

Employee: Yanxin Lu

Matter Number: 91.13190.26

Case Type: Adjustment of Status

Subtypes: Concurrent, Employment-based

Applicant: Xuewei Jiang

# FILING COVER SHEET Spouse

USCIS Filing Location: NSC (File Concurrently w/ I-140)

**B · A · L**

**BERRY APPLEMAN & LEIDEN  
LLP**

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ATTORNEYS AT LAW  
2400 N Glenville Dr. STE 100, BLDG A  
Richardson, TX 75082-0246  
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BANK OF TEXAS  
DALLAS, TX

16131010

32-1432  
1110

09-25-23



PAY TO THE  
ORDER OF

US DEPARTMENT OF HOMELAND SECURITY

\$\*\*\*\*\*1,225.00

ONE THOUSAND TWO HUNDRED TWENTY-FIVE AND 00/100 US DOLLARS

Two Signatures Required Over \$7,500

Memo AOS I-485 I-765 I-131 Biometrics / Xuewei Jiang

⑈ 16131010⑈ ⑆ 11014325⑆

8097572769⑈

**BERRY APPLEMAN & LEIDEN LLP**

ATTORNEYS AT LAW

Payee: US DEPARTMENT OF HOMELAND SECURITY

Request Number: 1784639

Check Number: 16131010

Reference: LEE S

Check Date: Sep 25/23

Client	Matter	Narrative	Amount
91	13190.26.2.C	AOS I-485 I-765 I-131 Biometrics / Xuewei Jiang	1,225.00

check record#: 16131010

**BERRY APPLEMAN & LEIDEN LLP**

ATTORNEYS AT LAW

Payee: US DEPARTMENT OF HOMELAND SECURITY

Request Number: 1784639

Check Number: 16131010

Memo: Check Date: 09-25-23

Client	Matter	Narrative	Amount
91	13190.26.2.C	AOS I-485 I-765 I-131 Biometrics / Xuewei Jiang	1,225.00



# e-Notification of Application/Petition Acceptance

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form G-1145

## What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

## General Information

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

## USCIS Privacy Act Statement

**AUTHORITIES:** The information requested on this form is collected pursuant to section 103(a) of the Immigration and Nationality Act, as amended INA section 101, et seq.

**PURPOSE:** The primary purpose for providing the information on this form is to request an electronic notification when USCIS accepts immigration form. The information you provide will be used to send you a text and/or email message.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information may prevent USCIS from providing you a text and/or email message receiving your immigration form.

**ROUTINE USES:** The information provided on this form will be used by and disclosed to DHS personnel and contractors in accordance with approved routine uses, as described in the associated published system of records notices [[DHS/USCIS-007 - Benefits Information System](#) and [DHS/USCIS-001 - Alien File \(A-File\) and Central Index System \(CIS\)](#)], which can be found at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security.

Complete this form and clip it on top of the first page of your immigration form(s).

Applicant/Petitioner Full Last Name JIANG	Applicant/Petitioner Full First Name XUEWEI	Applicant/Petitioner Full Middle Name
Email Address xueweijiang0313@gmail.com		Mobile Phone Number (Text Message) 254-214-9350

**I-485**  
**DEPENDENT**  
**SPOUSE**



**Notice of Entry of Appearance  
as Attorney or Accredited Representative**  
Department of Homeland Security

**DHS**  
**Form G-28**  
OMB No. 1615-0105  
Expires 05/31/2021

**Part 1. Information About Attorney or Accredited Representative**

1. USCIS Online Account Number (if any)  
▶

**Name of Attorney or Accredited Representative**

2.a. Family Name (Last Name)   
2.b. Given Name (First Name)   
2.c. Middle Name

**Address of Attorney or Accredited Representative**

3.a. Street Number and Name   
3.b.  Apt.  Ste.  Flr.   
3.c. City or Town   
3.d. State  3.e. ZIP Code   
3.f. Province   
3.g. Postal Code   
3.h. Country

**Contact Information of Attorney or Accredited Representative**

4. Daytime Telephone Number   
5. Mobile Telephone Number (if any)   
6. Email Address (if any)   
7. Fax Number (if any)

**Part 2. Eligibility Information for Attorney or Accredited Representative**

Select all applicable items.

1.a.  I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority

1.b. Bar Number (if applicable)

1.c. I (select only one box)  am not  am subject to any order suspending, enjoining, restraining, disbaring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable)

2.a.  I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization

2.c. Date of Accreditation (mm/dd/yyyy)

3.  I am associated with , the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a.  I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate

**Part 3. Notice of Appearance as Attorney or Accredited Representative**

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

- 1.a.  U.S. Citizenship and Immigration Services (USCIS)
- 1.b. List the form numbers or specific matter in which appearance is entered.
- 2.a.  U.S. Immigration and Customs Enforcement (ICE)
- 2.b. List the specific matter in which appearance is entered.
- 3.a.  U.S. Customs and Border Protection (CBP)
- 3.b. List the specific matter in which appearance is entered.
- 4. Receipt Number (if any)  
▶
- 5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):  
 Applicant    Petitioner    Requestor  
 Beneficiary/Derivative    Respondent (ICE, CBP)

**Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)**

- 6.a. Family Name (Last Name)
- 6.b. Given Name (First Name)
- 6.c. Middle Name
- 7.a. Name of Entity (if applicable)
- 7.b. Title of Authorized Signatory for Entity (if applicable)
- 8. Client's USCIS Online Account Number (if any)  
▶
- 9. Client's Alien Registration Number (A-Number) (if any)  
▶ A-

**Client's Contact Information**

- 10. Daytime Telephone Number
- 11. Mobile Telephone Number (if any)
- 12. Email Address (if any)

**Mailing Address of Client**

**NOTE:** Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

- 13.a. Street Number and Name
- 13.b.  Apt.    Ste.    Flr.
- 13.c. City or Town
- 13.d. State    13.e. ZIP Code
- 13.f. Province
- 13.g. Postal Code
- 13.h. Country

**Part 4. Client's Consent to Representation and Signature**

**Consent to Representation and Release of Information**

I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

**Part 4. Client's Consent to Representation and Signature (continued)**

**Options Regarding Receipt of USCIS Notices and Documents**

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select all applicable items below. You may change these elections through written notice to USCIS.

1.a.  I request that USCIS send original notices on an application or petition to the U.S. business address of my attorney or accredited representative as listed in this form.

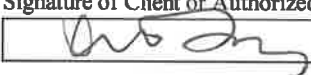
1.b.  I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

**NOTE:** If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

1.c.  I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

**Signature of Client or Authorized Signatory for an Entity**

2.a. Signature of Client or Authorized Signatory for an Entity

➔ 

2.b. Date of Signature (mm/dd/yyyy)

**Part 5. Signature of Attorney or Accredited Representative**

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a. Signature of Attorney or Accredited Representative



1.b. Date of Signature (mm/dd/yyyy)

2.a. Signature of Law Student or Law Graduate

2.b. Date of Signature (mm/dd/yyyy)

**Part 6. Additional Information**

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.

1.a Family Name (Last Name)

1.b Given Name (First Name)

1.c Middle Name

2.a Page Number  2.b Part Number  2.c Item Number

2.d \_\_\_\_\_  
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3.a Page Number  3.b Part Number  3.c Item Number

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4.a Page Number  4.b Part Number  4.c Item Number

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5.a Page Number  5.b Part Number  5.c Item Number

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6.a Page Number  6.b Part Number  6.c Item Number

6.d \_\_\_\_\_  
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# Application to Register Permanent Residence or Adjust Status

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-485  
OMB No. 1615-0023  
Expires 10/31/2025

For USCIS Use Only		
Preference Category:	Receipt	Action Block
Country Chargeable:		
Priority Date:		
Date Form I-693 Received:		
<input type="checkbox"/> Applicant Interviewed <input type="checkbox"/> Interview Waived Date of Initial Interview: _____ Lawful Permanent Resident as of: _____	<b>Section of Law</b> <input type="checkbox"/> INA 209(a) <input type="checkbox"/> INA 209(b) <input type="checkbox"/> INA 245(a) <input type="checkbox"/> INA 245(i) <input type="checkbox"/> INA 245(m) <input type="checkbox"/> INA 249 <input type="checkbox"/> Sec. 13, Act of 9/11/57 <input type="checkbox"/> Cuban Adjustment Act <input type="checkbox"/> Other _____	

To be completed by an attorney or accredited representative (if any).			
<input checked="" type="checkbox"/> Select this box if Form G-28 is attached.	Volag Number (if any) _____	Attorney State Bar Number (if applicable) California 323603	Attorney or Accredited Representative USCIS Online Account Number (if any) _____

▶ **START HERE - Type or print in black ink.**

A-Number ▶ A- 1 1 6 5 6 4 7 4 9

**NOTE TO ALL APPLICANTS:** If you do not completely fill out this application or fail to submit required documents listed in the Instructions, U.S. Citizenship and Immigration Services (USCIS) may deny your application.

### Part 1. Information About You (Person applying for lawful permanent residence)

*Your Current Legal Name (do not provide a nickname)*

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

3.a. Family Name (Last Name)

3.b. Given Name (First Name)

3.c. Middle Name

4.a. Family Name (Last Name)

4.b. Given Name (First Name)

4.c. Middle Name

### Other Names You Have Used Since Birth (if applicable)

**NOTE:** Provide all other names you have ever used, including your family name at birth, other legal names, nicknames, aliases, and assumed names. If you need extra space to complete this section, use the space provided in Part 14. **Additional Information.**

2.a. Family Name (Last Name)

2.b. Given Name (First Name)

2.c. Middle Name

### Other Information About You

5. Date of Birth (mm/dd/yyyy)

**NOTE:** In addition to providing your actual date of birth, include any other dates of birth you have used in connection with any legal names or non-legal names in the space provided in Part 14. **Additional Information.**

6. Sex  Male  Female

7. City or Town of Birth



**Part 1. Information About You (Person applying for lawful permanent residence) (continued)**

- 8. Country of Birth  
China
- 9. Country of Citizenship or Nationality  
China
- 10. Alien Registration Number (A-Number) (if any)  
▶ A- 1 1 6 5 6 4 7 4 9

**NOTE:** If you have **EVER** used other A-Numbers, include the additional A-Numbers in the space provided in **Part 14. Additional Information.**

- 11. USCIS Online Account Number (if any)  
▶

**U.S. Mailing Address**

- 12.a. In Care Of Name (if any)
- 12.b. Street Number and Name 12421 Sanford St
- 12.c.  Apt.  Ste.  Flr.
- 12.d. City or Town Los Angeles
- 12.e. State CA 12.f. ZIP Code 90066

**Alternate and/or Safe Mailing Address**

If you are applying based on the Violence Against Women Act (VAWA) or as a special immigrant juvenile, human trafficking victim (T nonimmigrant), or victim of a qualifying crime (U nonimmigrant) and you do not want USCIS to send notices about this application to your home, you may provide an alternative and/or safe mailing address.

- 13.a. In Care Of Name (if any)
- 13.b. Street Number and Name
- 13.c.  Apt.  Ste.  Flr.
- 13.d. City or Town
- 13.e. State 13.f. ZIP Code

**Social Security Card**

- 14. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you?  
 Yes  No  
If you answered "Yes," provide the information requested in **Item Number 15.**
- 15. Provide your U.S. Social Security Number (SSN).  
▶
- 16. Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to **Item Number 17. Consent for Disclosure**, to receive a card).  
 Yes  No
- 17. **Consent for Disclosure:** I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security Card.  
 Yes  No

**Recent Immigration History**

Provide the information for **Item Numbers 18. - 24.** if you last entered the United States using a passport or travel document.

- 18. Passport Number Used at Last Arrival  
EJ4954380
  - 19. Travel Document Number Used at Last Arrival
  - 20. Expiration Date of this Passport or Travel Document (mm/dd/yyyy) 07/12/2031
  - 21. Country that Issued this Passport or Travel Document  
China
  - 22. Nonimmigrant Visa Number from this Passport (if any)  
P9957454
- Place of Last Arrival into the United States
- 23.a. City or Town  
Los Angeles
  - 23.b. State CA
  - 24. Date of Last Arrival (mm/dd/yyyy) 11/07/2023



**Part 1. Information About You (Person applying for lawful permanent residence) (continued)**

When I last arrived in the United States, I:

25.a.  Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):

H-1B

25.b.  Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole):

25.c.  Came into the United States without admission or parole.

25.d.  Other:

If you were issued a Form I-94 Arrival-Departure Record Number:

26.a. Form I-94 Arrival-Departure Record Number

► 6 2 4 5 2 3 4 0 6 A 3

26.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)

06/04/2026

26.c. Status on Form I-94 (for example, class of admission, or paroled, if paroled)

H-1B

27. What is your current immigration status (if it has changed since your arrival)?

H-1B

Provide your name exactly as it appears on your Form I-94 (if any)

28.a. Family Name (Last Name) JIANG

28.b. Given Name (First Name) XUEWEI

28.c. Middle Name

**Part 2. Application Type or Filing Category**

**NOTE:** Attach a copy of the Form I-797 receipt or approval notice for the underlying petition or application, as appropriate.

**I am applying** to register lawful permanent residence or adjust status to that of a lawful permanent resident based on the following immigrant category (select **only one** box). (See the Form I-485 Instructions for more information, including any **Additional Instructions** that relate to the immigrant category you select.):

**1.a. Family-based**

- Immediate relative of a U.S. citizen, Form I-130
- Other relative of a U.S. citizen or relative of a lawful permanent resident under the family-based preference categories, Form I-130
- Person admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)
- Widow or widower of a U.S. citizen, Form I-360
- VAWA self-petitioner, Form I-360

**1.b. Employment-based**

- Alien worker, Form I-140
- Alien entrepreneur, Form I-526

**1.c. Special Immigrant**

- Religious worker, Form I-360
- Special immigrant juvenile, Form I-360
- Certain Afghan or Iraqi National, Form I-360 or Form DS-157
- Certain international broadcaster, Form I-360
- Certain G-4 international organization or family member or NATO-6 employee or family member, Form I-360

**1.d. Asylee or Refugee**

- Asylum status (INA section 208), Form I-589 or Form I-730
- Refugee status (INA section 207), Form I-590 or Form I-730

**1.e. Human Trafficking Victim or Crime Victim**

- Human trafficking victim (T Nonimmigrant), Form I-914 or derivative family member, Form I-914A
- Crime victim (U Nonimmigrant), Form I-918, derivative family member, Form I-918A, or qualifying family member, Form I-929



**Part 2. Application Type or Filing Category (continued)**

- 1.f. Special Programs Based on Certain Public Laws**
- The Cuban Adjustment Act
  - The Cuban Adjustment Act for battered spouses and children
  - Dependent status under the Haitian Refugee Immigrant Fairness Act
  - Dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children
  - Lautenberg Parolees
  - Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957)
  - Indochinese Parole Adjustment Act of 2000

- 1.g. Additional Options**
- Diversity Visa program
  - Continuous residence in the United States since before January 1, 1972 ("Registry")
  - Individual born in the United States under diplomatic status
  - Other eligibility

**2.** Are you applying for adjustment based on the Immigration and Nationality Act (INA) section 245(i)?  
 Yes  No

**NOTE:** If you answered "Yes" to **Item Number 2.**, you must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category listed above in **Item Numbers 1.a. - 1.g.** as the basis for your application for adjustment of status. Fill out the rest of this application and Supplement A to Form I-485, Adjustment of Status Under Section 245(i) (Supplement A). For detailed filing instructions, read the Form I-485 Instructions (including any **Additional Instructions** that relate to the immigrant category that you selected in **Item Numbers 1.a. - 1.g.**) and Supplement A Instructions.

**Information About Your Immigrant Category**

If you are the **principal applicant**, provide the following information.

- 3.** Receipt Number of Underlying Petition (if any)
- 4.** Priority Date from Underlying Petition (if any) (mm/dd/yyyy)

If you are a **derivative applicant** (the spouse or unmarried child under 21 years of age of a principal applicant), provide the following information for the **principal applicant**.

