

# ORR-3 Instructions Unaccompanied Refugee Minor Placement Report

## What the ORR-3 Report is:

The Unaccompanied Refugee Minor Placement Report, which replaces ICPC-100B (the Interstate Compact on the Placement of Children Initial Placement Form), is an adaptation of that placement report to be used for all unaccompanied youth eligible for and provided services through the Office of Refugee Resettlement's Unaccompanied Refugee Minor (URM) program.<sup>1</sup>

When referring to “minors” or “youth,” this ORR-3 form and instructions means both children under the age of 18 and youth over the age of 18 who are receiving and/or have received placement including independent living and ETV benefits and services funded by ORR.

## Who Fills out and Submits the ORR-3:

The form needs to be filled and reviewed by both the URM program provider and state agency.

- A caseworker or program manager fills out the form initially.
- Once it is completed, it is then sent to the State Refugee Coordinator (SRC).
- The SRC reviews, endorses and submits the form to ORR.

## When the ORR-3 is to be Submitted:

The Unaccompanied Refugee Minor Placement Report is to be used for the following reporting situations:

- Initial Placement:

Indicate initial placement for newly arrived refugee minors or other eligible youth. This form is due to ORR within 30 days of the initial placement. All information in sections needs to be filled out to the best of the providers including Section VI, if applicable.

- Change of Status:

Indicate any changes in placement information per the choices available on the form, including youth who emancipate from placement services but are still receiving ORR-funded services. Change in identifying data should include updated information for the youth as well as his/her parents. When completing the ORR-3 for a ‘Change of Status,’ *only fill out the first page of Form ORR-3 including Section I, the information that is new or changing and Section VII: Form Submission Authority.* Completing a ‘Change of Status’ does not require filling out the entire form but only the information that is changing. This form is due to ORR within 60 days of the change.

- Termination from ORR-Funded Services:

Provide Final Report related to youth terminating URM services, including the youth’s destination or current situation upon case closure as well as the date ORR-funded services terminated. Only complete *Sections I and Section VII: Form Submission Authority* when submitting a termination report. Any changes to identifying information on a youth should be submitted through a separate Change of Status Report. A Termination Report is due to ORR within 60 days of case closure.<sup>2</sup>

- Re-entered ORR-funded Services:

Select this option for youth reentering the URM program. Placement of youth re-entering URM services is limited to youth who were previously enrolled as a URM and who are eligible to return to the program according to the State’s Title IV-B plan.

## INSTRUCTIONS for COMPLETING the ORR-3 REPORT

<sup>1</sup> Refer to 45 CFR 400.111

<sup>2</sup> Refer to 45 CFR 400.113

At the top of the page, enter the information for the following:

- Name: Enter the youth's full name in the order of Last, First, and Middle name(s).
- Alien Registration Number and/or HHS Tracking Number: The Alien Registration Number can be found on the I-94, asylum approval letter from the U.S. Citizenship and Immigration Services (USCIS), I-797 Notice of Action, I-171 approving I-360 Special Immigrant Juvenile petition, Notice to Appear, or other documents from the U.S. Department of Homeland Security or the Immigration Court. If no Alien Registration Number is available for victims of trafficking, enter the HHS Tracking number for youth who are issued a Letter of Eligibility by ORR as a victim of a severe form of human trafficking.
- State Agency: Enter the name and address for the State Agency submitting the report.
- URM Provider Agency: Enter the name and address of the URM provider agency.
- National Voluntary Agency: Choose the name of the voluntary resettlement agency which sponsored or assisted in the placement of the youth.

