Part 3. Processing Information			
1. Mother's First Name	2. Father's First Name		
CHIA-LIN	CHEN-TSUNG		
3. City of residence where you applied for an immigrant visa or adjustment of status	4. Consulate where immigrant visa or USCIS office where adjustment of status was granted		
TAIPEI	TAIPEI AIT		
5. If you entered the United States with an immigrant visa, al (If you were granted adjustment of status, skip this question)	on and proceed to Question 6.)		
a. Destination in United States at time of admission LOS	ANGELES		
b. Port of entry where admitted to United States LOS AN	IGELES, CA		
6. Have you ever been ordered removed from the United States?		✓ No	Yes
7. Since you were granted permanent residence, have you ever filed Form I-407, Abandonment by Alien of Status as Lawful Permanent Resident, or otherwise been judged to have abandoned your status?		✓ No	Yes
NOTE: If you answered "Yes" to Question 6 or Question	n 7 above, provide detailed explan	ation in Part 7.	
Part 4. Accommodations for Individuals With Disal instructions before completing this section.)	bilities and Impairments (Rea	d the information	on in the
Are you requesting an accommodation because of your disability and/or impairment?		No Yes	
If you answered "Yes," check any applicable box:			
1. I am deaf or hard of hearing and request the following which language (e.g., American Sign Language)):	g accommodation(s) (if requesting	a sign-language	interpreter, indicate
2. I am blind or sight-impaired and request the following	g accommodation(s):		
3. I have another type of disability and/or impairment (diaccommodation(s) you are requesting):	escribe the nature of your disabilit	y(ies) and/or imp	pairment(s) and
Part 5. Signature (Read the information on penalties in tapplication while in the United States.)	the instructions before completing	this section. You	must file this
I certify, under penalty of perjury under the laws of the United it is all true and correct. I authorize the release of any information needs to determine eligibility for the benefit I am seeking.	States of America, that this applic tion from my records that U.S. Cit	ation and the evi izenship and Imr	dence submitted with nigration Services
Signature	Date	Dayt	ime Phone Number
Nome Daviel for	08/22/2012		
NOTE: If you do not completely fill out this form or fail to su be denied.	bmit required documents listed in	the instructions,	your application may