

## **Petition to Remove Conditions on Residence**

## **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form I-751

OMB No. 1615-0038 Expires 12/31/2019

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	Petiti	oner interview	ed on (mm/dd/yyyy)	1 1 1	☐ Approved under INA 216(c)(4	)(C) Battered Spouse/Cniid
	be completed	•		Attorney State B		redited Representative
	orney or accre			(if applicable)	USCIS Online A	ccount Number (if any)
rep	resentative (if	any).	ttached.			
►S7	TART HERE	- Type or prin	nt in black ink.			
Par	t 1. Inform	ation Abou	t You, the Conditi	onal 5.	Country of Birth	
	sident		, 		India	
1.a.	Family Name (Last Name)	AGRAWAL		6.	Country of Citizenship or Nationapply)	onality (provide all that
1.b.	Given Name (First Name)	Manisha			India	
1.c.	Middle Name	Devi	1//	7.	Alien Registration Number (A-	
				OV	► A- 0	1 2 2 2 1 9 7 3
Other Names Used					U.S. Social Security Number (i	f any)
List all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to  9. USCIS						
complete this section, use the space provided in <b>Part 11</b> .					USCIS Online Account Number	er (if any)
	itional Inform		Col			
2.a.	Family Name (Last Name)			Ma	urital Status	
2.b.				10.	Marital Status	
	(First Name)					Divorced Ut: 11
2.c.	Middle Name				☐ Single ⊠ Married ☐	Divorced Widowed
	E 11 M			11.	Date of Marriage (mm/dd/yyyy	02/01/2004
3.a.	Family Name (Last Name)			12.	Place of Marriage	
3.b.	Given Name			12.	Mumbai India	
	(First Name)					
3.c.	Middle Name			13.	If the marriage through which y residence has ended, provide the divorce or date of death) (mm/d	e date it ended (date of
Oth	er Informat	ion			divorce of date of death) (IIIII/C	101 y y y y j
4	Data of Divi	(mana /d.d./	11/04/107			
4.	Date of Birth	(111m/ad/yyyy)	11/24/197	5 14.	Conditional Residence Expires (	`
						02/01/2006

Part 1. Information About You, the Conditional Resident (continued)	21. If you are married, is this a different marriage than the one through which you gained conditional resident status.
Mailing Address	22. Have you resided at any other address since you became a
<b>15.a.</b> In Care Of Name	permanent resident?
Manisha Devi Agrawal	If you answered "Yes" to Item Number 22., provide a list of al
15.b. Street Number and Name 123 Park Avenue	addresses where you have resided since becoming a permanent resident and the dates you resided at those locations in the space provided in <b>Part 11. Additional Information</b> .
<b>15.c.</b> ⊠ Apt. ☐ Ste. ☐ Flr. <b>45</b>	23. Is your spouse or parent's spouse currently serving with o
15.d. City or Town Edison	employed by the U.S. Government and serving outside the United States?
15.e. State NJ 15.f. ZIP Code 08837	
16. Is your physical address different than your mailing address?   ☐ Yes   N  If you answered "Yes" to Item Number 16., provide your physical address below.	Part 2. Biographic Information  1. Ethnicity (Select only one box)  Hispanic or Latino  Not Hispanic or Latino
Physical Address	2. Race (Select all applicable boxes)
17.a. In Care Of Name  17.b. Street Number and Name  17.c.	6. Hair Color (Select only one box)  Bald (No hair)  Black Blond Brown Gray Red
If you answered "Yes" to <b>Item Number 20.</b> , provide a detailed explanation in <b>Part 11. Additional Information</b> or on a separate sheet of paper, and refer to the <b>What Initial Evidence Is Required</b> section of the Form I-751 instructions to determin	d e

what criminal history document to include with your petition.