## SECTION I: REPORT ACTION

Check the appropriate box to indicate whether the report is:

1. Initial Placement: Initial placement report that must be submitted within 30 days of placement.
2. Change of Status: Select all related changes and enter date(s) of action(s).
  - *Establishing/changing legal responsibility*: Select when legal responsibility has been established or changed at an appropriate court by a state or local public child welfare agency, or with a licensed non-public child welfare agency under contract with the state. This does not apply to each permanency hearing review. ORR only wants a change of status report should the custodian change etc.
  - *Transfer to/from another URM program*: Select when a youth transfers to or from another URM program; provide location information in the explanation box below. If it is a transfer to another state, please follow the state's procedures for interstate transfer, per 45 CFR 400.119. Transfers to/from another URM program are to be reported to ORR as a change of status rather than termination and re-entry, since the youth remains in the federal URM program. That is, if a youth comes into your program from another URM program, you only need to submit a change of status report, and no need to submit initial ORR-3 placement.
  - *Change in placement*: Select when a youth changes placement.
  - *Change in placement cost*: Select when the placement cost for a youth has changed.
  - *Change in immigration/eligibility data*: Select when a youth's immigration or eligibility data has changed.
  - *Change in biological parent's location*: Select when information is received about a biological parent's change in residence.
  - *Absent from program but legal custody retained*: Select when a state, county or program still retains legal custody of a minor under 18 who has run away, has been detained, or in case of other such changes consistent with state child welfare laws, regulations or Title IV-B child and family services plan. Provide an explanation in the box below.
  - *Emancipated from placement services but receiving ORR-funded IL/educational services*: Select when a youth no longer receives placement services but still receives other services

or benefits such as independent living or educational training voucher (ETVs) which are ORR-funded. (Note: Select the emancipation option under *Termination* below if the youth emancipates from placement services and does not receive ORR-funded independent living services or educational benefits.)

- o *Became a parent*: Select when the URM has become a mother or father due to a birth of a child of their own.
- o *Change in identifying data, e.g., age redetermination, name, Alien Registration number (A#, or development of a safety plan)*: Select when youth's identifying information changes, for example: name, date of birth, alien number, or a safety plan for the youth has been developed.

Note 1: **When a change in date of birth is needed**: Please refer to State Letter #01-27. Only submit an ORR-3 for change of date of birth after approval from ORR.

Note 2: **When a change in name is needed**: Submit an ORR-3 and provide an explanation in the box under 'Change of Status' that explains the change of name. Please include both the name previously recorded in ORR documents and the new name. Ensure that if a name change requires other documents be amended such as an I-94, ORR Approval letter, etc, that this amendment needs to be accomplished through the agency that issues the original document so that it can be reissued to reflect the change in youth's identifying data.

Note 3: **When a change in received Alien Registration number (A#) needed**: Submit an ORR-3 and provide an explanation in the box under 'Change of Status' that explains the change. If an A# is changing, as opposed to the youth being issued an A# for the first time, then include both the A# previously recorded in ORR documents and the new A#. Ensure that if a change in A# requires other documents be amended such as an I-94, ORR Approval letter, etc, that this amendment needs to be accomplished through the agency that issues the original document so that it can be reissued to reflect the change in youth's identifying data.

- o *Explain "change of status" if necessary*: Use this section to provide ORR with additional information if the change in status requires further explanation.

3. Termination of ORR-funded Services/Final Report: Select the reason for termination of services and/or benefits and enter date of termination. Please select only one reason for termination.

- o *Reunified with parents*: Indicate whether a URM is:
  - Reunified with parents *in the U.S.* or;
  - Reunified with parents *overseas*
- o *Unified with relatives*: Indicate whether:
  - *A relative is granted legal responsibility* or;
  - *A non-relative is granted legal responsibility.*
- o *Adoption*: Select if a youth becomes legally adopted.
- o *Emancipation*: Refers to when a youth exits the program due to reaching majority according to state law by virtue of age, or marriage, etc., and no longer receives any ORR-funded services. (Note: Select the emancipation option under *Change of Status* above if the youth emancipates from placement services and receives ORR-funded independent living services or educational benefits.)
  - Select *with State/Chafee funded IL/Education Services* only when a youth is exiting all URM-funded services but will receive independent living services or educational benefits funded through the state or county.
- o *Conclusion of ORR-funded IL/Education Services*: Select if a youth has concluded all ORR-funded independent living services or educational benefits.
- o *Voluntary Termination*: Select if a youth leaves the program voluntarily.