- Principal Applicant's Name
- 5.a.** Family Name (Last Name)
- 5.b.** Given Name (First Name)
- 5.c.** Middle Name
- 6.** Principal Applicant's A-Number (if any) ▶ A-
- 7.** Principal Applicant's Date of Birth (mm/dd/yyyy)
- 8.** Receipt Number of Principal's Underlying Petition (if any) ▶
- 9.** Priority Date of Principal Applicant's Underlying Petition (if any) (mm/dd/yyyy)

**Part 3. Additional Information About You**

- 1.** Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S. Consulate abroad?  Yes  No

If you answered "Yes" to **Item Number 1.**, complete **Item Numbers 2.a. - 4.** below. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

- Location of U.S. Embassy or U.S. Consulate
- 2.a.** City
- 2.b.** Country
- 3.** Decision (for example, approved, refused, denied, withdrawn)
- 4.** Date of Decision (mm/dd/yyyy)



**Part 3. Additional Information About You**  
(continued)

**Address History**

Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

Physical Address 1 (current address)

5.a. Street Number and Name

5.b.  Apt.  Ste.  Flr.

5.c. City or Town

5.d. State  5.e. ZIP Code

5.f. Province

5.g. Postal Code

5.h. Country

Dates of Residence

6.a. From (mm/dd/yyyy)

6.b. To (mm/dd/yyyy)

Physical Address 2

7.a. Street Number and Name

7.b.  Apt.  Ste.  Flr.

7.c. City or Town

7.d. State  7.e. ZIP Code

7.f. Province

7.g. Postal Code

7.h. Country

Dates of Residence

8.a. From (mm/dd/yyyy)

8.b. To (mm/dd/yyyy)

Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).

9.a. Street Number and Name

9.b.  Apt.  Ste.  Flr.

9.c. City or Town

9.d. State

9.e. ZIP Code

9.f. Province

9.g. Postal Code

9.h. Country

Dates of Residence

10.a. From (mm/dd/yyyy)

10.b. To (mm/dd/yyyy)

**Employment History**

Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

Employer 1 (current or most recent)

11. Name of Employer or Company

Address of Employer or Company

12.a. Street Number and Name

12.b.  Apt.  Ste.  Flr.

12.c. City or Town

12.d. State  12.e. ZIP Code

12.f. Province

12.g. Postal Code

12.h. Country

13. Your Occupation



**Part 3. Additional Information About You**  
(continued)

Dates of Employment

14.a. From (mm/dd/yyyy)

14.b. To (mm/dd/yyyy)

Employer 2

15. Name of Employer or Company

Address of Employer or Company

16.a. Street Number and Name

16.b.  Apt.  Ste.  Flr.

16.c. City or Town

16.d. State  16.e. ZIP Code

16.f. Province

16.g. Postal Code

16.h. Country

17. Your Occupation

Dates of Employment

18.a. From (mm/dd/yyyy)

18.b. To (mm/dd/yyyy)

Provide your most recent employment outside of the United States (if not already listed above).

19. Name of Employer or Company

Address of Employer or Company

20.a. Street Number and Name

20.b.  Apt.  Ste.  Flr.

20.c. City or Town

20.d. State  20.e. ZIP Code

20.f. Province

20.g. Postal Code

20.h. Country

21. Your Occupation

Dates of Employment

22.a. From (mm/dd/yyyy)

22.b. To (mm/dd/yyyy)

**Part 4. Information About Your Parents**

*Information About Your Parent 1*

Parent 1's Legal Name

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

Parent 1's Name at Birth (if different than above)

2.a. Family Name (Last Name)

2.b. Given Name (First Name)

2.c. Middle Name

3. Date of Birth (mm/dd/yyyy)

4. Sex  Male  Female

5. City or Town of Birth

6. Country of Birth



**Part 4. Information About Your Parents (continued)**

- 7. Current City or Town of Residence (if living)  
Jinan
- 8. Current Country of Residence (if living)  
China

**Information About Your Parent 2**

Parent 2's Legal Name

- 9.a. Family Name (Last Name) JIANG
- 9.b. Given Name (First Name) XIANLU
- 9.c. Middle Name

Parent 2's Name at Birth (if different than above)

- 10.a. Family Name (Last Name)
- 10.b. Given Name (First Name)
- 10.c. Middle Name
- 11. Date of Birth (mm/dd/yyyy) 01/28/1968

12. Sex  Male  Female

- 13. City or Town of Birth Haiyang
- 14. Country of Birth China

- 15. Current City or Town of Residence (if living) Jinan
- 16. Current Country of Residence (if living) China

**Part 5. Information About Your Marital History**

- 1. What is your current marital status?  
 Single, Never Married  Married  Divorced  
 Widowed  Marriage Annulled  
 Legally Separated
- 2. If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?  
 N/A  Yes  No

- 3. How many times have you been married (including annulled marriages and marriages to the same person)?  
1

**Information About Your Current Marriage (including if you are legally separated)**

If you are currently married, provide the following information about your current spouse.

Current Spouse's Legal Name

- 4.a. Family Name (Last Name) LU
- 4.b. Given Name (First Name) YANXIN
- 4.c. Middle Name
- 5. A-Number (if any) ▶ A- 2 1 8 0 5 6 2 0 3

- 6. Current Spouse's Date of Birth (mm/dd/yyyy) 10/17/1989
- 7. Date of Marriage to Current Spouse (mm/dd/yyyy) 08/08/2016

Current Spouse's Place of Birth

- 8.a. City or Town Guiyang
- 8.b. State or Province Guizhou
- 8.c. Country China

Place of Marriage to Current Spouse

- 9.a. City or Town Jinan
- 9.b. State or Province Shandong
- 9.c. Country China

- 10. Is your current spouse applying with you?  Yes  No



**Part 5. Information About Your Marital History**  
(continued)

*Information About Prior Marriages (if any)*

If you have been married before, whether in the United States or in any other country, provide the following information about your prior spouse. If you have had more than one previous marriage, use the space provided in **Part 14. Additional Information** to provide the information below.

Prior Spouse's Legal Name (provide family name before marriage)

11.a. Family Name (Last Name)

11.b. Given Name (First Name)

11.c. Middle Name

12. Prior Spouse's Date of Birth (mm/dd/yyyy)

13. Date of Marriage to Prior Spouse (mm/dd/yyyy)

Place of Marriage to Prior Spouse

14.a. City or Town

14.b. State or Province

14.c. Country

15. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)

Place Where Marriage with Prior Spouse Legally Ended

16.a. City or Town

16.b. State or Province

16.c. Country

**Part 6. Information About Your Children**

1. Indicate the total number of ALL living children (including adult sons and daughters) that you have.

**NOTE:** The term "children" includes all biological or legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other countries, married or unmarried, living with you or elsewhere and includes any missing children and those born to you outside of marriage.

Provide the following information for each of your children. If you have more than three children, use the space provided in **Part 14. Additional Information**.

Child 1

Current Legal Name

2.a. Family Name (Last Name)

2.b. Given Name (First Name)

2.c. Middle Name

3. A-Number (if any) ► A-

4. Date of Birth (mm/dd/yyyy)

5. Country of Birth

6. Is this child applying with you?  Yes  No

Child 2

Current Legal Name

7.a. Family Name (Last Name)

7.b. Given Name (First Name)

7.c. Middle Name

8. A-Number (if any) ► A-

9. Date of Birth (mm/dd/yyyy)

10. Country of Birth

11. Is this child applying with you?  Yes  No



**Part 6. Information About Your Children**  
(continued)

Child 3

Current Legal Name

12.a. Family Name (Last Name)

12.b. Given Name (First Name)

12.c. Middle Name

13. A-Number (if any) ► A-

14. Date of Birth (mm/dd/yyyy)

15. Country of Birth

16. Is this child applying with you?  Yes  No

**Part 7. Biographic Information**

1. Ethnicity (Select only one box)

- Hispanic or Latino
- Not Hispanic or Latino

2. Race (Select all applicable boxes)

- White
- Asian
- Black or African American
- American Indian or Alaska Native
- Native Hawaiian or Other Pacific Islander

3. Height Feet  Inches

4. Weight Pounds

5. Eye Color (Select only one box)

- Black  Blue  Brown
- Gray  Green  Hazel
- Maroon  Pink  Unknown/Other

6. Hair Color (Select only one box)

- Bald (No hair)  Black  Blond
- Brown  Gray  Red
- Sandy  White  Unknown/Other

**Part 8. General Eligibility and Inadmissibility Grounds**

1. Have you **EVER** been a member of, involved in, or in any way associated with any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world including any military service?  Yes  No

If you answered "Yes" to Item Number 1., complete Item Numbers 2. - 13.b. below. If you need extra space to complete this section, use the space provided in Part 14. Additional Information. If you answered "No," but are unsure of your answer, provide an explanation of the events and circumstances in the space provided in Part 14. Additional Information.

Organization 1

2. Name of Organization

3.a. City or Town

3.b. State or Province

3.c. Country

4. Nature of Group

Dates of Membership or Dates of Involvement

5.a. From (mm/dd/yyyy)

5.b. To (mm/dd/yyyy)

Organization 2

6. Name of Organization

7.a. City or Town

7.b. State or Province

7.c. Country

8. Nature of Group



**Part 8. General Eligibility and Inadmissibility Grounds (continued)**

**Dates of Membership or Dates of Involvement**

9.a. From (mm/dd/yyyy)

9.b. To (mm/dd/yyyy)

**Organization 3**

10. Name of Organization

11.a. City or Town

11.b. State or Province

11.c. Country

12. Nature of Group

**Dates of Membership or Dates of Involvement**

13.a. From (mm/dd/yyyy)

13.b. To (mm/dd/yyyy)

Answer Item Numbers 14. - 86.b. Choose the answer that you think is correct. If you answer "Yes" to any questions (or if you answer "No," but are unsure of your answer), provide an explanation of the events and circumstances in the space provided in Part 14. Additional Information.

14. Have you EVER been denied admission to the United States?  Yes  No

15. Have you EVER been denied a visa to the United States?  Yes  No

16. Have you EVER worked in the United States without authorization?  Yes  No

17. Have you EVER violated the terms or conditions of your nonimmigrant status?  Yes  No

18. Are you presently or have you EVER been in removal, exclusion, rescission, or deportation proceedings?  Yes  No

19. Have you EVER been issued a final order of exclusion, deportation, or removal?  Yes  No

20. Have you EVER had a prior final order of exclusion, deportation, or removal reinstated?  Yes  No

21. Have you EVER held lawful permanent resident status which was later rescinded?  Yes  No

22. Have you EVER been granted voluntary departure by an immigration officer or an immigration judge but failed to depart within the allotted time?  Yes  No

23. Have you EVER applied for any kind of relief or protection from removal, exclusion, or deportation?  Yes  No

24.a. Have you EVER been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement?  Yes  No

If you answered "Yes" to Item Number 24.a., complete Item Numbers 24.b. - 24.c. If you answered "No" to Item Number 24.a., skip to Item Number 25.

24.b. Have you complied with the foreign residence requirement?  Yes  No

24.c. Have you been granted a waiver or has Department of State issued a favorable waiver recommendation letter for you?  Yes  No

**Criminal Acts and Violations**

For Item Numbers 25. - 45., you must answer "Yes" to any question that applies to you, even if your records were sealed or otherwise cleared, or even if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. You must also answer "Yes" to the following questions whether the action or offense occurred here in the United States or anywhere else in the world. If you answer "Yes" to Item Numbers 25. - 45., use the space provided in Part 14. Additional Information to provide an explanation that includes why you were arrested, cited, detained, or charged; where you were arrested, cited, detained, or charged; when (date) the event occurred; and the outcome or disposition (for example, no charges filed, charges dismissed, jail, probation, community service).

25. Have you EVER been arrested, cited, charged, or detained for any reason by any law enforcement official (including but not limited to any U.S. immigration official or any official of the U.S. armed forces or U.S. Coast Guard)?  Yes  No

26. Have you EVER committed a crime of any kind (even if you were not arrested, cited, charged with, or tried for that crime)?  Yes  No



**Part 8. General Eligibility and Inadmissibility Grounds (continued)**

27. Have you **EVER** pled guilty to or been convicted of a crime or offense (even if the violation was subsequently expunged or sealed by a court, or if you were granted a pardon, amnesty, a rehabilitation decree, or other act of clemency)?  Yes  No

**NOTE:** If you were the beneficiary of a pardon, amnesty, a rehabilitation decree, or other act of clemency, provide documentation of that post-conviction action.

28. Have you **EVER** been ordered punished by a judge or had conditions imposed on you that restrained your liberty (such as a prison sentence, suspended sentence, house arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or community service)?  Yes  No

29. Have you **EVER** been a defendant or the accused in a criminal proceeding (including pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication)?  Yes  No

30. Have you **EVER** violated (or attempted or conspired to violate) any controlled substance law or regulation of a state, the United States, or a foreign country?  Yes  No

31. Have you **EVER** been convicted of two or more offenses (other than purely political offenses) for which the combined sentences to confinement were five years or more?  Yes  No

32. Have you **EVER** illicitly (illegally) trafficked or benefited from the trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics?  Yes  No

33. Have you **EVER** knowingly aided, abetted, assisted, conspired, or colluded in the illicit trafficking of any illegal narcotic or other controlled substances?  Yes  No

34. Are you the spouse, son, or daughter of a foreign national who illicitly trafficked or aided (or otherwise abetted, assisted, conspired, or colluded) in the illicit trafficking of a controlled substance, such as chemicals, illegal drugs, or narcotics and you obtained, within the last five years, any financial or other benefit from the illegal activity of your spouse or parent, although you knew or reasonably should have known that the financial or other benefit resulted from the illicit activity of your spouse or parent?  Yes  No

35. Have you **EVER** engaged in prostitution or are you coming to the United States to engage in prostitution?  Yes  No

36. Have you **EVER** directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution?  Yes  No

37. Have you **EVER** received any proceeds or money from prostitution?  Yes  No

38. Do you intend to engage in illegal gambling or any other form of commercialized vice, such as prostitution, bootlegging, or the sale of child pornography, while in the United States?  Yes  No

39. Have you **EVER** exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States?  Yes  No

40. Have you **EVER**, while serving as a foreign government official, been responsible for or directly carried out violations of religious freedoms?  Yes  No

41. Have you **EVER** induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of persons for commercial sex acts?  Yes  No

42. Have you **EVER** trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Trafficking includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion.  Yes  No

43. Have you **EVER** knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery?  Yes  No

44. Are you the spouse, son or daughter of a foreign national who engaged in the trafficking of persons and have received or obtained, within the last five years, any financial or other benefits from the illicit activity of your spouse or your parent, although you knew or reasonably should have known that this benefit resulted from the illicit activity of your spouse or parent?  Yes  No

45. Have you **EVER** engaged in money laundering or have you **EVER** knowingly aided, assisted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity?  Yes  No



**Part 8. General Eligibility and Inadmissibility Grounds (continued)**

**Security and Related**

Do you intend to:

- 46.a. Engage in any activity that violates or evades any law relating to espionage (including spying) or sabotage in the United States?  Yes  No
- 46.b. Engage in any activity in the United States that violates or evades any law prohibiting the export from the United States of goods, technology, or sensitive information?  Yes  No
- 46.c. Engage in any activity whose purpose includes opposing, controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States?  Yes  No
- 46.d. Engage in any activity that could endanger the welfare, safety, or security of the United States?  Yes  No
- 46.e. Engage in any other unlawful activity?  Yes  No
- 47. Are you engaged in or, upon your entry into the United States, do you intend to engage in any activity that could have potentially serious adverse foreign policy consequences for the United States?  Yes  No

Have you EVER:

- 48.a. Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated, planned, or prepared any of the following: hijacking, sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause substantial damage to property?  Yes  No
- 48.b. Participated in, or been a member of, a group or organization that did any of the activities described in Item Number 48.a.?  Yes  No
- 48.c. Recruited members or asked for money or things of value for a group or organization that did any of the activities described in Item Number 48.a.?  Yes  No
- 48.d. Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities described in Item Number 48.a.?  Yes  No

- 48.e. Provided money, a thing of value, services or labor, or any other assistance or support for an individual, group, or organization who did any of the activities described in Item Number 48.a.?  Yes  No
- 49. Have you EVER received any type of military, paramilitary, or weapons training?  Yes  No
- 50. Do you intend to engage in any of the activities listed in any part of Item Numbers 48.a. - 49.?  Yes  No

**NOTE:** If you answered "Yes" to any part of Item Numbers 46.a. - 50., explain what you did, including the dates and location of the circumstances, or what you intend to do in the space provided in Part 14. Additional Information.

