

## **Requesting Immigration Casework Assistance (Homeland Security/State)**

The *Privacy Act of 1974* requires congressional offices to obtain written authorization from a constituent before a federal agency may release any case-specific information regarding that person to a Member of Congress, United States Senator, or their staff. Please complete and return this privacy release form to my Detroit office at the address listed below. Family, friends and other third parties are not able to authorize release of information on your behalf.

Please review the following instructions for completing this release, based on the type of benefit you are seeking from the federal government. Immigrant, nonimmigrant and visa-related benefits are divided into two types of cases, benefits where you are petitioning on behalf of another individual— a petition—and benefits you seeking for yourself—an application.

### **For petitions:**

1. Complete the petitioner/applicant section of the release.
2. Complete the beneficiary section of the release (unless you are petitioning on behalf of yourself).

### **For applications:**

1. Complete the petitioner/applicant section of the release.

**\*For any type of case, you must provide a brief written description of the matter for which you are seeking assistance.** If you require additional space for your description, you may attach it on a separate page. If you do so, please write “description attached” in the description section.

Upon completing the privacy release form, please sign and complete the privacy statement.

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### **Case Description**

*Please provide a brief description of the matter for which you are seeking assistance. Continue on additional pages if needed.*

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- ***Have you contacted another Member of Congress or U.S. Senator regarding this matter, yes or no?***  
If yes, please identify which offices you have contacted.

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**To return this form by mail:** U.S. Senator Gary Peters  
Attn: Constituent Services  
477 Michigan Avenue, Suite 1837  
Detroit, MI 48226

**To return this form by fax:** (313) 226-6948



- Immigration Privacy Release Form -

**Petitioner/Applicant Section**

When filing for an immigrant, nonimmigrant or visa benefit for yourself or on behalf of another person, please provide your information in this section.

Identifying Information

Prefix Full Name

Date of Birth Place of Birth (city and country) Alien Number (if applicable)

Contact Information

Street Address

City, State, Zip Code

Mobile Phone Email Address

Alternate Phone

Case Information

Case/Receipt Number(s) (i.e. USCIS Receipt, NVC Case Number) Form Type(s) Filing/Priority Date

Passport Number (for nonimmigrant case only)

**Beneficiary Section**

When filing for an immigrant benefit on behalf of another person, please provide their information in this section.

Identifying Information

Prefix Full Name

Date of Birth Place of Birth (city and country) Alien Number (if applicable)

**Privacy Statement**

I, \_\_\_\_\_ (print petitioner/applicant name), certify under penalty of perjury, that 1) I provided or authorized all of the information in this privacy release and any document submitted with it; 2) I reviewed and understand all of the information contained in my privacy release and submitted with it; and 3) all of this information is complete, true, and correct.

I authorize Senator Gary Peters and his staff to work on my behalf with agencies in the U.S. Department of Homeland Security (CBP, ICE, USCIS), U.S. Department of State and/or U.S. Department of Justice (EOIR) relevant to the matter described above, to receive and review any information contained in my file, and, if necessary, to forward any pertinent correspondence sent by me regarding this matter to those agencies.

Signature of Petitioner/Applicant

Date