- o *Dismissed from Program*: Select if a youth is dismissed from the program for non-compliance of a voluntary agreement or for other reasons which result in the youth's dismissal.
- o *Ran Away*: Select when a youth has run away from the program, is no longer receiving services, and legal custody is not retained.
- o *Departure from the U.S.*: Indicate either *removal* by an authority such as the Department of Homeland Security (DHS) or *voluntary departure*, as appropriate:
  - *Removal*: Youth is repatriated to his or her country of origin by DHS
  - *Voluntary Departure*: Youth departs the U.S. voluntarily to his or her country of origin.
- o *Citizenship*: Select when a URM attains citizenship status while in the program and therefore must end ORR-funded services.
- o *Loss of Eligibility*: Select when a youth loses eligibility due to a change in status or for another reason that would make the youth ineligible to remain in the program.
- o *Immigration Detention*: Select if a youth was detained by an immigration authority and is no longer receiving placement and services under the URM program.
- o *Incarcerated*: Select if a youth was incarcerated and is no longer receiving placement and services under the URM program.
- o *Deceased*: Select if a youth died while in URM care.
- o *Other*: Any other reasons not mentioned above that terminate a child from the program. Please provide an explanation in the box below.

Explain youth's destination or current situation at case closure.

4. Re-entered ORR-funded Services.

This box is selected if a youth previously in care with a URM program left the program and then returned to care voluntarily. The youth's ability to re-enter is dependent on the state's policy under the Title IV-B child and family services plan.

- o Select whether youth is re-entering *URM Placement*, *Independent Living Services*, or both.
  - URM placement can include relative foster care, foster care, therapeutic foster care, group home, semi-independent living, residential treatment center, or other placement.
  - Independent living services refers to ORR-funded independent living/educational services or educational training vouchers provided through a URM program.

## SECTION II: IDENTIFYING/ BASIC DATA

Complete with the requested information:

1. Sex: Self-explanatory
2. Date of Birth (DOB): Include month, day, and year from official document (if available) such as immigration documents (i.e. I-94) or birth certificate.

Note: **When a change in Date of Birth is needed:**

- o Date of Birth can be changed only by ORR's age redetermination process.
  - o For details, refer to State Letter #01-27.
3. Date of Eligibility: Enter the month, day, and year the youth became eligible for services:
    - o Refugee: The date the youth arrived in the United States as found on the I-94 form.