Are you the spouse or child of an individual who EVER:

- 51.a. Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated, planned, or prepared any of the following: hijacking, sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause substantial damage to property?  Yes  No
- 51.b. Participated in, or been a member or a representative of a group or organization that did any of the activities described in Item Number 51.a.?  Yes  No
- 51.c. Recruited members, or asked for money or things of value, for a group or organization that did any of the activities described in Item Number 51.a.?  Yes  No
- 51.d. Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities described in Item Number 51.a.?  Yes  No
- 51.e. Provided money, a thing of value, services or labor, or any other assistance or support to an individual, group, or organization who did any of the activities described in Item Number 51.a.?  Yes  No
- 51.f. Received any type of military, paramilitary, or weapons training from a group or organization that did any of the activities described in Item Number 51.a.?  Yes  No

**NOTE:** If you answered "Yes" to any part of Item Number 51., explain the relationship and what occurred, including the dates and location of the circumstances, in the space provided in Part 14. Additional Information.

- 52. Have you EVER assisted or participated in selling, providing, or transporting weapons to any person who, to your knowledge, used them against another person?  Yes  No



**Part 8. General Eligibility and Inadmissibility Grounds (continued)**

53. Have you **EVER** worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?  Yes  No
54. Have you **EVER** been a member of, assisted, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?  Yes  No
55. Have you **EVER** served in, been a member of, assisted, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, insurgent organization, or any other armed group?  Yes  No
56. Have you **EVER** been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party (in the United States or abroad)?  Yes  No
57. During the period from March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion, in association with either the Nazi government of Germany or any organization or government associated or allied with the Nazi government of Germany?  Yes  No
- Have you **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:
- 58.a. Acts involving torture or genocide?  Yes  No
- 58.b. Killing any person?  Yes  No
- 58.c. Intentionally and severely injuring any person?  Yes  No
- 58.d. Engaging in any kind of sexual contact or relations with any person who did not consent or was unable to consent, or was being forced or threatened?  Yes  No
- 58.e. Limiting or denying any person's ability to exercise religious beliefs?  Yes  No
59. Have you **EVER** recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group?  Yes  No

60. Have you **EVER** used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat?  Yes  No

**NOTE:** If you answered "Yes" to any part of **Item Numbers 52. - 60.**, explain what occurred, including the dates and location of the circumstances, in the space provided in **Part 14. Additional Information.**

**Public Charge**

61. Are you subject to the public charge ground of inadmissibility under INA section 212(a)(4)?  Yes  No

If you answered "Yes" to **Item Number 61.**, complete **Item Numbers 62. - 68.d.** below. If you answered "No" to **Item Number 61.**, go to **Item Number 69.a.** If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

62. What is the size of your household?  

2
63. Indicate your annual household income.
- \$0-27,000
- \$27,001-52,000
- \$52,001-85,000
- \$85,001-141,000
- Over \$141,000
64. Identify the total value of your household assets.
- \$0-18,400
- \$18,401-136,000
- \$136,001-321,400
- \$321,401-707,100
- Over \$707,100





**Part 8. General Eligibility and Inadmissibility  
Grounds (continued)**

***Illegal Entries and Other Immigration Violations***

- 69.a. Have you **EVER** failed or refused to attend or to remain in attendance at any removal proceeding filed against you on or after April 1, 1997?  Yes  No
- 69.b. If your answer to Item Number 69.a. is "Yes," do you believe you had reasonable cause?  Yes  No
- 69.c. If your answer to Item Number 69.b. is "Yes," attach a written statement explaining why you had reasonable cause.
- 70. Have you **EVER** submitted fraudulent or counterfeit documentation to any U.S. Government official to obtain or attempt to obtain any immigration benefit, including a visa or entry into the United States?  Yes  No
- 71. Have you **EVER** lied about, concealed, or misrepresented any information on an application or petition to obtain a visa, other documentation required for entry into the United States, admission to the United States, or any other kind of immigration benefit?  Yes  No
- 72. Have you **EVER** falsely claimed to be a U.S. citizen (in writing or any other way)?  Yes  No
- 73. Have you **EVER** been a stowaway on a vessel or aircraft arriving in the United States?  Yes  No
- 74. Have you **EVER** knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or to try to enter the United States illegally (alien smuggling)?  Yes  No
- 75. Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?  Yes  No

***Removal, Unlawful Presence, or Illegal Reentry After Previous Immigration Violations***

- 76. Have you **EVER** been excluded, deported, or removed from the United States or have you ever departed the United States on your own after having been ordered excluded, deported, or removed from the United States?  Yes  No
- 77. Have you **EVER** entered the United States without being inspected and admitted or paroled?  Yes  No

Since April 1, 1997, have you been unlawfully present in the United States:

- 78.a. For more than 180 days but less than a year, and then departed the United States?  Yes  No
- 78.b. For one year or more and then departed the United States?  Yes  No

**NOTE:** You were unlawfully present in the United States if you entered the United States without being inspected and admitted or inspected and paroled, or if you legally entered the United States but you stayed longer than permitted.

Since April 1, 1997, have you **EVER** reentered or attempted to reenter the United States without being inspected and admitted or paroled after:

- 79.a. Having been unlawfully present in the United States for more than one year in the aggregate?  Yes  No
- 79.b. Having been deported, excluded, or removed from the United States?  Yes  No

***Miscellaneous Conduct***

- 80. Do you plan to practice polygamy in the United States?  Yes  No
- 81. Are you accompanying another foreign national who requires your protection or guardianship but who is inadmissible after being certified by a medical officer as being helpless from sickness, physical or mental disability, or infancy, as described in INA section 232(c)?  Yes  No
- 82. Have you **EVER** assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted custody of the child?  Yes  No
- 83. Have you **EVER** voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States?  Yes  No
- 84. Have you **EVER** renounced U.S. citizenship to avoid being taxed by the United States?  Yes  No

Have you **EVER**:

- 85.a. Applied for exemption or discharge from training or service in the U.S. armed forces or in the U.S. National Security Training Corps on the ground that you are a foreign national?  Yes  No



**Part 8. General Eligibility and Inadmissibility Grounds (continued)**

- 85.b. Been relieved or discharged from such training or service on the ground that you are a foreign national?  
 Yes  No
- 85.c. Been convicted of desertion from the U.S. armed forces?  
 Yes  No
- 86.a. Have you EVER left or remained outside the United States to avoid or evade training or service in the U.S. armed forces in time of war or a period declared by the President to be a national emergency?  Yes  No
- 86.b. If your answer to Item Number 86.a. is "Yes," what was your nationality or immigration status immediately before you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?

**Part 9. Accommodations for Individuals With Disabilities and/or Impairments**

**NOTE:** Read the information in the Form I-485 Instructions before completing this part.

- 1. Are you requesting an accommodation because of your disabilities and/or impairments?  Yes  No

If you answered "Yes" to Item Number 1., select any applicable box in Item Numbers 2.a. - 2.c. and provide an answer.

- 2.a.  I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).):

- 2.b.  I am blind or have low vision and request the following accommodation:

- 2.c.  I have another type of disability and/or impairment. (Describe the nature of your disability and/or impairment and the accommodation you are requesting.)

**Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature**

**NOTE:** Read the Penalties section of the Form I-485 Instructions before completing this part. You must file Form I-485 while in the United States.

**Applicant's Statement**

**NOTE:** Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.

- 1.a.  I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 1.b.  The interpreter named in Part 11. read to me every question and instruction on this application and my answer to every question in  
,  
 a language in which I am fluent, and I understood everything.
- 2.  At my request, the preparer named in Part 12.,  
 Gilberto Orozco Jr.,  
 prepared this application for me based only upon information I provided or authorized.

**Applicant's Contact Information**

- 3. Applicant's Daytime Telephone Number  
 (469) 940-7789
- 4. Applicant's Mobile Telephone Number (if any)
- 5. Applicant's Email Address (if any)  
 gorozco@BAL.com



**Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)**

***Applicant's Declaration and Certification***

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I understand that if I am a male who is 18 to 26 years of age, submitting this application will automatically register me with the Selective Service System as required by the Military Selective Service Act.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.


I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

***Applicant's Signature***

6.a. Applicant's Signature (sign in ink)

➔ 

6.b. Date of Signature (mm/dd/yyyy)

10/23/2023

**NOTE TO ALL APPLICANTS:** If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

**Part 11. Interpreter's Contact Information, Certification, and Signature**

Provide the following information about the interpreter.

***Interpreter's Full Name***

1.a. Interpreter's Family Name (Last Name)

1.b. Interpreter's Given Name (First Name)

2. Interpreter's Business or Organization Name (if any)

***Interpreter's Mailing Address***

3.a. Street Number and Name

3.b.  Apt.  Ste.  Flr.

3.c. City or Town

3.d. State

3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

***Interpreter's Contact Information***

4. Interpreter's Daytime Telephone Number

5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)



**Part 11. Interpreter's Contact Information Certification, and Signature (continued)**

**Interpreter's Certification**

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in Part 10., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.

**Interpreter's Signature**

7.a. Interpreter's Signature (sign in ink)

7.b. Date of Signature (mm/dd/yyyy)

**Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant**

Provide the following information about the preparer.

**Preparer's Full Name**

1.a. Preparer's Family Name (Last Name)

1.b. Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name (if any)

**Preparer's Mailing Address**

3.a. Street Number and Name

3.b.  Apt.  Ste.  Flr.

3.c. City or Town

3.d. State  3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

**Preparer's Contact Information**

4. Preparer's Daytime Telephone Number

5. Preparer's Mobile Telephone Number (if any)

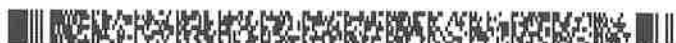
6. Preparer's Email Address (if any)

**Preparer's Statement**

7.a.  I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

7.b.  I am an attorney or accredited representative and my representation of the applicant in this case  extends  does not extend beyond the preparation of this application.

**NOTE:** If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

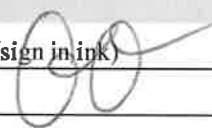


**Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)**

**Preparer's Certification**

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

**Preparer's Signature**

8.a. Preparer's Signature (sign in ink) 

8.b. Date of Signature (mm/dd/yyyy)

**NOTE: Do not complete Part 13. until the USCIS Officer instructs you to do so at the interview.**

**Part 13. Signature at Interview**

I swear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form I-485, Application to Register Permanent Residence or Adjust Status, subscribed by me, including the corrections made to this application, numbered  through , are complete, true, and correct. All additional pages submitted by me with this Form I-485, on numbered pages  through  are complete, true, and correct. All documents submitted at this interview were provided by me and are complete, true, and correct.

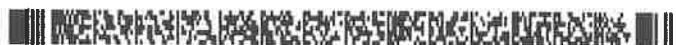
Subscribed to and sworn to (affirmed) before me

USCIS Officer's Printed Name or Stamp

Date of Signature (mm/dd/yyyy)

Applicant's Signature (sign in ink)

USCIS Officer's Signature (sign in ink)





**Addendum for Form I-485 for Xuewei Jiang**  
**A-Number: 116564749**

**Part 8, General Eligibility and Inadmissibility Grounds**

**Page 13, Part 8, Item 56:** Have you **EVER** been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party (in the United States or abroad)?

Yes. I was a member of the organization called Young Pioneers from approximately October 2001 to October 2007. This was a mandatory group during primary school. When I reached high school age, I was automatically placed in the next organization, called Communist Youth League from October 2007 to December 2011.

I was never an active member of the Communist Party.

I am no longer a member of, or in any way affiliated with, nor have I been involved with, any Communist Party or affiliated organization since 2011. My membership lapsed automatically six months after graduation without paying membership fees. I currently do not support or subscribe to the beliefs of any Communist Party or affiliated organization.

I certify under the penalty of perjury that the foregoing is true and correct.

Signed:   
Xuewei Jiang


Date: 10/23/2023

**Addendum for Form I-485 for Xuewei Jiang**

**A-Number: 116564749**

**Part 3, Address History**

<b>Physical Address</b>	<b>From</b>	<b>To</b>
11950 Idaho Ave., 113, Los Angeles, California 90025, United States	11/21/2020	11/20/2022
1000 Escalon Ave, K2087, Sunnyvale, California 94085, United States	05/25/2020	12/27/2020
3517 N Hills Drive, A104, Austin, Texas 78731, United States	11/01/2017	05/24/2020

Signed:   
Xuewei Jiang

Date: 10/23/2023

# I-797 | NOTICE OF ACTION

DEPARTMENT OF HOMELAND SECURITY  
U.S. CITIZENSHIP AND IMMIGRATION SERVICES

Receipt Number LIN2025750217		Case Type I140 - IMMIGRANT PETITION FOR ALIEN WORKER
Received Date 07/22/2020	Priority Date 09/27/2019	Petitioner FACEBOOK INC
Notice Date 07/29/2020	Page 1 of 1	Beneficiary A218 056 203 LU. YANXIN

FACEBOOK INC  
c/o GLORIA LUAN  
BERRY APPLEMAN LEIDEN LLP  
50 CALIFORNIA STREET FLR 2  
SAN FRANCISCO CA 94111

**Notice Type:** Approval Notice  
**Section:** Mem of Profession w/Adv Deg, or of  
Exceptn'l Ability Sec.203(b)(2)  
**Consulate:**  
**ETA Case Number:** A1926159588  
**SOC Code:** 151133 **Skill Level:** 2  
**Work Site:** MENLO PARK CA

The above petition has been approved. The petition indicates that the person for whom you are petitioning is in the United States and will apply for adjustment of status. He or she should contact the local USCIS office to obtain Form I-485, Application to Register Permanent Residence or Adjust Status. A copy of this notice should be submitted with the application, with appropriate fee, to this Service Center. Additional information about eligibility for adjustment of status may be obtained from the local USCIS office serving the area where he or she lives, or by calling 1-800-375-5283.

If the person for whom you are petitioning decides to apply for a visa outside the United States based upon this petition, the petitioner should file Form I-824, Application for Action on an Approved Application or Petition, to request that we send the petition to the Department of State National Visa Center (NVC).

The NVC processes all approved immigrant visa petitions that require consular action. The NVC also determines which consular post is the appropriate consulate to complete visa processing. It will then forward the approved petition to that consulate.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa, for admission to the United States, or for an extension, change, or adjustment of status.

**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

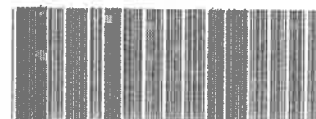
The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-205-2417 or fax 202-481-5719.

**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

Nebraska Service Center  
U. S. CITIZENSHIP & IMMIGRATION SVC  
P.O. Box 82521  
Lincoln NE 68501-2521

USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)



# THE UNITED STATES OF AMERICA

I-797 | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY  
U.S. CITIZENSHIP AND IMMIGRATION SERVICE



Receipt Number LIN2221153112		Case Type H-1B - IMMIGRANT PETITION FOR ALIEN WORKER
Received Date 05/16/2022	Priority Date 08/09/2021	Petitioner UNIVERSITY SOUTHERN CALIFORNIA
Notice Date 05/18/2022	Page 1 of 1	Beneficiary A116 561 719 HANG, NUP WEI

UNIVERSITY SOUTHERN CALIFORNIA  
 c/o JOSEPH ELIAS ESQ DIRECTOR ESVS  
 3431 SOUTH GRAND AVE STE CAL 302  
 LOS ANGELES CA 90089

**Notice Type:** Approval Notice  
**Section:** Min of Profession w/Adv Deg. or of Excpnl Ability Sec.203(b)(2)  
**Consulate:**  
**ETA Case Number:** A2117908792  
**SOC Code:** 251011 **Skill Level:** J

The above petition has been approved. The petition indicates that the person for whom you are petitioning is in the United States and will apply for adjustment of status. He or she should contact the local USCIS office to obtain Form I-485, Application to Register Permanent Residence or Adjust Status. A copy of this notice should be submitted with the application, with appropriate fee, to the Service Center. Additional information about eligibility for adjustment of status may be obtained from the local USCIS office serving the area where he or she lives, or by calling 1-800-375-5283.

