IMMIGRANT CASE RECORD SEARCH REQUEST



Thank you for reaching out to HIAS. We're honored that you have chosen to include us on your journey to discover your family history. Your privacy—and the privacy of all our clients—is important to us. We appreciate your taking the time to answer the questions below to the best of your ability.

PART A: PRELIMINARY DEMOGRAPHIC INFORMATION

INSTRUCTIONS: PART A consists of Preliminary Demographic Information which HIAS requires to fulfill an Immigrant Record Search Request. Did HIAS help you, your family, or your ancestor come to the U.S.? Yes No 🗆 INFORMATION ABOUT THE MAIN SUBJECT WHOSE FILE YOU ARE REQUESTING: First Name at the time of arrival: Last Name at the time of arrival: Maiden Name: Other Name (if changed): Date of Birth (if unknown, approximate year): Country and City of Birth: Country of Departure: Date of arrival to United States: OTHER ACCOMPANYING FAMILY MEMBERS (IF KNOWN TO YOU): 1. First / Last Name: _____ Date / Place of Birth: Relationship to Subject: 2. First / Last Name: Date / Place of Birth: Relationship to Subject: 3. First / Last Name: Date / Place of Birth: _____

Relationship to Subject:

IMMIGRANT CASE RECORD SEARCH REQUEST



INQUIRER INFORMATION:

Name:		
Addres	s:	City / State / Zip:
Home F	Phone:	Cell Phone:
Fax:		E-mail:
Relatio	nship to the person whose rec	cords are requested:
<u>NAME</u>	AND ADDRESS WHERE REC	ORD SHOULD BE SENT IF DIFFERENT FROM INQUIRER:
Name:		
		City / State / Zip:
		Cell Phone:
		E-mail:
PART	B: REQUIRED QUESTIONS	
assure : Reques	you that we will do our best to g	o for Record of Special Inquiry and from 1911 for Record of Arrival. We get positive results. However, the outcome of an Immigrant Record Search s such, we are not liable to you for any failure on our part to obtain the
		f Required Questions you must answer prior to submitting your request m to the best of your knowledge and ability.
1.	Please specify what type of in	formation you are looking for:
(a)	Date of arrival	
(b)	Date and place of birth	
(c)	Relationship to subject of the	file
(d)	Marital status	
	Jewish identity	
	Case file (Please see Part C)	
(g)	Other, please specify	
2.	What is the intended purpose	for this information?

Please provide legible, clean and intact copies of your driver's license or other valid state or Federal government-issued ID. HIAS reserves the right to deny your request if any documents are ineligible for submission.

IMMIGRANT CASE RECORD SEARCH REQUEST



PART C: REQUEST COPY OF HIAS CASE FILE

Please be aware that we do not have files before 1940. Access to the files after 1945 is generally denied unless (a) the inquirer is the subject of the case file; or (b) a direct-line descendant (child or grandchild) of the subject and provides proof of his/her relationship to the case subject.

and provides proof of his/her relationship to the case subject.
Are you the subject of this case file? Yes No
If you checked " Yes ," please provide a legible, clean and intact copy of your driver's license or other valid state or Federal government-issued ID. Relationship to the person whose records are requested: If you checked " No ," proceed to the next question.
 Are you a direct-line descendant of the subject of this case file (i.e. child or grandchild)? Yes No
If you checked "Yes," please provide a legible, clean and intact copy of your driver's license or other valid state or Federal government-issued ID. You will also need to submit either (a) a letter of authorization from the subject; or (b) if the subject is deceased, proof of death of the subject and proof of your direct-line relationship. Acceptable documents for demonstrating proof of your relationship may include but are not limited to the following: birth or adoption certificate, court order, sworn affidavit by a third party, medical or school records, blood or DNA test results or a will or testamentary document. If you checked "No," proceed to the next question.
3. Are you a distant relative, researcher or genealogist? Yes No
If you checked, "Yes," please be aware that you have requested the records of only the specific subject named herein. As such, sensitive personal information pertaining to unrelated third party individuals listed in the file including but not limited to: a) personal health information; b) personal identifying information; and c) anecdotal information, shall be redacted from the subject's record when transferred to you.
To obtain a copy of the case file in this instance, you must provide us with a letter of authorization from the subject, or, if the subject is deceased, proof of death of the subject and a letter of authorization from an individual authorized by law to make decisions on behalf of the subject, which may include an administrator, executor, someone who has a Power of Attorney, or a direct-line descendant of the subject. Relationship to the person whose records are requested: A letter of authorization could be provided through:
 A verified email from the case subject or other applicable relative, with a copy of their identification in the attachment, or By mail with notarized signature of the case subject or other applicable relative.
By signing this form, you hereby acknowledge and agree to all of the terms and conditions contained herein, and you certify that you are the person requesting this information.
Your signature: