

# Form I-865, Sponsor's Notice of Change of Address

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

For USCIS Use Only	
<b>Returned</b>	<b>Receipt</b>
Date	
Date	<b>Resubmitted</b>
Date	
Date	<b>Action Block</b>
Date	
<b>Remarks</b>	

**Part 1. Information About You, the Sponsor**

Family Name	Given Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth (mm/dd/yyyy)	Place of Birth (City, State/Province /Country)	
<input type="text"/>	<input type="text"/>	
A-Number (if any)	U.S. Social Security Number	
<input type="text"/>	<input type="text"/>	

**Your current status (Check one)**

I am a  U.S. Citizen  Lawful Permanent Resident

**NOTE:** If you became a U.S. citizen following the filing of your Form I-864, Affidavit of Support, or submission of a prior Form I-865 address change, include a copy of proof of your U.S. citizenship (example: naturalization certificate, certificate of citizenship, U.S. passport) with this notice.

**Your New Home Address - Street Number and Name (Include Apt. # if applicable)**

<input type="text"/>	
City	State or Province
<input type="text"/>	<input type="text"/>
Zip/Postal Code	Country
<input type="text"/>	<input type="text"/>
Effective Date of Change of Address	Daytime Telephone (Area/Country Code)
<input type="text"/>	<input type="text"/>
E-Mail Address (if any)	
<input type="text"/>	

**Your New Mailing Address - NOTE:** You do not need to complete this section if your new mailing address is the same as your new home address above.

Street Number and Name (Include Apt.#, if applicable)

C/O (in care of):	City	State or Province	Zip/Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Effective Date of Change of Address	Daytime Telephone (Area/Country Code)	E-Mail Address (if any)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

**Part 2. Information on Sponsored Immigrant(s) (If more than one person, attach a separate sheet(s) of paper)**

**Provide the requested information on the person(s) your are sponsoring:**

Family Name	Given Name	Middle Name	A-Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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**Part 3. Sponsor's Signature** *(Read the information on penalties in the instructions before completing this part)*

I certify, under penalty of perjury under the laws of the United States of America, that all the information provided on this notice is true and correct.

**Signature**

**Date** *(mm/dd/yyyy)*

**Part 4. Signature of Person Preparing Form, If Other Than Above** *(Sign below)*

I declare that I prepared this request at the request of the above person, and it is based on all information of which I have knowledge.

**Preparer's Signature**

**Preparer's Printed Name**

**Date** *(mm/dd/yyyy)*

**Preparer's Firm Name** *(if applicable)*

**Preparer's Address**

**Daytime Phone Number** *(with area code)*

**Fax Number** *(if any)*

**E-Mail Address** *(if any)*