

Alien's Change of Address Form/ Immigration Court

You are required under 8 C.F.R. 1003.15 (d)(2) to notify the Immigration Court of any change of address and any change of telephone number within five (5) working days of moving or changing your address or phone number. You will receive notification as to the time, date, and place of hearing or other official correspondence only at the address which you provide.

Failure to appear at any hearing before an Immigration Judge, when notice of that hearing or other official correspondence was served on you or sent to the address you provided, may result in one or more of the following actions:

•If you are not already detained, you may be taken into custody by the Department of Homeland Security and held for further action; and

If you are in **removal** proceedings:

Your hearing may be held in your absence under Section 240 of the Immigration and Nationality Act (INA), and an order of removal may be entered against you. Furthermore, you may become ineligible for the following forms of relief from removal for a period of 10 years after the date of the entry of the final order:

1. Voluntary Departure as provided for in Section 240B of the INA;
2. Cancellation of Removal as provided for in Section 240A of the INA;
3. Adjustment of Status or Change of Status as provided for in Section(s) 245, 248, or 249 of the INA.

If you are in **deportation** proceedings:

Your hearing may be held in your absence under Section 242B of the Immigration and Nationality Act (INA) (1995), and an order of deportation may be entered against you. Furthermore, you may become ineligible for the following forms of relief from deportation for a period of 5 years after the date of the entry of the final order:

1. Voluntary Departure as provided for in Section 242(b) of the INA (1995);
2. Suspension of Deportation or Voluntary Departure as provided for in Section 244 of the INA (1995);
3. Adjustment of Status or Change of Status as provided for in Section(s) 245, 248, or 249 of the INA (1995).

If you are in **exclusion** proceedings:

Your application for admission to the United States may be considered withdrawn, and your hearing may be held in your absence and an order of exclusion and deportation entered against you.

Name: _____ Alien Number: A _____

My OLD address was:

("In care of" other person, if any)

(Number, Street, Apartment)

(City, State and ZIP Code)

(Country, if other than U.S.)

My NEW address is:

("In care of" other person, if any)

(Number, Street, Apartment)

(City, State and ZIP Code)

(Country, if other than U.S.)

(New Telephone Number)



SIGN HERE



X _____

Signature

_____ Date

PROOF OF SERVICE (You Must Complete This)

I _____ mailed or delivered a copy of this Change of Address Form on _____ to the
(Name) (Date)

Office of the Chief Counsel for the DHS (U.S. Immigration and Customs Enforcement-ICE) at _____
(Number and Street, City, State, Zip Code)

(Number and Street, City, State, Zip Code)



SIGN HERE



X _____

Signature

MAILING INSTRUCTIONS

- 1) Copy the completed form and mail or deliver it to the Office of the Chief Counsel DHS-ICE address you inserted in the **PROOF OF SERVICE**. The **PROOF OF SERVICE** certifies that you provided a copy of the form to DHS.
- 2) Fold the page at the dotted lines marked "Fold Here" so that the address is visible.
(**IMPORTANT: Make sure the address section is visible after folds are made.**)
- 3) Secure the folded form by stapling along the open end marked "Fasten Here."
- 4) Place appropriate postage stamp in the area marked "Place Stamp Here."
- 5) Write in your return address in the area marked "**PUT YOUR ADDRESS HERE.**"
- 6) Mail the original form to the Immigration Court where the address is printed below.

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete this form is three (3) minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Executive Office for Immigration Review, Office of the General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041.

Fold Here

PUT YOUR ADDRESS HERE

Place
Stamp
Here

U.S. Department of Justice
Immigration Court
1705 E. Hanna Rd.
Suite 366
Eloy, AZ 85231

Fold Here

Fasten Here