If the person for whom you are petitioning decides to apply for a visa outside the United States based upon this petition, the petitioner should file Form I-824, Application for Action on an Approved Application or Petition, to request that we send the petition to the Department of State National Visa Center (NVC).

The NVC processes all approved immigrant visa petitions that require consular action. The NVC also determines which consular post is the appropriate consulate to complete visa processing. It will then forward the approved petition to that consulate.

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**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-205-2417 or fax 202-481-8719.

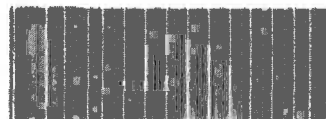
**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may request public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <http://www.uscis.gov/file-online>.

Nebraska Service Center  
 U.S. CITIZENSHIP & IMMIGRATION SVC  
 P.O. Box 82521  
 Lincoln NE 68501-2521

USCIS Contact Center: [www.uscis.gov/contact-center](http://www.uscis.gov/contact-center)



# 公 证 书

中华人民共和国山东省济南市泉城公证处

# 公 证 书

(2021)鲁济南泉城证外字第 18874 号

申请人：姜薛伟，女，一九九三年三月十三日出生，公民身份号码：370105199303130825。

公证事项：出生

兹证明姜薛伟于一九九三年三月十三日在山东省济南市出生。姜薛伟的父亲是姜显禄（公民身份号码：370103196801288717），姜薛伟的母亲是薛丰芹（公民身份号码：370105196504060823）。

中华人民共和国山东省济南市泉城公证处

公 证 员

于永勇



**NOTARIAL CERTIFICATE**

(Translation)

(2021) LQNQCZWZ, No.18874

Applicant: Jiang Xuewei, female, born on Mar.13, 1993, ID  
No.: 370105199303130825.

Issue under notarization: birth

This is to certify that Jiang Xuewei was born in Jinan City,  
Shandong Province on Mar.13, 1993 and that her father is Jiang  
Xianlu (ID No.: 370103196801288717) and her mother is Xue  
Fengqin (ID No.: 370105196504060823).

Jinan Quancheng Notary Public Office

Shandong Province

The People's Republic of China

Notary Public: Yu Changyong

Dec.29, 2021

# 公 证 书

(2021)鲁济南泉城证外字第18875号

申请人：姜薛伟，女，一九九三年三月十三日出生，公民身份号码：370105199303130825。

公证事项：译本与原本相符

兹证明前面的(2021)鲁济南泉城证外字第18874号《公证书》所附的英文译本内容与中文原本相符。

中华人民共和国山东省济南市泉城公证处

公 证 员

于长勇



**NOTARIAL CERTIFICATE**

**(Translation)**

**(2021) LQNQCZWZ. No.18875**

**Applicant: Jiang Xuwei, female, born on Mar.13, 1993, ID  
No.: 370105199303130825.**

**Issue under notarization: true and exact translation**

**This is to certify that the attached English translation copy of  
(2021) LQNQCZWZ. No.18874 Notarial Certificate conforms to the  
original document in Chinese.**

**Jinan Quancheng Notary Public Office**

**Shandong Province**

**The People's Republic of China**

**Notary Public: Yu Changyong**

**Dec.29, 2021**



中华人民共和国民政部监制




结婚申请，符合《中华人民共和国婚姻法》规定，予以登记，发给此证。

登记机关



婚姻登记员

王燕



婚姻法规定，要求结婚的  
男女双方必须亲自到婚姻登记  
机关进行结婚登记。符合本法  
规定的，予以登记，发给结婚  
证。取得结婚证，即确立夫妻  
关系。



NO 0341002846

持证人 陆彦折



登记日期 2016年08月08日

结婚证字号 J370105-2016-002657

备注

姓名	陆彦折	性别	男
国籍	中国	出生日期	1989年10月17日
身份证件号	44018119891017001X		

姓名	姜舜伟	性别	女
国籍	中国	出生日期	1993年03月13日
身份证件号	370105199303130825		

中华人民共和国民政部结婚证印章

Seal for Marriage Certificate of the ministry of Civil Affairs of People's Republic of  
China

中华人民共和国民政部监制

The manufacture was supervised by the Ministry of Civil Affairs of People's Republic of  
China

结婚申请，符合《中华人民共和国婚姻法》规定，予以登记，发给此证。

This application conforms to the Marriage Law of the People's Republic of China. We  
hereby give them the permission to register and issue this marriage certificate.

登记机关

Registration Office

济南市天桥区民政局婚姻登记专用章

Special Seal for Marriage Register of Tienqiao District, Jinan Civil Affairs Bureau

婚姻登记员: 王燕

Marriage Register: Yun Wang

持证人: 陆彦忻

Certificate Holder: Yanxin Lu

登记日期: 2016年08月08日

Registration Date: August, 8<sup>th</sup>, 2016

结婚证字号: J370105-2016-002657

Marriage Certificate No.: J370105-2016-002657

备注

Annotation

姓名: 陆彦忻

Name: Yanxin Lu

国籍: 中国

Nationality: People's Republic of China

身份证号码: 44018119891017001X

ID Number: 44018119891017001X

姓名: 姜蔚伟

Name: Xuwei Jiang

国籍: 中国

Nationality: People's Republic of China

身份证号码: 370105199303130825

ID Number: 370105199303130825

性别: 男

Gender: Male

出生日期: 1989年10月17日

Birth Date: October, 17<sup>th</sup>, 1989

性别: 女

Gender: Female

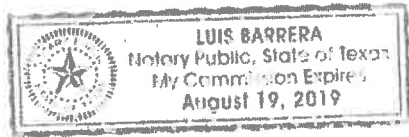
出生日期: 1993年3月13日

Birth Date: March, 13<sup>th</sup>, 1993

婚姻法规定。要求结婚的男女双方必须亲自到婚姻登记机关进行结婚登记。符合本法规定的，予以登记，发给结婚证。取得结婚证，即确立夫妻关系。

The marriage law has prescribed that the man and the woman who want to get married must go to the marriage registration office to make a marriage registration. In line with the provisions of this law, be registered, issued a marriage certificate. The husband-and-wife relationship shall be established as soon as they acquire the marriage certificates.

*[Handwritten signature]*  
State of Texas                      County of Travis  
This instrument was acknowledged before me  
on the 13<sup>th</sup> day of August, 2016  
by [Handwritten name]  
*[Handwritten signature]*  
Notary Public



**Certification by Translator**

I, Xue Li, certify that I am fluent in the English and Chinese languages, and that the above/attached document is an accurate translation of the document attached entitled Marriage Certificate.

Xue Li  
Signature

08/13/2016  
Date

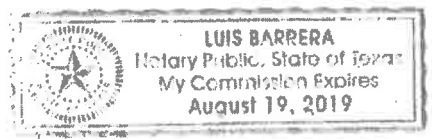
Xue Li  
Printed Name

3500 Greystone Drive, Apt. 270, Austin, TX  
Address  
78731

State of Texas      County of Travis

This instrument was acknowledged before me  
on the 13<sup>th</sup> day of August, 2016  
by Xue Li

[Signature]  
Notary Public





备注 OBSERVATIONS

① 本护照根据中华人民共和国第G49056249号护照换发。

This passport is issued to replace the passport  
No. G49056249 of the PRC.

2021年07月13日于洛杉矶  
13 JUL 2021 LOS ANGELES



备注 OBSERVATIONS

0807130013









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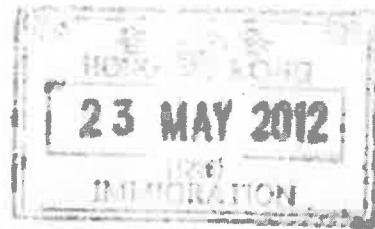
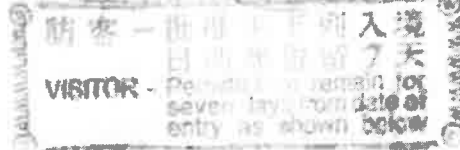
簽證 Visas



G49056249



簽證 Visas



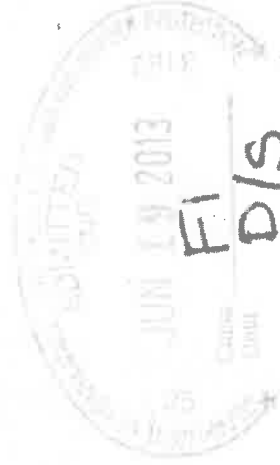
G49056249





簽證 Visas

31



G49056249

簽證 Visas



30







### 注意事项

- 一、本护照为重要身份证件，持照人应妥为保存，使用，不得涂改、转让、故意损毁。任何组织及个人不得非法扣押。
- 二、本护照的签发、换发、补发和加注由公安部出入境管理机构或公安部委托的公安机关出入境管理机构，中国驻外使馆、领馆或外交部委托的其他驻外机构办理。
- 三、本护照遗失或被窃，在国内应立即向当地派出所所在地的公安机关或出入境管理机构报告；在国外应立即向当地或附近的中国驻外使馆、领馆或外交部委托的其他驻外机构报告。
- 四、短期出国的公民在国外发生护照遗失、被盗等情形，应向中国驻外使馆、领馆或外交部委托的其他驻外机构申请中华人民共和国旅行证。

持照人签名 姜蔚华

BEARER'S SIGNATURE

 For: **XUEWEI JIANG**



### Most Recent I-94

---

**Admission (I-94) Record Number : 624523406A3**

**Most Recent Date of Entry: 2023 November 07**

**Class of Admission : H1B**

**Admit Until Date : 06/14/2026**

**Details provided on the I-94 Information form:**

**Last/Surname : JIANG**  
**First (Given) Name : XUEWEI**  
**Birth Date : 1993 March 13**  
**Document Number : EJ4954380**  
**Country of Citizenship : China**

[Get Travel History](#)

▶ Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

▶ If an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.

▶ Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.

OMB No. 1551-0111  
Expiration Date: 11/30/2023

[For inquiries or questions regarding your I-94, please click here](#)

[Accessibility](#) | [Privacy Policy](#)

# THE UNITED STATES OF AMERICA

## I-797A | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY U.S. CITIZENSHIP AND IMMIGRATION SERVICES

Receipt Number <b>IOE8286374759</b>		Case Type <b>I129 - PETITION FOR A NONIMMIGRANT WORKER</b>
Received Date <b>05/04/2023</b>	Priority Date	Petitioner <b>UNIVERSITY OF SOUTHERN CALIFORNIA</b>
Notice Date <b>05/08/2023</b>	Page <b>1 of 2</b>	Beneficiary <b>JIANG, XUEWEI</b>

**UNIVERSITY OF SOUTHERN CALIFORNIA  
c/o JOSEPH I ELIAS ESQ DIR FACULTY/STAFF VISA SVCS  
3434 SOUTH GRAND AVE STE CAL 302  
LOS ANGELES CA 90089-2812**

**Notice Type: Approval Notice  
Class: H1B  
Valid from 06/05/2023 to 06/04/2026**

The above petition and accompanying request for an extension of stay have been approved. The status of the named beneficiary(ies) in this classification is valid as indicated on the I-94 attached below. The beneficiary(ies) can work for the petitioner pursuant to this approval notice, but only as detailed in the petition and during the petition validity period indicated above, unless otherwise authorized by law. Changes in employment or training may require you to file a new Form I-129, Petition for a Nonimmigrant Worker.

The dates in the I-94 attached below might not be for the same dates as the petition validity dates above because the I-94 below may contain a grace period of up to 10 days before and up to 10 days after the petition validity period for the following classifications: CW-1, E-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-1S, P-2, P-2S, P-3, P-3S, TN-1, and TN-2. An I-94 for H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. However, the beneficiary(ies) may not work during such grace periods, unless otherwise authorized by law. The decision to grant a grace period and the length of the granted grace period is discretionary, final, and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.

The petitioner should keep the upper portion of this notice. The lower portion should be given to the beneficiary(ies). The beneficiary(ies) should keep the right part (the I-94 portion) with his or her other Forms I-94, Arrival-Departure Record. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted an extension of stay who leaves the U.S. and is not visa-exempt must normally obtain a new visa before returning. The left part can be used when applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry based on this approval notice at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, Application for Action on an Approved Application or Petition, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.

The approval of this petition does not guarantee that the beneficiary(ies) will be found to be eligible for a visa, for admission to the United States (if traveling abroad and seeking re-admission), or for a subsequent extension of stay, change of status, or adjustment of status.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <https://www.uscis.gov/file-online>.

California Service Center  
U.S. CITIZENSHIP & IMMIGRATION SVC  
P.O. Box 30111  
Laguna Niguel CA 92607-0111



USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)

PLEASE TEAR OFF FORM I-94 PRINTED BELOW AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

**Detach This Half for Personal Records**

**Receipt# IOE8286374759**

**I-94# 883365973 A2**

**NAME JIANG, XUEWEI**

**CLASS H1B**

**VALID FROM 06/05/2023 UNTIL 06/14/2026**

**PETITIONER**

**UNIVERSITY OF SOUTHERN CALIFORNIA  
3434 SOUTH GRAND AVE STE CAL 302  
LOS ANGELES CA 90089-2812**

**883365973 A2**

**Receipt Number IOE8286374759**

**US Citizenship and Immigration Services**

**I94 Departure Record**

**Petitioner: UNIVERSITY OF SOUTHERN CALIFORNIA**

**14. Family Name**

**JIANG**

**15. First (Given) Name**

**XUEWEI**

**16. Date of Birth**

**03/13/1993**

**17. Country of Citizenship**

**China**



Receipt Number <b>IOE8526524562</b>		Case Type <b>H29 - PETITION FOR A NONIMMIGRANT WORKER</b>
Received Date <b>07/27/2022</b>	Priority Date	Petitioner <b>THE UNIVERSITY OF CHICAGO</b>
Notice Date <b>08/04/2022</b>	Page <b>1 of 2</b>	Beneficiary <b>JIANG, XUEWEI</b>
<b>THE UNIVERSITY OF CHICAGO</b> c/o CORCORAN, THERESA A KEMPSTER CORCORAN QUICENO & LENZ CALVO L 332 S MICHIGAN AVE STE 1428 CHICAGO IL 60604		<b>Notice Type: Approval Notice</b> <b>Class: H1B</b> Valid from <b>08/16/2022 to 06/04/2023</b>

The above petition and accompanying request for an extension of stay have been approved. The status of the named beneficiary(ies) in this classification is valid as indicated on the I-94 attached below. The beneficiary(ies) can work for the petitioner pursuant to this approval notice, but only as detailed in the petition and during the petition validity period indicated above, unless otherwise authorized by law. Changes in employment or training may require you to file a new Form I-129, Petition for a Nonimmigrant Worker.

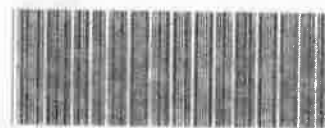
The dates in the I-94 attached below might not be for the same dates as the petition validity dates above because the I-94 below may contain a grace period of up to 10 days before and up to 10 days after the petition validity period for the following classifications: CW, F-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-1S, P-2, P-2S, P-3, P-3S, TN-1, and TN-2. An I-94 for H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. However, the beneficiary(ies) may not work during such grace periods, unless otherwise authorized by law. The decision to grant a grace period and the length of the granted grace period is discretionary, final, and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.

The petitioner should keep the upper portion of this notice. The lower portion should be given to the beneficiary(ies). The beneficiary(ies) should keep the right part (the I-94 portion) with his or her other Forms I-94, Arrival-Departure Record. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted an extension of stay who leaves the U.S. and is not visa-exempt must normally obtain a new visa before returning. The left part can be used when applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry based on this approval notice at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, Application for Action on an Approved Application or Petition, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.

The approval of this petition does not guarantee that the beneficiary(ies) will be found to be eligible for a visa, for admission to the United States (if traveling abroad and seeking re-admission), or for a subsequent extension of stay, change of status, or adjustment of status.

Please see the additional information on the back. You will be notified separately about any other cases you filed.  
 USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <https://www.uscis.gov/file-online>.

California Service Center  
 U.S. CITIZENSHIP & IMMIGRATION SVC  
 P.O. Box 30111  
 Laguna Niguel CA 92647-0111



USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)

NOTICE: If you are filing a petition for a derivative non-immigrant, you must file Form I-797A with the petition.

Detach This Half for Personal Records

**Receipt#** IOE8526524562  
**I-94#** 883365973 A2  
**NAME** JIANG XUEWEI  
**CLASS** H1B  
**VALID FROM** 08/16/2022 UNTIL 06/04/2023  
**PETITIONER**  
 THE UNIVERSITY OF CHICAGO  
 5807 S WOODLAWN AVE  
 CHICAGO IL 60637

**883365973 A2**

**Receipt Number** IOE8526524562  
**US Citizenship and Immigration Services**

**I-94 Departure Record**

**Petitioner:** THE UNIVERSITY OF CHICAGO

14. Family Name <b>JIANG</b>	
15. First (Given) Name <b>XUEWEI</b>	16. Date of Birth <b>03/19/1993</b>
17. Country of Citizenship <b>China</b>	



Receipt Number <b>WAC2032850724</b>		Case Type <b>I129 PETITION FOR A NONIMMIGRANT WORKER</b>	
Received Date <b>09/30/2020</b>	Priority Date	Petitioner <b>UNIVERSITY OF SOUTHERN CALIFORNIA</b>	
Notice Date <b>10/07/2020</b>	Page <b>1 of 2</b>	Beneficiary A116 54 749 <b>JIANG, XUEWEI</b>	
UNIVERSITY OF SOUTHERN CALIFORNIA c/o JOSEPH I ELIAS ESQ DIR FACULTY/STA 3434 SOUTH GRAND AVE STE CAL 302 LOS ANGELES CA 900892812		Notice Type: Approval Notice Class: H1B Valid from 10/16/2020 to 10/15/2023	

The above petition and accompanying request for a change of status have been approved. The status of the named beneficiary(ies) in this classification is valid as indicated on the I-94 attached below. The beneficiary(ies) can work for the petitioner pursuant to this approval notice, but only as detailed in the petition and during the petition validity period indicated above, unless otherwise authorized by law. Changes in employment or training may require you to file a new Form I-129, Petition for a Nonimmigrant Worker.

The dates in the I-94 attached below might not be the same dates as the petition validity dates above because the I-94 below may contain a grace period of up to 10 days before and up to 10 days after the petition validity period for the following classifications: CW-1, E-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-1S, P-2, F-2S, P-3, P-3S, TN-1, and TN-2. An I-94 for H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. However, the beneficiary(ies) may not work during such grace periods, unless otherwise authorized by law. The decision to grant a grace period and the length of the granted grace period is discretionary, final, and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.

The petitioner should keep the upper portion of this notice. The lower portion should be given to the beneficiary(ies). The beneficiary(ies) should keep the right part (the I-94 portion) with his or her other Forms I-94, Arrival-Departure Record. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted a change of status who leaves the U.S. and is not visa-exempt must normally obtain a visa in the new classification before returning. The left part can be used when applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry based on this approval notice at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, Application for Action on an Approved Application or Petition, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.

The approval of this petition does not guarantee that the beneficiary(ies) will be found to be eligible for a visa, for admission to the United States (if traveling abroad and seeking re-admission), or for a subsequent extension of stay, change of status, or adjustment of status.

**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

Please see the additional information on the back. You will be notified separately about any other cases you filed.

California Service Center  
 U. S. CITIZENSHIP & IMMIGRATION SVC.  
 P.O. Box 30111  
 Laguna Niguel CA 92647-0111  
 USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)



PLEASE TEAR OFF FORM I-24 PRINTED BELOW AND STAPLE TO ORIGINAL I-94 AS SHOWN

Detach This Half for Personal Records  
**Receipt#** WAC2032850724  
**I-94#** 490459797 A2  
**NAME** JIANG, XUEWEI  
**CLASS** H1B  
**VALID FROM** 10/16/2020 **UNTIL** 10/15/2023  
**PETITIONER**  
 UNIVERSITY OF SOUTHERN CALIFORNIA,  
 3434 SOUTH GRAND AVE STE CAL 302  
 LOS ANGELES CA 900892812

**490459797 A2**  
**Receipt Number** WAC2032850724  
**US Citizenship and Immigration Services**  
**I-94 Departure Record**  
**Petitioner:** UNIVERSITY OF SOUTHERN CALIFORNIA

14. Family Name <b>JIANG</b>	
15. First (Given) Name <b>XUEWEI</b>	16. Date of Birth <b>03/13/1993</b>
17. Country of Citizenship <b>CHINA, PEOPLE'S REPUBLIC</b>	
<b>OF</b>	

UNITED STATES OF AMERICA  
EMPLOYMENT AUTHORIZATION



Surname  
**JIANG**  
Given Name  
**XUEWEI**

U.S.C.I.S.#  
**416-564-749**    **C03B**    **YSC2090171865**  
Category Card#

Country of Birth  
**China, People's Republic**  
Terms and Conditions

Valid From: **06/01/20**  
Card Expires: **05/31/21**  
**NOT VALID FOR REENTRY TO U.S.**

Date of Birth  
**13 MAR 1993**    Sex  
**F**





**SEVIS ID: N0008342296**

<b>SURNAME/PRIMARY NAME</b> JIANG	<b>GIVEN NAME</b> XUEWEI	<b>Class of Admission</b>  <b>F-1</b>  <b>ACADEMIC AND LANGUAGE</b>
<b>PREFERRED NAME</b> XUEWEI JIANG	<b>PASSPORT NAME</b>	
<b>COUNTRY OF BIRTH</b> CHINA	<b>COUNTRY OF CITIZENSHIP</b> CHINA	
<b>CITY OF BIRTH</b> JINAN	<b>DATE OF BIRTH</b> 13 MARCH 1993	
<b>FORM ISSUE REASON</b> CONTINUED ATTENDANCE	<b>ADMISSION NUMBER</b> 490459797A2	

<b>SCHOOL INFORMATION</b>	
<b>SCHOOL NAME</b> University of Texas at Austin University of Texas at Austin	<b>SCHOOL ADDRESS</b> ISSS, International Office, P.O. Box A, Austin, TX 78713
<b>SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL</b> Andrew Jacob International Student Advisor	<b>SCHOOL CODE AND APPROVAL DATE</b> SNA214F00332000 25 JANUARY 2003

<b>PROGRAM OF STUDY</b>		
<b>EDUCATION LEVEL</b> DOCTORATE	<b>MAJOR 1</b> Financial Mathematics 27.0305	<b>MAJOR 2</b> None 00.0000
<b>PROGRAM ENGLISH PROFICIENCY</b> Required	<b>ENGLISH PROFICIENCY NOTES</b> Student is proficient	<b>EARLIEST ADMISSION DATE</b>
<b>START OF CLASSES</b> 13 AUGUST 2015	<b>PROGRAM START/END DATE</b> 13 AUGUST 2015 - 23 MAY 2020	

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 9,500	Personal Funds	\$ 0
Living Expenses	\$ 17,000	Fellowship/TA	\$ 26,500
Expenses of Dependents (0)	\$	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
<b>TOTAL</b>	<b>\$ 26,500</b>	<b>TOTAL</b>	<b>\$ 26,500</b>

**REMARKS**

**SCHOOL ATTESTATION**

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

<input checked="" type="checkbox"/>	<b>DATE ISSUED</b> 11 March 2020	<b>PLACE ISSUED</b> Austin, TX
<b>SIGNATURE OF: Andrew Jacob, International Student Advisor</b>		

**STUDENT ATTESTATION**

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

<input checked="" type="checkbox"/>	<b>DATE</b> 03/11/2020
<b>SIGNATURE OF: XUEWEI JIANG</b>	
<input checked="" type="checkbox"/>	<b>NAME OF PARENT OR GUARDIAN</b>
<b>SIGNATURE</b>	<b>ADDRESS (city/state or province/country)</b>
<b>DATE</b>	

SEVIS ID: N0008342296 (F-1)

NAME: XUEWEI JIANG

**EMPLOYMENT AUTHORIZATIONS**

TYPE	FULL/PART-TIME	STATUS	START DATE	END DATE
POST-COMPLETION OPT	FULL TIME	REQUESTED	01 JUNE 2020	31 MAY 2021

**CHANGE OF STATUS/CAP-GAP EXTENSION**


**AUTHORIZED REDUCED COURSE LOAD**

**CURRENT SESSION DATES**

CURRENT SESSION START DATE	CURRENT SESSION END DATE
21 JANUARY 2020	23 MAY 2020

**TRAVEL ENDORSEMENT**

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
Andrew Vijay Jacob	International Student Advisor	X 	03/11/2020	Austin, TX
		X		
		X		
		X		

## INSTRUCTIONS TO STUDENTS

**STUDENT ATTESTATION.** You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

**FORM I-20.** The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

**VISA APPLICATION.** You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

**ADMISSION.** When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

**REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA.** Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

**EMPLOYMENT.** Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

**PERIOD OF STAY.** You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

**EXTENSION OF PROGRAM.** If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

**SCHOOL TRANSFER.** To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

**NOTICE OF ADDRESS.** When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

**REENTRY.** F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

**AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL.** DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

**PENALTY.** To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

## INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

**ISSUANCE OF FORM I-20.** DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

**ENDORSEMENT OF PAGE 2 FOR REENTRY.** If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

**RECORDKEEPING.** DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

**AUTHORITY FOR COLLECTING INFORMATION.** Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

**REPORTING BURDEN.** U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.

SEVIS ID: N0008342296

SURNAME (PRIMARY NAME) KUMAR	GIVEN NAME KUNWAL	<b>CLASS</b>  <b>F-1</b>  <b>ACADEMIC AND LANGUAGE</b>
PREFERRED NAME KUNWAL CHAND	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
DATE OF BIRTH 13 MARCH 1993	ADMISSION NUMBER	
FORM ISSUE REASON CONTINUED ATTENDANCE	LEGACY NAME KUNWAL CHAND	

**SCHOOL INFORMATION**

SCHOOL NAME The University of Texas at Austin One University of Texas at Austin	SCHOOL ADDRESS Department of Education, Austin, TX 78705
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Kunwale Chand Head of Staff, Director	SCHOOL CODE AND APPROVAL DATE 01-2142-0012900 25 JANUARY 2013

**PROGRAM OF STUDY**

EDUCATION LEVEL GRADUATE	MAJOR 1 PHYSICS, GRADUATE STUDENT	MAJOR 2 None
NORMAL PROGRAM LENGTH 30 Months	PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient
PROGRAM START DATE 13 JANUARY 2013	PROGRAM END DATE 31 MAY 2018	

**FINANCIALS**

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Personal Expenses	\$ 3,500	Personal Funds	\$ 0
Living Expenses	\$ 17,000	Education Grants	\$ 26,500
Expenses of Dependents (if any)	\$ 0	Funds From Another Source	\$ 0
Other	\$ 0	On-Campus Employment	\$ 0
<b>TOTAL</b>	<b>\$ 20,500</b>	<b>TOTAL</b>	<b>\$ 26,500</b>

**REMARKS**

Continued from Form I-20 07250710

**SCHOOL ATTESTATION**

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

SIGNATURE OF: *[Signature]* DATE ISSUED: 15 September 2012 PLACE ISSUED: Austin, TX  
SARASWATI SUNDAR, Assistant Director

**STUDENT ATTESTATION**

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

X *[Signature]* DATE: 11/20/2012  
SIGNATURE OF: Kunwal Chand

X  
NAME OF PARENT OR GUARDIAN SIGNATURE ADDRESS (city/state or province/country) DATE

SEVIS ID: N0008342296 (F-1)

NAME: Xuewei Jiang

EMPLOYMENT AUTHORIZATION

EMPLOYMENT STATUS	TYPE
EMPLOYMENT START DATE	EMPLOYMENT END DATE
EMPLOYER NAME	EMPLOYER LOCATION
COMMENTS	

CHANGE OF STATUS/CAP-GAP EXTENSION

REQUESTED VISA TYPE	REQUEST/PLITION STATUS	RECEIPT NUMBLR	BENEFIT START DATE/REQUEST DATE
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EVENT HISTORY

EVENT NAME	EVENT DATE
Event at school	25 APRIL 2015

OTHER AUTHORIZATIONS

AUTHORIZATION	START DATE	END DATE
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TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for reentry of the student to attend the same school after a temporary absence from the United States. Each certification signature is valid for one year.

SCHOOL OFFICIAL	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
Margaret Y. Luevano	Assistant Director	<i>[Signature]</i>	9/16/2015	AUSTIN, TX
Evelyn Hill	Assistant International Student Advisor	<i>[Signature]</i>	7/14/16	AUSTIN, TX
Andrea Lopez	Assistant International Student Advisor	<i>[Signature]</i>	7-7-17	AUSTIN, TX
		X		

## INSTRUCTIONS TO STUDENTS

**STUDENT ATTESTATION.** You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

**FORM I-20.** The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

**VISA APPLICATION.** You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

**ADMISSION.** When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

**REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA.** Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

**EMPLOYMENT.** Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unanticipated economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

**PERIOD OF STAY.** You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends, and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

**EXTENSION OF PROGRAM.** If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

**SCHOOL TRANSFER.** To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

**NOTICE OF ADDRESS.** When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

**REENTRY.** F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

**AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL.** The Department of Homeland Security (DHS) requires your school to provide DHS with your name, county of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

**PENALTY.** To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

## INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

**ISSUANCE OF FORM I-20.** DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-1 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

**ENDORSEMENT OF PAGE 2 FOR REENTRY.** If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

**RECORDKEEPING.** The Department of Homeland Security (DHS) may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

**AUTHORITY FOR COLLECTING INFORMATION.** Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and The Department of Homeland Security use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

**REPORTING BURDEN.** U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to, an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer, Forms Management Branch, U.S. Immigration and Customs Enforcement, 301 E Street NW Stop 5800, Washington, DC 20576-5800. Do not send the form to this address.

**I-131**  
**DEPENDENT**  
**SPOUSE**



**Notice of Entry of Appearance  
as Attorney or Accredited Representative**

Department of Homeland Security

DHS  
Form G-28  
OMB No. 1615-0105  
Expires 05/31/2021

**Part 1. Information About Attorney or Accredited Representative**

1. USCIS Online Account Number (if any)  
▶

**Name of Attorney or Accredited Representative**

2.a. Family Name (Last Name)   
2.b. Given Name (First Name)   
2.c. Middle Name

**Address of Attorney or Accredited Representative**

3.a. Street Number and Name   
3.b.  Apt.  Ste.  Flr.   
3.c. City or Town   
3.d. State  3.e. ZIP Code   
3.f. Province   
3.g. Postal Code   
3.h. Country

**Contact Information of Attorney or Accredited Representative**

4. Daytime Telephone Number   
5. Mobile Telephone Number (if any)   
6. Email Address (if any)   
7. Fax Number (if any)

**Part 2. Eligibility Information for Attorney or Accredited Representative**

Select all applicable items.

1.a.  I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority

1.b. Bar Number (if applicable)

1.c. I (select only one box)  am not  am subject to any order suspending, enjoining, restraining, disbaring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable)

2.a.  I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization

2.c. Date of Accreditation (mm/dd/yyyy)

3.  I am associated with   
the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a.  I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate



**Part 4. Client's Consent to Representation and Signature (continued)**

**Options Regarding Receipt of USCIS Notices and Documents**

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select all applicable items below. You may change these elections through written notice to USCIS.

1.a.  I request that USCIS send original notices on an application or petition to the U.S. business address of my attorney or accredited representative as listed in this form.