- o Asylee: The date on the letter granting asylum from USCIS or an Immigration Judge’s Order
  - o Cuban/Haitian Entrant: The date the youth arrived in the United States as found on the I-94 form, the date of parole, or the date on the youth’s Notice to Appear.
  - o U Status Recipient: The approval date on the I-797 Notice of Action documenting U Status from USCIS, U-Visa, or other official documentation.
  - o Victims of Trafficking: The date found on the letter of eligibility issued by ORR, or, if issued before the letter of eligibility, the approval date on the I-797 Notice of Action documenting T status, T-Visa, or other official documentation.
  - o Special Immigrant Juvenile Status (SIJS): The date of USCIS approval of the I-360 Petition as documented on the I-797 Notice of Action, or other official documentation.
4. Date of Initial Placement: Enter the month, day and year the youth arrived at the URM program and when services commenced.
5. a) Estimated Date of Emancipation from Placement: Enter the month and year the youth is expected to emancipate from placement services based upon the state’s eligibility policy, factoring in any decision to extend court jurisdiction and placement for the youth.
- b) Estimated Date of Termination from ORR-funded IL/education services: Enter the month and year that the youth’s eligibility for ORR-funded IL/education services will cease based on age, according to the state’s plan for independent living services and education or training vouchers. Refer to ORR State Letter #09-09 to determine youth’s eligibility for *ORR-funded* IL/education services. If youth is eligible for Chafee IL/education service funded through the state or the county and will *not* receive any ORR-funded IL/education services, indicate “not applicable.”
6. a) Country of Origin: Enter the name of the youth’s country of citizenship.
- b) Ethnic group: Enter the youth’s ethnic group, as appropriate.
7. a) Language of Origin: Enter the youth’s native or first language.
- b) Other languages: Enter other languages the youth has acquired.
8. Eligibility Type: Check the appropriate status. Contact ORR with questions regarding documentation.
- o Refugee – Select if youth has an I-94 documenting refugee status.
  - o Asylee – Select if youth has a letter from USCIS or an Immigration Judge’s order granting asylum.
  - o Cuban/Haitian Entrant – Select if youth meets eligibility standards as referenced in ORR State Letter #10-03 and has an I-94, evidence of parole, Notice to Appear or other document establishing eligibility as a Cuban or Haitian entrant.
  - o U Status Recipient – Select if youth has received documentation of U status from USCIS, or a U-Visa.
  - o Victim of Trafficking – Select if youth has Letter of Eligibility issued by ORR, documentation of T status issued by USCIS, or a T-Visa.
  - o Special Immigrant Juvenile Status (SIJS) – Select if youth has documentation of USCIS approval of an I-360 Special Immigrant Juvenile petition.
  - o Other—Select if youth has a different eligibility type than mentioned among above options. Describe youth’s eligibility. .
9. Development of a Safety Plan: Indicate if a safety plan has been developed for the youth. Select Not Applicable, if casework and case oversight determine that no safety plan is needed. ORR supports the development of safety plans for all at-risk youth including, but not limited to victims of trafficking.
10. URM’s children in care: Indicate if the youth is a parent to a child that is with her/him in care and the number of children the youth has while in care, followed by names, birthdates and citizenship/immigration status for each child.

11. Mother of URM: Provide the mother's last, first and middle names.
  - a) Indicate "Yes," "No" or "Unknown" in the blank as to whether or not the mother of the youth is living.
  - b) Provide her last known address at the time the youth arrived in the U.S.
  - c) Provide the current address of mother, if different from above address
12. Father of URM: Provide the father's last, first and middle names.
  - a) Indicate "Yes," "No" or "Unknown" in the blank as to whether or not the father of the youth is living.
  - b) Provide his last known address at the time the youth arrived in the U.S.
  - c) Provide the current address of father, if different from above address

### **SECTION III: IMMIGRATION/ ELIGIBILITY DATA and IMMIGRATION ASSISTANCE**

1. Indicate the youth's immigration/ eligibility data for the URM program.
  - Refugee—Select if youth has an I-94 documenting refugee status
  - Asylee—Select if youth has a letter from USCIS or an Immigration judge's order granting asylum.
  - SIJ (I-360 approval)—Select if youth has documentation of USCIS approval of an I-360 petition.
  - Amerasian—Select if youth is born in Asia, to a U.S. military father and an Asian mother.
  - Victim of Trafficking with No immigration status—Select if youth has Letter of Eligibility by ORR.
  - Victim of Trafficking with T-Visa—Select if youth has Letter of Eligibility and T status or T-Visa, but no other immigration status.
  - Victim of Trafficking with U-Visa—Select if youth has Letter of Eligibility and U status or U-Visa.
  - Legal Permanent Resident—Select if refugee, asylee, Cuban/Haitian Entrant, Trafficking victim, SIJ or U status recipient has adjusted status to permanent residency.
  - U Status Recipient—Select if youth has received documentation of U Status from USCIS, or U-Visa.
  - Cuban/Haitian Entrant (No immigration status)—Select if youth meets eligibility standards as referenced in ORR State Letter #10-03 and has an I-94, parole, Notice to Appear or other document establishing him or her as a Cuban/Haitian Entrant.
  - Parole—Select if youth has a provisional release status.
  - U.S. Citizen—Select if youth became a U.S. Citizen.
  - Ordered Removal—Select if youth is ordered to be repatriated to his/her country of origin
  - Relief under Convention against Torture—Select if youth has Convention against Torture due to fearing torture at the hands of the government in his/her country.
  - Deferred Action—Select when Department of Homeland Security agrees not to place the youth in removal proceedings.
  - Revocation of Trafficking Eligibility Letter—Select if youth's Letter of Eligibility as a victim of severe form of human trafficking has been revoked.
    - o With immigration status—Select if youth has immigration status at the time letter has been revoked.
  - Other—Select if youth has an immigration status not mentioned in the above. Describe youth's immigration status.
2. Indicate if youth is receiving immigration assistance.
  - Select relevant box yes, no, or not applicable.