Part 3. Basis for Petition	Other Information
Joint Filing	2.a. Family Name (Last Name)
My conditional residence is based on my marriage or my parent's marriage to a U.S. citizen or lawful permanent residen	2.b. Given Name (First Name) Rahul
and I am filing this joint petition together with (Select <b>only on</b> box):	
1.a. $\boxtimes$ My spouse.	3. Date of Birth (mm/dd/yyyy) 12/22/1974
<b>1.b.</b> My parent's spouse because I am unable to be included in a joint petition filed by my parent and m parent's spouse.	4. U.S. Social Security Number (if any)    1   2   3   4   5   6   7   8   9
<b>OR</b> (Select <b>all</b> applicable boxes in the next section.)	5. A-Number (if any)  • A- 4 5 8 9 0 4 5 7 8
Waiver or Individual Filing Request	
My conditional residence is based on my marriage or my parent's marriage to a U.S. citizen or lawful permanent residen I am unable to file a joint petition with my spouse or my parent's spouse, because:	and Name
1.c. My spouse is deceased.	6.b, Apt. Ste. Flr. 45
1.d. My marriage was entered in good faith, but the marriage was terminated through divorce or	6.c. City or Town Edison
annulment.	6.d. State NJ 6.e. ZIP Code 08837
1.e.   I entered the marriage in good faith, and, during the marriage, I was battered, or was the subject of	6.f. Province 6.g. Postal Code
extreme cruelty, by my U.S. citizen or lawful permanent resident spouse.	6.h. Country
<b>1.f.</b> My parent entered the marriage in good faith, and, during the marriage, I was battered, or was subjected	IISA
to extreme cruelty, by my parent's U.S. citizen or lawful permanent resident spouse or by my conditional resident parent.	Part 5. Information About Your Children
1.g. The termination of my status and removal from the United States would result in an extreme hardship.	Provide information on all of your children. If you need extra space to complete this section, use the space provided in <b>Part 11. Additional Information</b> .
Part 4. Information About the U.S. Citizen or	Child 1
Lawful Permanent Resident Spouse. If Filing as	1.a. Family Name (Last Name)
a Child Separately, Information About the U.S. Citizen or Lawful Permanent Resident	1.b. Given Name (First Name) Jay
Stepparent Through Whom You Gained Your	1.c. Middle Name
Conditional Residence.	2. Date of Birth (mm/dd/yyyy) 05/01/2003
Relationship  1.a.	3. A-Number (if any)
1.b. Parent's Spouse or Former Spouse	<b>A</b> -
	5. Is this child applying with you?

Part 5. Information About Your Children		Child 3	
(coı	ntinued)	13.a. Family Name (Last Name)	
Phy	esical Address	13.b. Given Name (First Name)	
6.a.	Street Number and Name 123 Park Ave	13.c. Middle Name	
6.b.		14. Date of Birth (mm/dd/yyyy)	
6.c.	City or Town Edison	15. A-Number (if any)	
6.d.	State NJ 6.e. ZIP Code 08837	► A-	
6.f.	Province	16. Is this child living with you? Yes	☐ No
6.g.	Postal Code	17. Is this child applying with you?	No
6.h.	Country	Physical Address	
	USA	18.a. Street Number and Name	
Chile	12	18.b.	
7.a.	Family Name (Last Name)	18.c. City or Town	
7.b.	Given Name (First Name)	18.d. State 18.e. ZIP Code	
7.c.	Middle Name	18.f. Province	
8.	Date of Birth (mm/dd/yyyy)	18.g. Postal Code	
9.	A-Number (if any) ► A-	18.h. Country	
10.	Is this child living with you?	Child 4	
11.	Is this child applying with you? Yes No	19.a. Family Name (Last Name)	
Phy	esical Address	19.b. Given Name (First Name)	
12.a.	Street Number and Name	19.c. Middle Name	
12.b.	Apt. Ste. Flr.	20. Date of Birth (mm/dd/yyyy)	
12.c.	City or Town	21. A-Number (if any)	
12.d.	State 12.e. ZIP Code	► A-	
12.f.	Province	22. Is this child living with you?	∐ No
12.g.	Postal Code	23. Is this child applying with you? Yes	No
12.h.	Country		