1.b.  I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

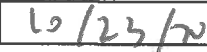
**NOTE:** If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select Item Number 1.c.

1.c.  I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

**Signature of Client or Authorized Signatory for an Entity**

2.a. Signature of Client or Authorized Signatory for an Entity

➔ 

2.b. Date of Signature (mm/dd/yyyy) 

**Part 5. Signature of Attorney or Accredited Representative**

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a. Signature of Attorney or Accredited Representative



1.b. Date of Signature (mm/dd/yyyy) 

2.a. Signature of Law Student or Law Graduate



2.b. Date of Signature (mm/dd/yyyy) 

**Part 6. Additional Information**

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2.a. Page Number  2.b. Part Number  2.c. Item Number

2.d. \_\_\_\_\_  
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4.a. Page Number  4.b. Part Number  4.c. Item Number

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5.a. Page Number  5.b. Part Number  5.c. Item Number

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6.a. Page Number  6.b. Part Number  6.c. Item Number

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# Application for Travel Document

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-131  
OMB No. 1615-0013  
Expires 10/31/2025

For USCIS Use Only	<b>Receipt</b>	<b>Action Block</b>	<b>To Be Completed by an Attorney/ Representative, if any.</b>  <input checked="" type="checkbox"/> Fill in box if G-28 is attached to represent the applicant.
	<input type="checkbox"/> <b>Document Hand Delivered</b> By: _____ Date: ____/____/____		
	<b>Document Issued</b> <input type="checkbox"/> Re-entry Permit ( <i>Update "Mail To" Section</i> ) <input type="checkbox"/> Refugee Travel Document ( <i>Update "Mail To" Section</i> ) <input type="checkbox"/> Single Advance Parole <input type="checkbox"/> Multiple Advance Parole ( <i>Valid Until: ____/____/____</i> )	<b>Mail To (Re-entry &amp; Refugee Only)</b> <input type="checkbox"/> Address in Part 1 <input type="checkbox"/> US Consulate at: _____ <input type="checkbox"/> Intl DHS Ofc at: _____	Attorney State License Number: California 323603

► **Start Here.** Type or Print in Black Ink

## Part 1. Information About You

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

### Physical Address

2.a. In Care of Name

2.b. Street Number and Name

2.c. Apt.  Ste.  Flr.

2.d. City or Town

2.e. State  2.f. ZIP Code

2.g. Postal Code

2.h. Province

2.i. Country

### Other Information

3. Alien Registration Number (A-Number)  
 ► A-

4. Country of Birth

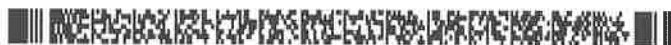
5. Country of Citizenship

6. Class of Admission

7. Gender  Male  Female

8. Date of Birth (mm/dd/yyyy) ►

9. U.S. Social Security Number (if any)  
 ►



**Part 2. Application Type**

- 1.a.  I am a permanent resident or conditional resident of the United States, and I am applying for a reentry permit.
- 1.b.  I now hold U.S. refugee or asylee status, and I am applying for a Refugee Travel Document.
- 1.c.  I am a permanent resident as a direct result of refugee or asylee status, and I am applying for a Refugee Travel Document.
- 1.d.  I am applying for an Advance Parole Document to allow me to return to the United States after temporary foreign travel.
- 1.e.  I am outside the United States, and I am applying for an Advance Parole Document.
- 1.f.  I am applying for an Advance Parole Document for a person who is outside the United States.

If you checked box "1.f." provide the following information about that person in 2.a. through 2.p.

- 2.a. Family Name (Last Name)
- 2.b. Given Name (First Name)
- 2.c. Middle Name
- 2.d. Date of Birth (mm/dd/yyyy) ▶

- 2.e. Country of Birth
- 2.f. Country of Citizenship
- 2.g. Daytime Phone Number (  )  -

**Physical Address (If you checked box 1.f.)**

- 2.h. In Care of Name
- 2.i. Street Number and Name
- 2.j. Apt.  Ste.  Flr.
- 2.k. City or Town
- 2.l. State  2.m. ZIP Code
- 2.n. Postal Code
- 2.o. Province
- 2.p. Country

**Part 3. Processing Information**

- 1. Date of Intended Departure (mm/dd/yyyy) ▶
- 2. Expected Length of Trip (in days)
- 3.a. Are you, or any person included in this application, now in exclusion, deportation, removal, or rescission proceedings?  Yes  No
- 3.b. If "Yes", Name of DHS office:

- 4.a. Have you ever before been issued a reentry permit or Refugee Travel Document? (If "Yes" give the following information for the last document issued to you):  Yes  No
- 4.b. Date Issued (mm/dd/yyyy) ▶
- 4.c. Disposition (attached, lost, etc.):

If you are applying for a non-DACA related Advance Parole Document, skip to Part 7; DACA recipients must complete Part 4 before skipping to Part 7.



**Part 3. Processing Information** *(continued)*

Where do you want this travel document sent? *(Check one)*

5.  To the U.S. address shown in Part 1 (2.a through 2.i.) of this form.
6.  To a U.S. Embassy or consulate at:
- 6.a. City or Town
- 6.b. Country
7.  To a DHS office overseas at:
- 7.a. City or Town
- 7.b. Country
- If you checked "6" or "7", where should the notice to pick up the travel document be sent?
8.  To the address shown in Part 2 (2.h. through 2.p.) of this form.
9.  To the address shown in Part 3 (10.a. through 10.i.) of this form.:

10.a. In Care of Name

10.b. Street Number and Name

10.c. Apt.  Ste.  Flr.

10.d. City or Town

10.e. State

10.f. ZIP Code

10.g. Postal Code

10.h. Province

10.i. Country

10.j. Daytime Phone Number (    )   -

**Part 4. Information About Your Proposed Travel**

1.a. Purpose of trip. *(If you need more space, continue on a separate sheet of paper.)*

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1.b. List the countries you intend to visit. *(If you need more space, continue on a separate sheet of paper.)*

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**Part 5. Complete Only If Applying for a Re-entry Permit**

Since becoming a permanent resident of the United States (or during the past 5 years, whichever is less) how much total time have you spent outside the United States?

- 1.a.  less than 6 months    1.d.  2 to 3 years  
1.b.  6 months to 1 year    1.e.  3 to 4 years  
1.c.  1 to 2 years    1.f.  more than 4 years

2. Since you became a permanent resident of the United States, have you ever filed a Federal income tax return as a nonresident or failed to file a Federal income tax return because you considered yourself to be a nonresident? *(If "Yes" give details on a separate sheet of paper.)*

Yes     No



**Part 6. Complete Only If Applying for a Refugee Travel Document**

1. Country from which you are a refugee or asylee:

If you answer "Yes" to any of the following questions, you must explain on a separate sheet of paper. Include your Name and A-Number on the top of each sheet.

2. Do you plan to travel to the country named above?  Yes  No

Since you were accorded refugee/asylee status, have you ever:

3.a. Returned to the country named above?  Yes  No

3.b. Applied for and/or obtained a national passport, passport renewal, or entry permit of that country?  Yes  No

3.c. Applied for and/or received any benefit from such country (for example, health insurance benefits)?  Yes  No

Since you were accorded refugee/asylee status, have you, by any legal procedure or voluntary act:

4.a. Reacquired the nationality of the country named above?  Yes  No

4.b. Acquired a new nationality?  Yes  No

4.c. Been granted refugee or asylee status in any other country?  Yes  No

**Part 7. Complete Only If Applying for Advance Parole**

On a separate sheet of paper, explain how you qualify for an Advance Parole Document, and what circumstances warrant issuance of advance parole. Include copies of any documents you wish considered. (See instructions.)

1. How many trips do you intend to use this document?  One Trip  More than one trip

If the person intended to receive an Advance Parole Document is outside the United States, provide the location (City or Town and Country) of the U.S. Embassy or consulate or the DHS overseas office that you want us to notify.

2.a. City or Town

2.b. Country

If the travel document will be delivered to an overseas office, where should the notice to pick up the document be sent?:

3.  To the address shown in Part 2 (2.h. through 2.p.) of this form.

4.  To the address shown in Part 7 (4.a. through 4.i.) of this form.

4.a. In Care of Name

4.b. Street Number and Name

4.c. Apt.  Ste.  Flr.

4.d. City or Town

4.e. State  4.f. ZIP Code

4.g. Postal Code

4.h. Province

4.i. Country

4.j. Daytime Phone Number (  )  -

**Part 8. Employment Authorization Document for New Period of Parole Under Operation Allies Welcome**


1. I am requesting an Employment Authorization Document (EAD) upon approval of my new Operation Allies Welcome (OAW) period of parole.  Yes  No



**Part 9. Signature of Applicant** (Read the information on penalties in the Form instructions before completing this Part.) If you are filing for a Re-entry Permit or Refugee Travel Document, you must be in the United States to file this application.

1.a. I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it is all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking.

Signature of Applicant

→ 

1.b. Date of Signature (mm/dd/yyyy) ▶ 10/23/2023

2. Daytime Phone Number (469) 940 - 7789

NOTE: If you do not completely fill out this form or fail to submit required documents listed in the instructions, your application may be denied.

**Part 10. Information About Person Who Prepared This Application, If Other Than the Applicant**

NOTE: If you are an attorney or representative, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with this application.

**Preparer's Contact Information**

**Preparer's Full Name**

Provide the following information concerning the preparer:

1.a. Preparer's Family Name (Last Name)

Orozco Jr.

1.b. Preparer's Given Name (First Name)

Gilberto

2. Preparer's Business or Organization Name

Berry Appleman & Leiden LLP

4. Preparer's Daytime Phone Number

(469) 940 - 7789

Extension

5. Preparer's E-mail Address (if any)

gorozco@BAL.com

**Preparer's Mailing Address**

3.a. Street Number and Name 2400 N Glenville Drive, Building A

3.b. Apt.  Ste.  Flr.  100

3.c. City or Town Richardson

3.d. State TX 3.e. ZIP Code 75082

3.f. Postal Code

3.g. Province

3.h. Country United States

**Declaration**

To be completed by all preparers, including attorneys and authorized representatives: I declare that I prepared this benefit request at the request of the applicant, that it is based on all the information of which I have knowledge, and that the information is true to the best of my knowledge.

6.a. Signature of Preparer 

6.b. Date of Signature (mm/dd/yyyy) ▶ 11/01/2023

NOTE: If you require more space to provide any additional information, use a separate sheet of paper. You must include your Name and A-Number on the top of each sheet.





 For: **XUEWEI JIANG**



### Most Recent I-94

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**Admission (I-94) Record Number : 624523406A3**

**Most Recent Date of Entry: 2023 November 07**

**Class of Admission : H1B**

**Admit Until Date : 06/14/2026**

**Details provided on the I-94 Information form:**

**Last/Surname : JIANG**  
**First (Given) Name : XUEWEI**  
**Birth Date : 1993 March 13**  
**Document Number : EJ4954380**  
**Country of Citizenship : China**

[Get Travel History](#)

▶ **Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).**

▶ **If an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.**

▶ **Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.**

OMB No. 1651-0111  
Expiration Date: 11/30/2023

[For inquiries or questions regarding your I-94, please click here](#)

[Accessibility](#) | [Privacy Policy](#)

# THE UNITED STATES OF AMERICA

## I-797A | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY U.S. CITIZENSHIP AND IMMIGRATION SERVICES



Receipt Number <b>IOE8286374759</b>		Case Type <b>I129 - PETITION FOR A NONIMMIGRANT WORKER</b>
Received Date <b>05/04/2023</b>	Priority Date	Petitioner <b>UNIVERSITY OF SOUTHERN CALIFORNIA</b>
Notice Date <b>05/08/2023</b>	Page <b>1 of 2</b>	Beneficiary <b>JIANG, XUEWEI</b>
UNIVERSITY OF SOUTHERN CALIFORNIA c/o JOSEPH I ELIAS ESQ DIR FACULTY/STAFF VISA SVCS 3434 SOUTH GRAND AVE STE CAL 302 LOS ANGELES CA 90089-2812		Notice Type: Approval Notice Class: H1B Valid from 06/05/2023 to 06/04/2026
<p>The above petition and accompanying request for an extension of stay have been approved. The status of the named beneficiary(ies) in this classification is valid as indicated on the I-94 attached below. The beneficiary(ies) can work for the petitioner pursuant to this approval notice, but only as detailed in the petition and during the petition validity period indicated above, unless otherwise authorized by law. Changes in employment or training may require you to file a new Form I-129, Petition for a Nonimmigrant Worker.</p> <p>The dates in the I-94 attached below might not be for the same dates as the petition validity dates above because the I-94 below may contain a grace period of up to 10 days before and up to 10 days after the petition validity period for the following classifications: CW-1, E-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-1S, P-2, P-2S, P-3, P-3S, TN-1, and TN-2. An I-94 for H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. However, the beneficiary(ies) may not work during such grace periods, unless otherwise authorized by law. The decision to grant a grace period and the length of the granted grace period is discretionary, final, and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.</p> <p>The petitioner should keep the upper portion of this notice. The lower portion should be given to the beneficiary(ies). The beneficiary(ies) should keep the right part (the I-94 portion) with his or her other Forms I-94, Arrival-Departure Record. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted a extension of stay who leaves the U.S. and is not visa-exempt must normally obtain a new visa before returning. The left part can be used when applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry based on this approval notice at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, Application for Action on an Approved Application or Petition, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.</p> <p>The approval of this petition does not guarantee that the beneficiary(ies) will be found to be eligible for a visa, for admission to the United States (if traveling abroad and seeking re-admission), or for a subsequent extension of stay, change of status, or adjustment of status.</p> <p>Please see the additional information on the back. You will be notified separately about any other cases you filed.</p> <p>USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <a href="https://www.uscis.gov/file-online">https://www.uscis.gov/file-online</a>.</p>		
California Service Center U.S. CITIZENSHIP & IMMIGRATION SVC P.O. Box 30111 Laguna Niguel CA 92607-0111 USCIS Contact Center: <a href="http://www.uscis.gov/contactcenter">www.uscis.gov/contactcenter</a>		

PLEASE TEAR OFF FORM I-94 PRINTED BELOW AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

**Detach This Half for Personal Records**

Receipt# IOE8286374759  
 I-94# 883365973 A2  
 NAME JIANG, XUEWEI  
 CLASS H1B  
 VALID FROM 06/05/2023 UNTIL 06/14/2026

**PETITIONER**  
 UNIVERSITY OF SOUTHERN CALIFORNIA  
 3434 SOUTH GRAND AVE STE CAL 302  
 LOS ANGELES CA 90089-2812

883365973 A2  
**Receipt Number IOE8286374759**  
**US Citizenship and Immigration Services**

**I94 Departure Record**  
**Petitioner: UNIVERSITY OF SOUTHERN CALIFORNIA**

14. Family Name <b>JIANG</b>	
15. First (Given) Name <b>XUEWEI</b>	16. Date of Birth <b>03/13/1993</b>
17. Country of Citizenship <b>China</b>	

**I-797 | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY U.S. CITIZENSHIP AND IMMIGRATION SERVICES**

Receipt Number LIN2025750217		Case Type I140 - IMMIGRANT PETITION FOR ALIEN WORKER
Received Date 07/22/2020	Priority Date 09/27/2019	Petitioner FACEBOOK INC
Notice Date 07/29/2020	Page 1 of 1	Beneficiary A218 056 203 LU. YANXIN

FACEBOOK INC  
c/o GLORIA LUAN  
BERRY APPLEMAN LEIDEN LLP  
50 CALIFORNIA STREET FLR 2  
SAN FRANCISCO CA 94111

**Notice Type:** Approval Notice  
**Section:** Mem of Profession w/Adv Deg, or of Exceptn'l Ability Sec.203(b)(2)  
**Consulate:**  
**ETA Case Number:** A1926159588  
**SOC Code:** 151133 **Skill Level:** 2  
**Work Site:** MENLO PARK CA

The above petition has been approved. The petition indicates that the person for whom you are petitioning is in the United States and will apply for adjustment of status. He or she should contact the local USCIS office to obtain Form I-485, Application to Register Permanent Residence or Adjust Status. A copy of this notice should be submitted with the application, with appropriate fee, to this Service Center. Additional information about eligibility for adjustment of status may be obtained from the local USCIS office serving the area where he or she lives, or by calling 1-800-375-5283.

