U.S. Citizenship and Immigration Services

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	Applicants Start Here (To be filed in d	uplicate)		
ART I. INFORMATION AI	BOUT YOU				
ast Name	First Name			Middle Name	
Alien registration number (A#) if l	known, or Alien File(s) or receipt	pt number(s) and a	ny immigration	file(s)	
or case number(s) listed on corresp	oondence from U.S. immigratio	n authorities that re	elate to you		
	NT 1 1 1 . 1				
	Name used when last deport from the United States	ed or removed	Country of		CD: (1
Other names used or known by	nom me onneu states		or Nationali	<u>ty</u> 1	Date of Birth
Other names used or known by					
Other names used or known by					
Other names used or known by					
	State	Province		Country	
Other names used or known by Place of Birth (City or Town)	State	Province		Country	

I am inadmissible to the United States for the following reason(s) and no others:

I have been removed as an arriving alien in expedited removal proceedings under INA section 235(b)(1), or I was removed at the end of proceedings under INA section 240 as an arriving alien (INA section 212(a)(9)(A)(i)). I have only been removed once, and my last removal was less than 5 years ago. I have been removed at least twice or more, and my last removal was less than 20 years ago. L I have been convicted of an aggravated felony (in the United States or elsewhere, before or after my removal from the United States). I have been removed as a deportable alien under INA section 240 or any other provision of the law, or I departed the United States while an order or removal was outstanding (INA section 212(a)(9)(A)(ii)). I have only been removed once and less than 10 years ago.

L I have been removed at least twice or more, and my last removal was less than 20 years ago.

I have been convicted of an aggravated felony (in the United States or elsewhere, before or after my removal from the United States).

☐ I entered or attempted to enter the United States without being admitted or paroled after section 212(a)(9)(C)(i)(I)).	r having been removed (INA
Specify date of last departure from the United States after having become inadmissible: (Atta date of your last departure from the United States and that you have remained outside the United States and the United States and that you have remained outside the United States and the	
☐ I entered or attempted to enter the United States without being admitted or paroled after present in the United States for a period of more than 1 year, in the aggregate (INA section of the state of the table of the state o	ion 212(a)(9)(C)(i)(I)).
Specify date of last departure from the United States after having become inadmissible: (Atta date of your last departure from the United States and that you have remained outside the United	
PART III. INFORMATION ABOUT YOUR REMOVAL/DEPORTATION AND D Date of deportation or removal from the United States If you have not been in removal proceedings, date of last departure from the United States (Attach evidence)	DEPARTURE Length of residence in the United States (<i>years</i>)
Place of residence at time of deportation or removal from United States (city and state) Place deportation or removal hearing held or application for removal made (city and state)	Country to which deported or removed
Detention facility or jail where detained <i>(city and state) (If not detained, write "None.")</i> Port/location of departure from the United S	States
PART IV. REASON(S) FOR YOUR REQUEST FOR PERMISSION TO REAPPL	Y
Status desired if permitted to reenter the United States: Permanent Resident Visitor Student Other (specify)	
Reason(s) for desiring to reenter the United States:	

REASON(S) FOR YOUR REQUEST FOR PERMISSION TO REAPPLY (Cont'd)

Location of U.S. Embassy/consulate where application for visa is/or will be made (city and country)

Name and relationship of U.S. citizen or lawful permanent resident alien spouse, parent or children, if any

PART V. APPLICANT'S SIGNATURE AND CERTIFICATION

I certify under penalty of perjury under the laws of the United States that this application and the evidence submitted with it are all true and correct to the best of my knowledge and abilities. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services (USCIS) or any other agency adjudicating this application needs to determine my eligibility for the benefits sought with this application.

Signature of Applicant or Legal Guardian			Date of Signature
Applicant's Street Address (You must provide			
a physical address.)	City	State Zip Code	Province
P.O. Box (If applicable) State Province	Country	Applicant's Telephone	Number
Applicant's Mobile Telephone Number Ap	pplicant's E-mail Address (if any	y)	

PART VI. PREPARER'S SIGNATURE AND CERTIFICATION (If other than applicant)

I declare that this document was prepared by me at the request of the applicant or legal guardian of the applicant, and that is based on all information of which I have knowledge and/or was provided to me by the above named person in response to the exact questions contained on this form. I have not knowingly withheld any information.

Signature of Preparer				Date of Signature
Preparer's Street Address				
	City	State	Zip Code	Province
P.O. Box (If applicable) State Prov	vince Country	Pre	parer's Telephone	Number
Preparer's Mobile Telephone Number	Preparer's E-mail Address (if any)		