#### Part 5. Information About Your Children Part 6. Accommodations for Individuals With (continued) Disabilities and/or Impairments **NOTE:** Read the information in the Form I-751 Instructions Physical Address before completing this part. 24.a. Street Number Are you requesting an accommodation because of your and Name disabilities and/or impairments? Yes × No **24.b.** Apt. Ste. Flr. 2. Are you requesting an accommodation because of your 24.c. City or Town spouse's disabilities and/or impairments? Yes $\times$ No 24.d. State 24.e. ZIP Code 3. Are you requesting an accommodation because of your 24.f. Province included children's disabilities and/or impairments? Yes X No 24.g. Postal Code If you answered "Yes" to Item Numbers 1. - 3., select any 24.h. Country applicable box for Item Numbers 4.a. - 4.c. Provide information on the disabilities and/or impairments for each person. Child 5 I am deaf or hard of hearing and request the 25.a. Family Name following accommodation. (If you are requesting a (Last Name) sign-language interpreter, indicate for which 25.b. Given Name language (for example, American Sign Language).): (First Name) 25.c. Middle Name 26. Date of Birth (mm/dd/yyyy) A-Number (if any) I am blind or have low vision and request the 27. following accommodation: 28. Is this child living with you? Yes Is this child applying with you? Yes **4.c.** I have another type of disability and/or impairment. **Physical Address** (Describe the nature of your disability and/or impairment and the accommodation you are 30.a. Street Number requesting.): and Name **30.b.** Apt. Ste. Flr. **30.c.** City or Town 30.d. State **30.e.** ZIP Code 30.f. Province 30.g. Postal Code **30.h.** Country

## Part 7. Petitioner's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature

**NOTE:** Read the information on penalties in the **Penalties** section of the Form I-751 Instructions before completing this part.

**NOTE:** If you selected **Box 1.a.** in **Part 3.**, your spouse must also read and sign the petition in **Part 8.** Signature of a conditional resident child under 14 years of age is not required; a parent may sign for a child.

#### Petitioner's Statement

**NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.** 

1.a.	$\times$	I can read and understand English, and have read and
		understand every question and instruction on this
		petition, as well as my answer to every question. I
		have read and understand the Acknowledgement of
		Appointment at USCIS Application Support
		Center.

The interpreter named in **Part 9.** has also read to me

every question and instruction on this petition, as well

a	s my answer to every question, in
a	language in which I am fluent. I understand every
q	uestion and instruction on this petition as translated
to	o me by my interpreter, and have provided complete
tı	rue, and correct responses in the language indicated
a	bove. The interpreter named in <b>Part 9.</b> has also
re	ead the Acknowledgement of Appointment at
J	JSCIS Application Support Center to me, in the
la	anguage in which I am fluent, and I understand this

2. I have requested the services of and consented to

Application Support Center (ASC)

who is is not an attorney or accredited representative, preparing this petition for me. This person who assisted me in preparing my petition has reviewed the Acknowledgement of Appointment at USCIS Application Support Center with me, and I understand the ASC Acknowledgement.

Acknowledgement as read to me by my interpreter.

#### Petitioner's Contact Information

- 3. Petitioner's Daytime Telephone Number

  7324813053
- 4. Petitioner's Mobile Telephone Number (if any)
  7324813053
- 5. Petitioner's Email Address (if any)
  rahul.gupta@gmail.com

# Acknowledgement of Appointment at USCIS Application Support Center

#### I, M.D.AGRAWAL

understand that the purpose of a USCIS ASC appointment is for me to provide fingerprints, photograph, and/or signature and to re-affirm that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my ASC appointment.

By signing here, I declare under penalty of perjury that I have reviewed and understand my application, petition, or request as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my application, petition, or request that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

If conditional residence was based on a marriage, I further certify that the marriage was entered into in accordance with the laws of the place where the marriage took place and was not for the purpose of procuring an immigration benefit.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be re-affirming that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in my petition and all supporting documents submitted with my petition were provided by me and are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this **Acknowledgement of Appointment at USCIS Application Support Center** with me.

