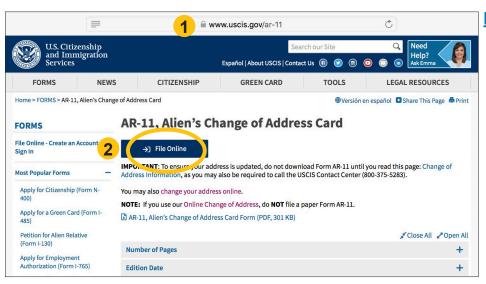
CWS (۲) چگونه پرونده 11-AR خود را بصورت آنلاین انجام دهیم



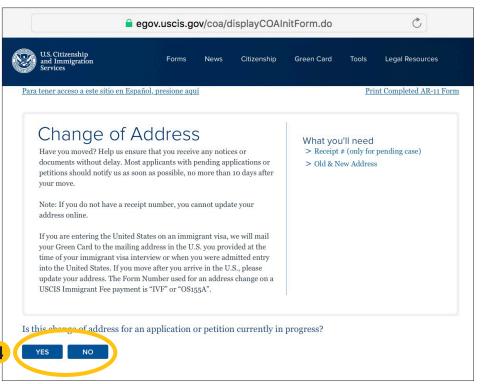




2 انتخاب كنيد "يرونده آنلاين".

 \equiv C egov.uscis.gov/coa/displayCOAForm.do Legal Resources Green Card Para tener acceso a este sitio en Español, presione aqui Before you file a Change of Address form, consider the following conditions: Are you a victim of a domestic violence, trafficking, or other crime? Do you have a MyUSCIS account? Are you a Civil Surgeon? Are you a US citizen? Change of Address The information requested on this form is collected under the Immigration and Nationality Act section 265. The primary purpose for providing the requested information on this form is to report a change of address. Except for those exempted, all aliens in the U.S. are required to report any change of address or new address. DHS uses the information you provide to contact you about the immigration benefit you are seeking. The information you provide is mandatory. Failure to report a change of address may result in a fine, imprisonment and/or removal, as well as jeopardize your ability to obtain a future visa or other immigration benefits. DHS may share the information you provide on this form with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-001 - Alien File, Index, and National File Tracking System and DHS-USCIS-007 - Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-018 Alien Change of Address Card (AR-11) and DHS/USCIS/PIA-019 Customer Relationship Interface System (CRIS)] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security. OMB Control No. 1615-0007; Expires 08/31/2018 Paperwork Reduction Act Burden Disclosure Notice: An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this information collection is estimated at .167 hour per response. This time burden estimation includes the time for gathering the required documentation and information, reviewing the instructions, and completing and submitting the request. Send comments regarding the burden estimate or any other aspect of this information collection, including suggestions for reducing this U.S. Citizenship and Immigration Services Regulatory Coordination Division, Office of Policy and Strategy 20 Massachusetts Ave., N.W. Washington, D.C. 20529-2140 CONTINUE

3 در صفحه بعد اهداف AR-11 توضیح داده شده و از شما سوال می شود که آیا معیار های خاصی را رعایت می کنید یا خیر و قتی شمابر رسی اطلاعات ر ۱ انجام دادید، به انتهای صفحه بروید و انتخاب کنید " ".



4 اگر در حال حاضر با USCISکار های دفتری مهم دارید، مانند یک برنامه کارت سبز معلق، انتخاب کنید "بلی" برای این سوال . اگر شما "بلی"، را انتخاب کنید، از شما نام کار های کاغذی معلق تان را خواسته می شود . اگر شما کار های کاندی معلق ندارید، می توانید انتخاب کنید "تخیر".

egov.uscis.gov/coa/coaCreate.do Applicant or Petitioner Information First Name Last Name Middle Name (optional) ☐ No First Name Please check if you do not have a first name Date of Birth (MM/DD/YYYY) A-Number (optional) ? \square Member of the U.S. Military, or recently discharged from service, or spouse of a member of the U.S. Military Citizenship Country of current citizenship - Select One 💠 In the US as a - Select One 💠 Specify if in the US as Other

اکنون می توانید AR-11 را تکمیل کنید. افراد می توانند از چگونگی تکمیل یک برگه AR-11 رای توضیح اطلاعات استفاده کنند.

پس از تکمیل، به پایین صفحه بروید و کلیک کنید "تسلیم کنید ."