

**PART D. For Immigration and Naturalization Service Use Only.**

☐ Fee Received. ☐ Waiver(s) of Grounds of Inadmissibility Granted Per Request.

Note all grounds waived and conditions attached thereto.

LEA Request: ☐ Granted ☐ Forwarded to DOS/VO ☐ Request Denied

☐ Change of Classification Granted ☐ Denied.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Title: \_\_\_\_\_ INS Office: \_\_\_\_\_

**PART E. For Department of State/Visa Office Use Only.**

☐ FORWARDED TO CONSUL BY VO FOR Visa Approval; ☐ Not Forwarded

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Title: \_\_\_\_\_ Office: \_\_\_\_\_

☐ Visa Granted ☐ Visa Denied Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Office: \_\_\_\_\_

**PART F. Request to Allow An S Nonimmigrant to File for Adjustment of Status to Permanent Resident.**

(This request may not be completed or submitted until the alien has fulfilled the terms and conditions of his or her S nonimmigrant classification.)

(For Department of Justice, Criminal Division use only)

(Please attach all relevant documentation establishing (1) the information certified to below; (2) the recommendations, and reasons for the certified recommendations.)

1. Name of LEA: \_\_\_\_\_ submitting request to allow an S nonimmigrant to file for adjustment of status: Date submitted: \_\_\_\_\_

**2. CRIMINAL DIVISION (ASSISTANT ATTORNEY GENERAL) CERTIFICATIONS.**

I Certify that (*alien's name*) \_\_\_\_\_ has

If S-5: ☐ Supplied the information that formed the basis of entry;  
☐ The information substantially contributed to the success of an authorized criminal investigation or the prosecution of an individual as per terms of entry.

If S-6: ☐ Supplied the information that formed the basis of entry;  
☐ The information substantially contributed to the prevention or frustration of an act of terrorism against a U.S. person or property or the success of an authorized criminal investigation of, or the prosecution of, an individual involved in such an act of terrorism.

If S-5 or S-6 ☐ Has received a reward under section 36(a) of the State Department Basic Authorities Act of 1956;  
☐ Has abided by all the terms, conditions and specific 22 U.S.C. 2708(a) limitations of the S classification.

Other comments:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Title: \_\_\_\_\_ Office: \_\_\_\_\_

**3. FOR IMMIGRATION AND NATURALIZATION SERVICE USE ONLY:**

☐ Adjustment ☐ Other action

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Title: \_\_\_\_\_ Office: \_\_\_\_\_

Form I-854 (6-1-95)