## Part 7. Petitioner's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature (continued)

#### Petitioner's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I certify under penalty of perjury, that the information in my petition, my responses to each question, and any document submitted with my petition were provided by me and are complete, true, and correct.

## Petitioner's Signature

6.a.	Petitioner's Signature	
6.b.	Date of Signature (mm/dd/yyyy)	05/08/2020

**NOTE TO ALL PETITIONERS:** If you do not completely fill out this petition or fail to submit required documents listed in the Instructions, USCIS may deny your petition.

**NOTE:** If you are filing based on claims of having been battered or subjected to extreme cruelty waiver or individual filing, you are not required to have the spouse's or individual listed in **Part 4's** signature.

Part 8. Spouse's or Individual Listed in Part 4.'s Statement, Contact Information, Acknowledgement of Appointment USCIS Application Support Center, Certification, and Signature (if applicable)

Provide the following information about the spouse or individual listed in Part 4.

**NOTE:** Read the information on penalties in the **Penalties** section of the Form I-751 Instructions before completing this part.

## Spouse's or Individual's Statement

**NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.** 

1.a. [	I can read and understand English, and have read and understand every question and instruction on this petition, as well as the petitioner's answer to every question. I have read and understand the Acknowledgement of Appointment at USCIS Application Support Center.
1.b. [	The interpreter named in <b>Part 9.</b> has also read to me every question and instruction on this petition, as well as the petitioner's answer to every question, in
	a language in which I am fluent. I understand every question and instruction on this petition as translated to me by my interpreter, and have provided complete true, and correct responses in the language indicated above. The interpreter named in Part 9. has also read the Acknowledgement of Appointment at USCIS Application Support Center to me, in the language in which I am fluent, and I understand this Application Support Center (ASC) Acknowledgement as read to me by my interpreter.
2.	I have requested the services of and consented to
	who is is not an attorney or accredited representative, preparing this petition for me. This person who assisted me in preparing my petition has reviewed the Acknowledgement of Appointment at USCIS Application Support Center with me, and I understand the ASC Acknowledgement.
Spou	se's or Individual's Contact Information

- 3. Spouse's or Individual's Daytime Telephone Number

  7324813054
- 4. Spouse's or Individual's Mobile Telephone Number (if any)
  7324813054
- 5. Spouse's or Individual's Email Address (if any)

  rahul.gupta@gmail.com

Part 8. Spouse's or Individual Listed in Part 4.'s Statement, Contact Information, Acknowledgement of Appointment USCIS Application Support Center, Certification, and Signature (if applicable) (continued)

## Acknowledgement of Appointment at USCIS Application Support Center

#### I, R.R. GUPTA

understand that the purpose of a USCIS ASC appointment is for me to provide my fingerprints, photograph, and/or signature and to re-affirm that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my ASC appointment.

By signing here, I declare under penalty of perjury that I have reviewed and understand my application, petition, or request as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my application, petition, or request that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be re-affirming that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in my petition and all supporting documents submitted with my petition were provided by me and are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this **Acknowledgement of Appointment at USCIS Application Support Center** with me.

## Spouse's or Individual's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I certify under penalty of perjury, that the information in my petition, my responses to each question, and any document submitted with my petition were provided by me and are complete, true, and correct.

Spo	ouse's or Indi	vidual's Signatur	e			
6.a.	Spouse's or Ind	lividual's Signature				
6.b.	Date of Signatu	are (mm/dd/yyyy)	05/08/2020			
not c	NOTE TO ALL SPOUSES OR INDIVIDUALS: If you do not completely fill out this petition or fail to submit required documents listed in the instructions, USCIS may deny your petition.					
	Part 9. Interpreter's Contact Information, Certification, and Signature					
Provi	ide the following	g information about th	e interpreter.			
Inte	erpreter's Ful	l Name				
1.a.	Interpreter's Fa	mily Name (Last Nar	ne)			
1.b. Interpreter's Given Name (First Name)						
2.	Interpreter's Bu	isiness or Organizatio	on Name (if any)			
Inte	erpreter's Ma	iling Address				
3.a.	Street Number and Name					
3.b.		Ste.   Flr.				
3.c.	City or Town					
3.d.	State	3.e. ZIP Code				
		J.C. ZII Code				
3.f.	Province					
Ü	Postal Code					
3.h.	Country					
Inte	erpreter's Con	ntact Information				
	T					

