEST FORM

U.S. Senator Dianne Feinstein One Post Street, Suite 2450 San Francisco, CA 94104 Fax: 415-393-0710

PLEASE PRINT CLEARLY OR TYPE

Name:			Date:		
Street Address:			Apt	t. #:	
City:		State	e: Zi	p Code:	
E-mail Address:					
NOTE: Attorneys, ple					
	1	1	4.41.*0		
Have you contacted	_				
If so, which office?	f so, which office? When?				
Alien Reg Beneficiary Date of B Alien Reg	s Name: gistration Number y's Name: irth (MM/DD/YY gistration Number	: A	Country of	Birth:	
				u have already filed.] A I-800/A	
G-639 I-129*	I-140* I-360	I-765 I-131	I-600/		
I-129F*	I-485**	I-751	N-565		
I-539	I-90	I-824**	N-600		
I-130*	I-730	I-821	N-400		
Visa Bulletin: http **Please include al USCIS Rec	o://travel.state.gov/visa l information on conce ceipt Number(s) (770.html OR by	phone: 202-663-1541	
	RVICE CENTER opriate service center)	OFFICE WHERE	FORM IS B	EING PROCESSED	
California	Nebraska	Texas	Vermont	National Benefits Center	
If your case is an INFOPASS	currently at a loca appointment, ple	al USCIS office for ase fill in the locat	processing, o	or if you have recently gone to	

PLEASE ATTACH COPIES OF THE MOST RECENT CORRESPONDENCE YOU HAVE RECEIVED FROM THE AGENCY/OFFICE THAT IS PROCESSING YOUR CASE.

LOCATION OF CASE

If you have been advised by USCIS that your Adjustment of Status or Naturalization case is currently pending an FBI name check, please complete Section 2.

If your case is at the **National Visa Center**, complete **Section 3**.

If your case is currently pending at a U.S. Embassy or U.S. Consulate please complete Section 4

SECTION 2: Complete this section if you have been told by USCIS that your case is pending with the FBI for NAME CHECK clearance NOTE: Before we can begin an inquiry with the FBI our office will need an Immigration Assistance Request Form for each beneficiary. You must include the following information: Full name (including middle name), Date of Birth, Alien Registration number and Social Security Number (SSN). Date that case was sent to the FBI: Applicant's SSN: (If you don't know, write "I don't know") Proceed to section 5 SECTION 3: Complete this section if your case is in process at the Department of State
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NATIONAL VISA CENTER
Case Number (or Receipt Number):
Preference Category: Case Priority Date:
Foreign State Chargeability:(Usually the beneficiary's country of birth)
SECTION 4: Complete this section if your case is at a U.S. EMBASSY or U.S. CONSULATE
Embassy or Consulate location (City and Country):
Case Number: Date of interview(s): (For non-immigrant visas, provide the applicant's passport number)
Has the case been transferred to another office? Where?

SECTION 5: FINAL INSTRUCTIONS

- o On a separate sheet of paper, please describe briefly what problems you are experiencing with this case and how Senator Feinstein might be able to assist you.
- Include a copy of the most recent correspondence from the USCIS, National Visa Center and/or U.S. Embassy or Consulate.
- Form should be signed by the <u>petitioner</u>. For FBI name check cases, please provide both signatures.
- Mail or fax this form to the Senator's San Francisco office.

SIGNATURE

I authorize the Office of U.S. Senator Dianne Feinstein to make an inquiry on my behalf.			
Petitioner's Signature:	Date:		
Beneficiary's Signature:	Date:		