

U.S. Senator Jacky Rosen Immigration Privacy Release Form

Petitioner & Beneficiary Contact Information:

| Petitioner/Applic | cant: | | | | | | | |
|---|----------------|------------------------|-------------|-------------------------|--------|-------|-------|--|
| Mr. | Mrs. | Ms. | Mx. | Dr. | | | | |
| Full Legal Name: | | | | | | | | |
| Address: | | | | | | | | |
| | | | | _ Phone Number: | | | | |
| Country of Birth: | | | | | | | | |
| Beneficiary: | | | | | | | | |
| Mr. | Mrs. | Ms. | Mx. | Dr. | | | | |
| Full Legal Name: | | | | | | | | |
| Date of Birth: | _// | | | Country of Birth: | | | | |
| Alien Number (if | any): | | | Receipt Number: | | | | |
| Type of Petition: | | | | Date of Filing: | | | | |
| Interview Date: | // | | | Embassy involved: | | | | |
| Current Immigrati | ion Status: | | | | | | | |
| | | | | | | | | |
| Please Select Fo | orm Type: | | | | | | | |
| I-90 I-129 | I-129F I | -130 I-131 | I-140 I-212 | 2 I-290B I-485 | I-526 | I-539 | I-590 | |
| I-600A I-60 | | I-612 I-690 | I-730 I-7 | | | I-829 | I-914 | |
| (Supplement A, B | , or C) I-918 | 8 I-924 I-9 | 929 N-400 | N-600 N-565 | Other: | | | |
| Have you contacted other Congressional or Senate offices about this issue? Yes No | | | | | | | | |
| If yes, who have | you contacted? | | | | | | | |
| U.S. Senator Cortez Masto Con | | ngresswoman Dina Titus | | Congresswoman Susie Lee | | | | |

Congressman Mark Amodei

The Privacy Act of 1974 is a federal law designed to protect you from any unauthorized use and exchange of personal information by federal agencies. Any information that a federal agency has on file regarding your dealings with the United States government ordinarily may not, with a few exceptions, be given to another agency or Member of Congress without your written permission.

I hereby request the assistance of the Office of United States Senator Jacky Rosen to resolve the matter described on this form. I authorize Senator Jacky Rosen and her staff to receive any information regarding this assistance. The information I have provided to the Office of United States Senator Jacky Rosen is true and accurate to the best of my knowledge and belief. The assistance I have requested from Senator Rosen's office is in no way an attempt to evade or violate any federal, state, or local law.

Although our office cannot guarantee a particular outcome, we will do our best to help you receive a fair and timely response regarding your problem. Additionally, my office is unable to offer legal advice or recommend a particular attorney.

I certify, under penalty of perjury, that 1) I provided or authorized all of the information in this privacy release and any document submitted with it; 2) I reviewed and understand all of the information contained in my privacy release and submitted with it; and 3) all of this information is complete, true, and correct.

| I, (print your name) | , authorize USCIS to release information |
|--|--|
| contained in my USCIS records to the extent permit | ted by law to Senator Jacky Rosen and her staff. |

Signature (in ink):

Date:

Please Print, Sign and Return this Form to:

Las Vegas 333 Las Vegas Blvd. South, Suite 8203 Las Vegas, Nevada 89101 P: 702-388-0205 F: 702-380-0947 <u>SNV.CS@rosen.senate.gov</u> Reno 400 South Virginia Street, Suite 738 Reno, Nevada 89501 P: 775-337-0110 F: 775-337-0260 NNV.CS@rosen.senate.gov