	ı v
4.	Interpreter's Daytime Telephone Number
5.	Interpreter's Email Address (if any)

Part 9. Interpreter's Contact Information,	Preparer's Mailing Address
Certification, and Signature (continued)	3.a. Street Number and Name
Interpreter's Certification	3.b.
I certify that:	3.c. City or Town
I am fluent in English and, vis the same language provided in <b>Part 7., Item Number 1.k</b>	vhich
I have read to this petitioner every question and instruction this petition, as well as the answer to every question, in the language provided in <b>Part 7.</b> , <b>Item Number 1.b.</b> ; and	3.f. Province
I have read the Acknowledgement of Appointment at USO Application Support Center to the petitioner in the same language provided in Part 7., Item Number 1.b.	3.g. Postal Code 3.h. Country
The petitioner has informed me that he or she understands e instruction and question on the petition, as well as the answered every question, and the petitioner verified the accuracy of eranswer; and	Propager's Contact Information
The petitioner has also informed me that he or she understarthe ASC Acknowledgement and that by appearing for a USC ASC biometric services appointment and providing his or has fingerprints, photograph, and/or signature, he or she is re-affirming that the contents of this petition and all support documentation are complete, true, and correct.	CIS er 5. Preparer's Fax Number
Interpreter's Signature	
6.a. Interpreter's Signature	Preparer's Statement
6.b. Date of Signature (mm/dd/yyyy)	7.a.   I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent.  7.b.   I am an attorney or accredited representative and
Part 10. Contact Information, Statement, Certification, and Signature of the Person	my representation of the petitioner in this case  extends does not extend beyond the preparation of this petition.
Preparing this Petition, If Other Than the Petitioner	NOTE: If you are an attorney or accredited representative whose representation extends
Provide the following information about the preparer.	beyond preparation of this petition, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited
Preparer's Full Name	Representative, with this petition.
1.a. Preparer's Family Name (Last Name)	
1.b. Preparer's Given Name (First Name)	
2. Preparer's Business or Organization Name (if any)	

Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner (continued)

## Preparer's Certification

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this petition on behalf of, at the request of, and with the express consent of the petitioner. I completed this petition based only on responses the petitioner provided to me. After completing the petition, I reviewed it and all of the petitioner's responses with the petitioner, who agreed with every answer on the petition. If the petitioner supplied additional information concerning a question on the petition, I recorded it on the petition. I have also read the **Acknowledgement of Appointment at USCIS Application Support Center** to the petitioner and the petitioner has informed me that he or she understands the ASC Acknowledgement

Pre	parer's Signature
8.a.	Preparer's Signature
8.b.	Date of Signature (mm/dd/yyyy)
	$C_{\mathcal{O}}^{V}$

Part 11. Additional Information				Page Number	5.b.	Part Number	5.c.	Item Number
withi space to cor of pa top o and I	n this petition, to than what is promplete and file per. Type or professed for the per. Type or professed for the per than the per the per than the per than the per than the per than the	ace to provide any additional information use the space below. If you need more rovided, you may make copies of this page with this petition or attach a separate sheet rint your name and A-Number (if any) at the dicate the <b>Page Number</b> , <b>Part Number</b> , to which your answer refers; and sign and	5.d.					
You	r Full Name							
1.a.	Family Name (Last Name)	AGRAWAL						
1.b.	Given Name (First Name)	Manisha						
1.c.	Middle Name	Devi	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
2.	A-Number (if	any)						
		A- 0 1 2 2 2 1 9 7 3	6.d.					
3.a.	Page Number	3.b. Part Number 3.c. Item Number	) (					
3.d.								
4.a. 4.d.	Page Number	4.b. Part Number 4.c. Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number