If the person for whom you are petitioning decides to apply for a visa outside the United States based upon this petition, the petitioner should file Form I-824, Application for Action on an Approved Application or Petition, to request that we send the petition to the Department of State National Visa Center (NVC).

The NVC processes all approved immigrant visa petitions that require consular action. The NVC also determines which consular post is the appropriate consulate to complete visa processing. It will then forward the approved petition to that consulate.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa, for admission to the United States, or for an extension, change, or adjustment of status.

**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

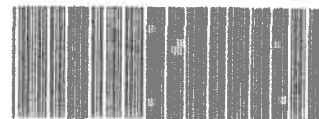
The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-205-2417 or fax 202-481-5719.

**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

Nebraska Service Center  
U. S. CITIZENSHIP & IMMIGRATION SVC  
P.O. Box 82521  
Lincoln NE 68501-2521

USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)



# THE UNITED STATES OF AMERICA

I-797 | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY  
U.S. CITIZENSHIP & IMMIGRATION SERVICE



Receipt Number <b>LEN2224134112</b>		Case Type <b>H16 - IMMIGRANT PETITION FOR ALIEN WORKER</b>
Received Date <b>05/16/2022</b>	Priority Date <b>08/09/2021</b>	Petitioner <b>UNIVERSITY SOUTHERN CALIFORNIA</b>
Notice Date <b>05/18/2022</b>	Page <b>1 of 1</b>	Beneficiary A116 561 719 <b>JIANG, XUEWEI</b>

UNIVERSITY SOUTHERN CALIFORNIA  
c/o JOSEPH FELIAS ESQ DIRECTOR ESVS  
3434 SOUTH GRAND AVE STE CAL 302  
LOS ANGELES CA 90089

**Notice Type:** Approval Notice  
**Section:** Mem of Profession w/Adv Deg or of  
Except'l Ability Sec.203(b)(2)  
**Consulate:**  
**ETA Case Number:** A2117908792  
**SOC Code:** 251011 **Skill Level:** 1

The above petition has been approved. The petition indicates that the person for whom you are petitioning is in the United States and will apply for adjustment of status. He or she should contact the local USCIS office to obtain Form I-485, Application to Register Permanent Residence or Adjust Status. A copy of this notice should be submitted with the application, with appropriate fee, to this Service Center. Additional information about eligibility for adjustment of status may be obtained from the local USCIS office serving the area where he or she lives, or by calling 1-800-475-5283.

If the person for whom you are petitioning decides to apply for a visa outside the United States based upon this petition, the petitioner should file Form I-924, Application for Action on an Approved Application or Petition, to request that we send the petition to the Department of State National Visa Center (NVC).

The NVC processes all approved immigrant visa petitions that require consular action. The NVC also determines which consular post is the appropriate consulate to complete visa processing. It will then forward the approved petition to that consulate.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa for admission to the United States, or for an extension, change, or adjustment of status.

**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

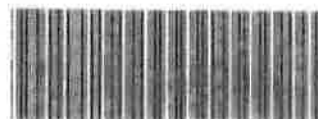
The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-305-2417 or fax 202-484-5709.

**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records; contact informants by mail, the internet or phone; conduct site inspections of businesses and residences; or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you and the legal representative listed on your Form I-28, if you submitted one, an opportunity to address that information before we make a final decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.  
USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <https://www.uscis.gov/file-online>.

Nebraska Service Center  
U.S. CITIZENSHIP & IMMIGRATION SERVICE  
P.O. Box 82521  
Lincoln NE 68501-2521

USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)





中华人民共和国民政部监制




结婚申请，符合《中华人民共和国婚姻法》规定，予以登记，发给此证。

登记机关

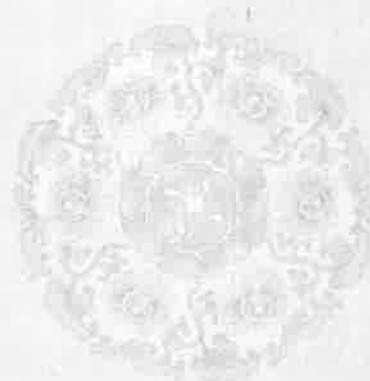


婚姻登记员

王蕊



婚姻法规定，要求结婚的男女双方必须亲自到婚姻登记机关进行结婚登记。符合本法规定的，予以登记，发给结婚证。取得结婚证，即确立夫妻关系。



NO 0341002846

持证人 **陆彦忻**



登记日期 **2016年08月08日**

结婚证字号 **J370105-2016-002657**

备注

姓名	<b>陆彦忻</b>	性别	<b>男</b>
国籍	<b>中国</b>	出生日期	<b>1989年10月17日</b>
身份证件号	<b>44018119891017001X</b>		

姓名	<b>姜薛伟</b>	性别	<b>女</b>
国籍	<b>中国</b>	出生日期	<b>1993年03月13日</b>
身份证件号	<b>370105199303130825</b>		

中华人民共和国民政部结婚证印章

Seal for Marriage Certificate of the ministry of Civil Affairs of People's Republic of  
China

中华人民共和国民政部监制

The manufacture was supervised by the Ministry of Civil Affairs of People's Republic of  
China

结婚申请，符合《中华人民共和国婚姻法》规定，予以登记，发给此证。

This application conforms to the Marriage Law of the People's Republic of China. We  
hereby give them the permission to register and issue this marriage certificate.

登记机关

Registration Office

济南市天桥区民政局婚姻登记专用章

Special Seal for Marriage Register of Tianqiao District, Jinan Civil Affairs Bureau

婚姻登记员：王燕

Marriage Register: Yan Wang

持证人: 陆彦忻

Certificate Holder: Yansin Lu

登记日期: 2016年08月08日

Registration Date: August, 8<sup>th</sup>, 2016

结婚证字号: J570105-2016-002657

Marriage Certificate No.: J570105-2016-002657

备注

Annotation

姓名: 陆彦忻

Name: Yansin Lu

国籍: 中国

Nationality: People's Republic of China

身份证号码: 44018119891017001X

ID Number: 44018119891017001X

姓名: 姜薛伟

Name: Xuewei Jiang

国籍: 中国

Nationality: People's Republic of China

身份证号码: 370105199303130825

ID Number: 370105199303130825

性别: 男

Gender: Male

出生日期: 1989年10月17日

Birth Date: October, 17<sup>th</sup>, 1989

性别: 女

Gender: Female

出生日期: 1993年3月13日

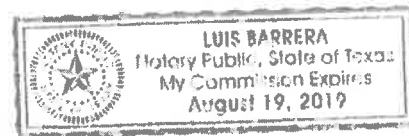
Birth Date: March, 13<sup>th</sup>, 1993

婚姻法规定，要求结婚的男女双方必须亲自到婚姻登记机关进行结婚登记。符合本法规定的，予以登记，发给结婚证。取得结婚证，即确立夫妻关系。

The marriage law has prescribed that the man and the woman who want to get married must go to the marriage registration office to make a marriage registration. In line with the provisions of this law, be registered, issued a marriage certificate. The husband-and-wife relationship shall be established as soon as they acquire the marriage certificates.

X [Signature]  
State of Texas                      County of Travis  
This instrument was acknowledged before me  
on the 13<sup>th</sup> day of August, 2016  
by Yuxia Lu

[Signature]  
Notary Public



**Certification by Translator**

I, Xue Li, certify that I am fluent in the English and Chinese languages, and that the above/attached document is an accurate translation of the document attached entitled Marriage Certificate.

Xue Li  
Signature

08/13/2016  
Date

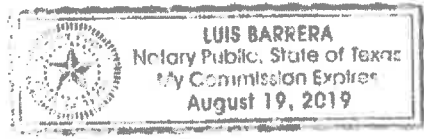
Xue Li  
Printed Name

3500 Greystone Drive, Apt. 270, Austin, TX  
Address  
78731

State of Texas      County of Travis

This instrument was acknowledged before me  
on the 13<sup>th</sup> day of August, 2016  
by Xue Li

[Signature]  
Notary Public



**I-765**  
**DEPENDENT**  
**SPOUSE**



**Notice of Entry of Appearance  
as Attorney or Accredited Representative**

Department of Homeland Security

DHS  
Form G-28  
OMB No. 1615-0105  
Expires 05/31/2021

**Part 1. Information About Attorney or Accredited Representative**

1. USCIS Online Account Number (if any)  
▶

**Name of Attorney or Accredited Representative**

2.a. Family Name (Last Name)   
2.b. Given Name (First Name)   
2.c. Middle Name

**Address of Attorney or Accredited Representative**

3.a. Street Number and Name   
3.b.  Apt.  Ste.  Flr.   
3.c. City or Town   
3.d. State  3.e. ZIP Code   
3.f. Province   
3.g. Postal Code   
3.h. Country

**Contact Information of Attorney or Accredited Representative**

4. Daytime Telephone Number   
5. Mobile Telephone Number (if any)   
6. Email Address (if any)   
7. Fax Number (if any)

**Part 2. Eligibility Information for Attorney or Accredited Representative**

Select all applicable items.

1.a.  I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority

1.b. Bar Number (if applicable)

1.c. I (select only one box)  am not  am subject to any order suspending, enjoining, restraining, disbaring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable)

2.a.  I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization

2.c. Date of Accreditation (mm/dd/yyyy)

3.  I am associated with , the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a.  I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate

**Part 3. Notice of Appearance as Attorney or Accredited Representative**

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

1.a.  U.S. Citizenship and Immigration Services (USCIS)

1.b. List the form numbers or specific matter in which appearance is entered.

Form I-485, Form I-131, Form I-765

2.a.  U.S. Immigration and Customs Enforcement (ICE)

2.b. List the specific matter in which appearance is entered.

3.a.  U.S. Customs and Border Protection (CBP)

3.b. List the specific matter in which appearance is entered.

4. Receipt Number (if any)

5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):

- Applicant  Petitioner  Requestor  Beneficiary/Derivative  Respondent (ICE, CBP)

**Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)**

6.a. Family Name (Last Name) JIANG

6.b. Given Name (First Name) XUEWEI

6.c. Middle Name

7.a. Name of Entity (if applicable)

7.b. Title of Authorized Signatory for Entity (if applicable)

8. Client's USCIS Online Account Number (if any)

9. Client's Alien Registration Number (A-Number) (if any) A- 1 1 6 5 6 4 7 4 9

**Client's Contact Information**

10. Daytime Telephone Number (469) 940-7789

11. Mobile Telephone Number (if any)

12. Email Address (if any) gorozco@BAL.com

**Mailing Address of Client**

NOTE: Provide the client's mailing address. Do not provide the business mailing address of the attorney or accredited representative unless it serves as the safe mailing address on the application or petition being filed with this Form G-28.

13.a. Street Number and Name 12421 Sanford St

13.b.  Apt.  Ste.  Flr.

13.c. City or Town Los Angeles

13.d. State CA 13.e. ZIP Code 90066

13.f. Province

13.g. Postal Code

13.h. Country United States

**Part 4. Client's Consent to Representation and Signature**

**Consent to Representation and Release of Information**

I have requested the representation of and consented to being represented by the attorney or accredited representative named in Part 1. of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

**Part 4. Client's Consent to Representation and Signature (continued)**

**Options Regarding Receipt of USCIS Notices and Documents**

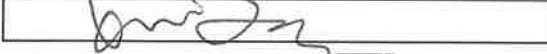
USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select all applicable items below. You may change these elections through written notice to USCIS.

- 1.a.  I request that USCIS send original notices on an application or petition to the U.S. business address of my attorney or accredited representative as listed in this form.
  
- 1.b.  I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).  

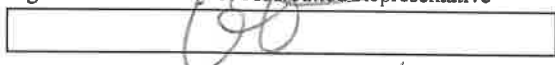
**NOTE:** If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**
  
- 1.c.  I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

**Signature of Client or Authorized Signatory for an Entity**

- 2.a. Signature of Client or Authorized Signatory for an Entity  
→ 
  
- 2.b. Date of Signature (mm/dd/yyyy)

**Part 5. Signature of Attorney or Accredited Representative**

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

- 1. a. Signature of Attorney or Accredited Representative  

  
- 1.b. Date of Signature (mm/dd/yyyy)
  
- 2.a. Signature of Law Student or Law Graduate
  
- 2.b. Date of Signature (mm/dd/yyyy)





# Application For Employment Authorization

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-765  
OMB No. 1615-0040  
Expires 10/31/2025

<b>For USCIS Use Only</b>	<input type="checkbox"/> Authorization/Extension Valid From _____	<b>Fee Stamp</b>	<b>Action Block</b>
	<input type="checkbox"/> Authorization/Extension Valid Through _____		
	<b>Alien Registration Number</b> A- <input type="text"/>		
	<b>Remarks</b>		

<b>To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).</b>	<input checked="" type="checkbox"/> Select this box if Form G-28 is attached.	<b>Attorney or Accredited Representative USCIS Online Account Number (if any)</b> <input type="text"/>
---	---	---

▶ **START HERE - Type or print in black ink.**

## Part 1. Reason for Applying

I am applying for (select only one box):

- 1.a.  Initial permission to accept employment.
- 1.b.  Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document **NOT DUE** to U.S. Citizenship and Immigration Services (USCIS) error.
- NOTE:** Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to **Replacement for Card Error** in the **What is the Filing Fee** section of the Form I-765 Instructions for further details.
- 1.c.  Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

## Part 2. Information About You

### Your Full Legal Name

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

### Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 6.

#### Additional Information.

2.a. Family Name (Last Name)

2.b. Given Name (First Name)

2.c. Middle Name

---

3.a. Family Name (Last Name)

3.b. Given Name (First Name)

3.c. Middle Name

---

4.a. Family Name (Last Name)

4.b. Given Name (First Name)

4.c. Middle Name





**Part 2. Information About You (continued)**

**Place of Birth**

List the city/town/village, state/province, and country where you were born.

- 19.a. City/Town/Village of Birth  
Jinan
- 19.b. State/Province of Birth  
Shandong
- 19.c. Country of Birth  
China
- 20. Date of Birth (mm/dd/yyyy) 03/13/1993

**Information About Your Last Arrival in the United States**

- 21.a. Form I-94 Arrival-Departure Record Number (if any)  
▶ 6 2 4 5 2 3 4 0 6 A 3
- 21.b. Passport Number of Your Most Recently Issued Passport  
EJ4954380
- 21.c. Travel Document Number (if any)  
▶
- 21.d. Country That Issued Your Passport or Travel Document  
▶
- 21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy) 07/12/2031
- 22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy) 11/07/2023
- 23. Place of Your Last Arrival Into the United States  
Los Angeles, CA
- 24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)  
H-1B
- 25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)  
H-1B
- 26. Student and Exchange Visitor Information System (SEVIS) Number (if any)  
▶ N-

**Information About Your Eligibility Category**

- 27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).  
(c) (9) ( )
- 28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category (c)(3)(C) in **Item Number 27.**, provide the information requested in **Item Numbers 28.a - 28.c.**
  - 28.a. Degree
  - 28.b. Employer's Name as Listed in E-Verify
  - 28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number
- 29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.  
▶
- 30. **(c)(8) Eligibility Category.** If you entered the eligibility category (c)(8) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime?  
 Yes  No

**NOTE:** If you answered "Yes" to **Item Number 30.**, refer to **Special Filing Instructions for Those With Pending Asylum Applications (c)(8)** in the **Required Documentation** section of the Form I-765 Instructions for information about providing court dispositions.

- 31.a. **(c)(35) and (c)(36) Eligibility Category.** If you entered the eligibility category (c)(35) in **Item Number 27.**, please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in **Item Number 27.**, please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.  
▶
- 31.b. If you entered the eligibility category (c)(35) or (c)(36) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime?  
 Yes  No

**NOTE:** If you answered "Yes" to **Item Number 31.b.**, refer to **Employment-Based Nonimmigrant Categories, Items 8. - 9.**, in the **Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.



**Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature**

**NOTE:** Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

**Applicant's Statement**

**NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

- 1.a.  I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 1.b.  The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I understood everything.
- 2.  At my request, the preparer named in **Part 5.**, , prepared this application for me based only upon information I provided or authorized.

**Applicant's Contact Information**

- 3. Applicant's Daytime Telephone Number
- 4. Applicant's Mobile Telephone Number (if any)
- 5. Applicant's Email Address (if any)
- 6.  Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

**Applicant's Declaration and Certification**

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

**Applicant's Signature**

- 7.a. Applicant's Signature
- 7.b. Date of Signature (mm/dd/yyyy)

**NOTE TO ALL APPLICANTS:** If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

**Part 4. Interpreter's Contact Information, Certification, and Signature**

Provide the following information about the interpreter.

**Interpreter's Full Name**

- 1.a. Interpreter's Family Name (Last Name)
- 1.b. Interpreter's Given Name (First Name)
- 2. Interpreter's Business or Organization Name (if any)



**Part 4. Interpreter's Contact Information, Certification, and Signature**

**Interpreter's Mailing Address**

3.a. Street Number and Name

3.b.  Apt.  Ste.  Flr.

3.c. City or Town

3.d. State  3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

**Interpreter's Contact Information**

4. Interpreter's Daytime Telephone Number

5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

**Interpreter's Certification**

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in Part 3., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.

**Interpreter's Signature**

7.a. Interpreter's Signature

7.b. Date of Signature (mm/dd/yyyy)

**Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant**

Provide the following information about the preparer.

**Preparer's Full Name**

1.a. Preparer's Family Name (Last Name)

1.b. Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name (if any)

**Preparer's Mailing Address**

3.a. Street Number and Name

3.b.  Apt.  Ste.  Flr.

3.c. City or Town

3.d. State  3.e. ZIP Code

3.f. Province

3.g. Postal Code

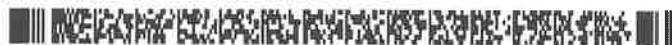
3.h. Country

**Preparer's Contact Information**

4. Preparer's Daytime Telephone Number

5. Preparer's Mobile Telephone Number (if any)

6. Preparer's Email Address (if any)



**Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant**  
(continued)

**Preparer's Statement**


- 7.a.  I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- 7.b.  I am an attorney or accredited representative and my representation of the applicant in this case  extends  does not extend beyond the preparation of this application.

**NOTE:** If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

**Preparer's Certification**

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

**Preparer's Signature**

8.a. Preparer's Signature 

8.b. Date of Signature (mm/dd/yyyy)







 For: **XUEWEI JIANG**



**Most Recent I-94**

---

**Admission (I-94) Record Number : 624523406A3**

**Most Recent Date of Entry: 2023 November 07**

**Class of Admission : H1B**

**Admit Until Date : 06/14/2026**

**Details provided on the I-94 Information form:**

**Last/Surname : JIANG**  
**First (Given) Name : XUEWEI**  
**Birth Date : 1993 March 13**  
**Document Number : EJ4954380**  
**Country of Citizenship : China**

[Get Travel History](#)

▶ Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

▶ If an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.

▶ Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.


OMB No. 1651-0111  
Expiration Date: 11/30/2023

[For inquiries or questions regarding your I-94, please click here](#)

[Accessibility | Privacy Policy](#)

# THE UNITED STATES OF AMERICA

## I-797A | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY U.S. CITIZENSHIP AND IMMIGRATION SERVICES

Receipt Number <b>IOE8286374759</b>		Case Type <b>I129 - PETITION FOR A NONIMMIGRANT WORKER</b>
Received Date <b>05/04/2023</b>	Priority Date	Petitioner <b>UNIVERSITY OF SOUTHERN CALIFORNIA</b>
Notice Date <b>05/08/2023</b>	Page <b>1 of 2</b>	Beneficiary <b>JIANG, XUEWEI</b>
UNIVERSITY OF SOUTHERN CALIFORNIA c/o JOSEPH I ELIAS ESQ DIR FACULTY/STAFF VISA SVCS 3434 SOUTH GRAND AVE STE CAL 302 LOS ANGELES CA 90089-2812		Notice Type: Approval Notice Class: H1B Valid from 06/05/2023 to 06/04/2026
<p>The above petition and accompanying request for an extension of stay have been approved. The status of the named beneficiary(ies) in this classification is valid as indicated on the I-94 attached below. The beneficiary(ies) can work for the petitioner pursuant to this approval notice, but only as detailed in the petition and during the petition validity period indicated above, unless otherwise authorized by law. Changes in employment or training may require you to file a new Form I-129, Petition for a Nonimmigrant Worker.</p> <p>The dates in the I-94 attached below might not be for the same dates as the petition validity dates above because the I-94 below may contain a grace period of up to 10 days before and up to 10 days after the petition validity period for the following classifications: CW-1, E-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-1S, P-2, P-2S, P-3, P-3S, TN-1, and TN-2. An I-94 for H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. However, the beneficiary(ies) may not work during such grace periods, unless otherwise authorized by law. The decision to grant a grace period and the length of the granted grace period is discretionary, final, and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.</p> <p>The petitioner should keep the upper portion of this notice. The lower portion should be given to the beneficiary(ies). The beneficiary(ies) should keep the right part (the I-94 portion) with his or her other Forms I-94, Arrival-Departure Record. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted a extension of stay who leaves the U.S. and is not visa-exempt must normally obtain a new visa before returning. The left part can be used when applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry based on this approval notice at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, Application for Action on an Approved Application or Petition, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.</p> <p>The approval of this petition does not guarantee that the beneficiary(ies) will be found to be eligible for a visa, for admission to the United States (if traveling abroad and seeking re-admission), or for a subsequent extension of stay, change of status, or adjustment of status.</p> <p>Please see the additional information on the back. You will be notified separately about any other cases you filed.</p> <p>USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <a href="https://www.uscis.gov/file-online">https://www.uscis.gov/file-online</a>.</p>		
California Service Center U.S. CITIZENSHIP & IMMIGRATION SVC P.O. Box 30111 Laguna Niguel CA 92607-0111 USCIS Contact Center: <a href="http://www.uscis.gov/contactcenter">www.uscis.gov/contactcenter</a>		

PLEASE TEAR OFF FORM I-94 PRINTED BELOW AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

**Detach This Half for Personal Records**

**Receipt#** IOE8286374759  
**I-94#** 883365973 A2  
**NAME** JIANG, XUEWEI  
**CLASS** H1B  
**VALID FROM** 06/05/2023 **UNTIL** 06/14/2026

**PETITIONER**  
 UNIVERSITY OF SOUTHERN CALIFORNIA  
 3434 SOUTH GRAND AVE STE CAL 302  
 LOS ANGELES CA 90089-2812

**883365973 A2**  
**Receipt Number** IOE8286374759  
**US Citizenship and Immigration Services**

**I94 Departure Record**  
**Petitioner:** UNIVERSITY OF SOUTHERN CALIFORNIA

14. Family Name <b>JIANG</b>	
15. First (Given) Name <b>XUEWEI</b>	16. Date of Birth <b>03/13/1993</b>
17. Country of Citizenship <b>China</b>	

**I-797 | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY U.S. CITIZENSHIP AND IMMIGRATION SERVICES**

Receipt Number LIN2025750217		Case Type I140 - IMMIGRANT PETITION FOR ALIEN WORKER
Received Date 07/22/2020	Priority Date 09/27/2019	Petitioner FACEBOOK INC
Notice Date 07/29/2020	Page 1 of 1	Beneficiary A218 056 203 LU. YANXIN

FACEBOOK INC  
c/o GLORIA LUAN  
BERRY APPLEMAN LEIDEN LLP  
50 CALIFORNIA STREET FLR 2  
SAN FRANCISCO CA 94111

**Notice Type:** Approval Notice  
**Section:** Mem of Profession w/Adv Deg, or of Exceptn'l Ability Sec.203(b)(2)  
**Consulate:**  
**ETA Case Number:** A1926159588  
**SOC Code:** 151133 **Skill Level:** 2  
**Work Site:** MENLO PARK CA

The above petition has been approved. The petition indicates that the person for whom you are petitioning is in the United States and will apply for adjustment of status. He or she should contact the local USCIS office to obtain Form I-485, Application to Register Permanent Residence or Adjust Status. A copy of this notice should be submitted with the application, with appropriate fee, to this Service Center. Additional information about eligibility for adjustment of status may be obtained from the local USCIS office serving the area where he or she lives, or by calling 1-800-375-5283.

If the person for whom you are petitioning decides to apply for a visa outside the United States based upon this petition, the petitioner should file Form I-824, Application for Action on an Approved Application or Petition, to request that we send the petition to the Department of State National Visa Center (NVC).

The NVC processes all approved immigrant visa petitions that require consular action. The NVC also determines which consular post is the appropriate consulate to complete visa processing. It will then forward the approved petition to that consulate.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa, for admission to the United States, or for an extension, change, or adjustment of status.

**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

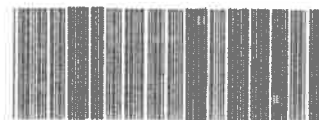
The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-205-2417 or fax 202-481-5719.

**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

Nebraska Service Center  
U. S. CITIZENSHIP & IMMIGRATION SVC  
P.O. Box 82521  
Lincoln NE 68501-2521

USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)



# THE UNITED STATES OF AMERICA

**I-797 | NOTICE OF ACTION | DEPARTMENT OF HOMELAND SECURITY**  
U.S. CITIZENSHIP & IMMIGRATION SERVICES



Receipt Number <b>LIN222115112</b>		Case Type <b>I14D - IMMIGRANT PETITION FOR ALIEN WORKER</b>
Received Date <b>05/16/2022</b>	Priority Date <b>08/02/2021</b>	Petitioner <b>UNIVERSITY SOUTHERN CALIFORNIA</b>
Notice Date <b>05/18/2022</b>	Page <b>1 of 1</b>	Beneficiary: A116-561719 <b>JIANG, XUEWEI</b>

**UNIVERSITY SOUTHERN CALIFORNIA**  
c/o JOSEPH ELIAS ESQ DIRECTOR USMS  
343 SOUTH GRAND AVE STE CAJ 302  
LOS ANGELES CA 90089

**Notice Type:** Approval Notice  
**Section:** Mem of Profession w/Adv Deg or of  
Except'n Ability Sec.203(b)(2)  
**Consulate:**  
**ETA Case Number:** A2117908792  
**SOC Code:** 251011 **Skill Level:** 1

The above petition has been approved. The petition indicates that the person for whom you are petitioning is in the United States and will apply for adjustment of status. He or she should contact the local USCIS office to obtain Form I-485, Application to Register Permanent Residence or Adjust Status. A copy of this notice should be submitted with the application, with appropriate fee, to this Service Center. Additional information about eligibility for adjustment of status may be obtained from the local USCIS office serving the area where he or she lives, or by calling 1-800-375-5283.

If the person for whom you are petitioning decides to apply for a visa outside the United States based upon this petition, the petitioner should file Form I-824, Application for Action on an Approved Application or Petition, to request that we send the petition to the Department of State National Visa Center (NVC).

The NVC processes all approved immigrant visa petitions that require consular action. The NVC also determines which consular post is the appropriate consulate to complete visa processing. It will then forward the approved petition to that consulate.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa for admission to the United States, or for an extension, change, or adjustment of status.

**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

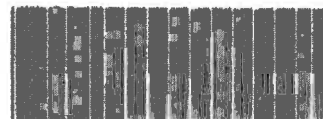
The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-205-2417 or fax 202-481-5710.

**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you and the legal representative listed on your Form G-28, if you submitted one, an opportunity to address that information before we make a final decision on your case or that proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.  
USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <https://www.uscis.gov/file-online>.

Nebraska Service Center  
U.S. CITIZENSHIP & IMMIGRATION SVS  
P.O. Box 82521  
Lincoln NE 68501-2521

USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)





中华人民共和国民政部监制




结婚申请，符合《中华人民共和国婚姻法》规定，予以登记，发给此证。

登记机关

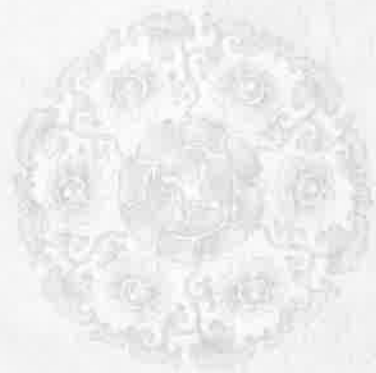


婚姻登记员

王英



婚姻法规定，要求结婚的  
男女双方必须亲自到婚姻登记  
机关进行结婚登记。符合本法  
规定的，予以登记，发给结婚  
证。取得结婚证，即确立夫妻  
关系。



NQ0341002846

持证人 **陆彦忻**



登记日期 2016 年 08 月 08 日

结婚证号 J370105-2016-002657

备注

姓名	陆彦忻	性别	男
国籍	中国	出生日期	1989年10月17日
身份证件号	44018119891017001X		

姓名	姜薇伟	性别	女
国籍	中国	出生日期	1993年03月13日
身份证件号	370105199303130825		

中华人民共和国民政部结婚证印章

Seal for Marriage Certificate of the ministry of Civil Affairs of People's Republic of  
China

中华人民共和国民政部监制

The manufacture was supervised by the Ministry of Civil Affairs of People's Republic of  
China

结婚申请，符合《中华人民共和国婚姻法》规定，予以登记，发给此证。

This application conforms to the Marriage Law of the People's Republic of China. We  
hereby give them the permission to register and issue this marriage certificate.

登记机关

Registration Office

济南市天桥区民政局婚姻登记专用章

Special Seal for Marriage Register of Tianqiao District, Jinan Civil Affairs Bureau

婚姻登记员: 王燕

Marriage Register: Yan Wang

持证人:陆彦忻

Certificate Holder: Yanxin Lu

登记日期: 2016年08月08日

Registration Date: August, 8<sup>th</sup>, 2016

结婚证字号: J370105 2016-002657

Marriage Certificate No.: J370105 2016 002657

备注

Annotation

姓名: 陆彦忻

Name: Yanxin Lu

国籍: 中国

Nationality: People's Republic of China

身份证号码: 44018119891017001X

ID Number: 44018119891017001X

姓名: 姜薛伟

Name: Xuewei Jiang

国籍: 中国

Nationality: People's Republic of China

身份证号码: 370105199303130825

ID Number: 370105199303130825

性别: 男

Gender: Male

出生日期: 1989年10月17日

Birth Date: October, 17<sup>th</sup>, 1989

性别: 女

Gender: Female

出生日期: 1993年3月13日

Birth Date: March, 13<sup>th</sup>, 1993

婚姻法规定。要求结婚的男女双方必须亲自到婚姻登记机关进行结婚登记。符合本法规定的，予以登记，发给结婚证。取得结婚证，即确立夫妻关系。

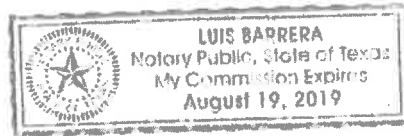
The marriage law has prescribed that the man and the woman who want to get married must go to the marriage registration office to make a marriage registration. In line with the provisions of this law, be registered, issued a marriage certificate. The husband-and-wife relationship shall be established as soon as they acquire the marriage certificates.

X [Signature]

State of Texas County of Travis,

This instrument was acknowledged before me  
on the 13<sup>th</sup> day of August, 2016  
by [Signature]

[Signature]  
Notary Public



**Certification by Translator**

I, Xue Li, certify that I am fluent in the English and Chinese languages, and that the above/attached document is an accurate translation of the document attached entitled Marriage Certificate.

Xue Li  
Signature

08/13/2016  
Date

Xue Li  
Printed Name

3500 Greystone Drive, Apt. 270, Austin, TX  
Address  
78731

State of Texas      County of Travis

This instrument was acknowledged before me  
on the 13<sup>th</sup> day of August, 2016  
by Xue Li

[Signature]  
Notary Public

