



Grace F. Napolitano

Congress of the United States
House of Representatives
32nd District of California

IMMIGRATION CASEWORK AUTHORIZATION FORM

To: Congressional Liaison Unit: Congresswoman Grace F. Napolitano, 32nd California Congressional District, has my authorization to gain access to information and files that will enable her and/or members of her staff to assist me with my case.

Petitioner Information		
Last Name:	First Name:	Middle Name:
Address (Street, City, Zip Code):		
E-mail:		Date of Birth:
Place of Birth:	Home Phone:	Cell Phone:
Beneficiary Information		
Last Name:	First Name:	Middle Name:
Address (Street, City, Zip Code):		
E-mail:		Phone:
Date and Place of Birth:		Date and Place of Entry:
A-File Number:	Receipt/Case Number:	
Current Immigrant Status (check one): <input type="checkbox"/> U.S Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Refugee <input type="checkbox"/> Asylee <input type="checkbox"/> Undocumented		
Agency (e.g USCIS):		
Application filed (e.g I-130):		
Date Filed:	Have you been Interview? If yes, date and where:	Embassy:
Summary of Inquiry (*Required)– Please briefly describe what the issue is		
Privacy Act Statement		

Authority to collect this information is contained in Title 5 U.S.C. 552 and 552a. The purpose of the collection is to enable the I.N.S. to locate applicable records and to respond to requests made under the Freedom of Information and Privacy Acts. I authorize the Congressional office named above to request information on my behalf with any federal agency relevant to the matter described above, to receive and review any information contained in my file and, if necessary to forward any pertinent correspondence sent by me regarding this matter.

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

Signature

Date

Please include a copy of last document received from agency