

(Please print in block letters and answer all questions when applicable.)

Date of Inquiry: \_\_\_\_\_

Inquirer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Representative: \_\_\_\_\_  
(Attorney, Counsel, Etc.)

For: \_\_\_\_\_

If attorney, did you file a G-28 in behalf of  
petitioner? yes( ) no( )

(NOTE: Insert name and address above.  
Form is self-mailing with window envelope.)

**BENEFICIARY**

Type of case: \_\_\_\_\_

Name: \_\_\_\_\_

Preference class: \_\_\_\_\_

File No. \_\_\_\_\_

Date application filed: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Relationship to petitioner: \_\_\_\_\_

Has the application ever been returned to you  
for additional information or documentation?

Yes ( ) No ( )

Date resubmitted: \_\_\_\_\_

**PETITIONER**

Name: \_\_\_\_\_

File No. \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Relationship of beneficiary: \_\_\_\_\_

Have you made prior inquiry? Yes( ) No( )

Date of prior inquiry: \_\_\_\_\_

To whom?: \_\_\_\_\_

NATURE OF INQUIRY \_\_\_\_\_

Did petitioner and/or beneficiary have interview  
regarding above application?

Yes ( ) No ( ) Date: \_\_\_\_\_

With whom?: \_\_\_\_\_

If file is active in other section, advise accord-  
ingly: \_\_\_\_\_

If petition for naturalization filed, show  
petition number. \_\_\_\_\_

\_\_\_\_\_  
(Attorney's or Petitioner's Signature)

DO NOT WRITE BELOW THIS LINE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TO: ADJ ( )  
NATZ ( )  
DEP ( )  
other ( ) \_\_\_\_\_  
(specify)