If the youth is receiving immigration assistance, indicate the source of assistance.

- Pro bono Attorney—Select if youth receives assistance from pro bono attorney
- Pro bono accredited representative—Select if youth receives assistance from pro bono accredited representative.
- Social service agency—Select if youth receives assistance from a social service agency.

- Legal service agency—Select if youth receives assistance from a legal service agency.
- Other—Select if youth receives assistance from not mentioned in the above and explain it.

**Note:** A change in immigration/eligibility data may render a child no longer eligible for the URM program. This may be particularly true for Cuban/Haitian Entrants. Consult ORR with questions. URM's who become U.S. citizens are no longer eligible for the URM program.

## SECTION IV: PLACEMENT DATA

1. **Placement Type:** Check the appropriate box to indicate the type of placement for the youth. Fill in the blanks to describe relationships with relative foster caregivers and “other” placements.
  - Relative Foster Care
  - Foster Care
  - Therapeutic Foster Care
  - Group Home
  - Semi-Independent Living: Select if youth is living semi-independently under a supervised arrangement that is paid for or provided by the State, county or URM provider agency. A youth in semi-independent living is not supervised 24 hours a day by an adult and often is provided with increased responsibilities, such as paying bills, assuming leases, and working with a landlord, while under the supervision of an adult. For purposes of reporting to ORR, a semi-independent living placement is distinguished by the state, county or URM provider agency *itself*: 1) arranging and directly paying for placement as a custodial responsibility or in response to a voluntary agreement with a youth, and 2) ensuring there is a formal arrangement for supervision of the youth, with increasing opportunity for self-care. Placement may occur in a variety of settings, including in an apartment, a family home, a transitional care program or another transitional living arrangement. A semi-independent living placement may also be referred to as a supervised independent living placement.
  - Residential Treatment
  - Inpatient Psychiatric Hospital
  - No placement: Select if the youth does not receive any placement services. This may be selected if a youth is no longer receiving placement services but is still receiving ORR-funded IL or Education services. Enter youth’s residence under Section IV for *Independent Living Residence and Services* below.
  - Other- Please describe if selected.
2. **Placement Cost:** Indicate the average daily rate in dollars related to placement type. Please use the rate of room or board as the placement cost. Do not include administrative costs in the average daily rate at this point in time. The URM provider agency will have this information.
3. **Caregiver Residence:** Indicate the name and address of the caregiver or youth, or if placed with a relative, state the relationship of the relative to the youth and provide the name and address of the relative. Leave this field blank if youth has emancipated from foster care and is no longer receiving placement services; instead, enter youth’s residence under Section IV for *Independent Living Residence and Services* below.
4. **Provider Agency for Placement:** This information will populate from the first page. However, if different from the URM provider agency, indicate the name and address of the provider agency providing placement services to the youth. This may include subcontracted placements for the youth or if the placing agency is different from the URM service provider.

## SECTION V: LEGAL RESPONSIBILITY DATA

1. **Court with jurisdiction:**
  - Provide the name and address of the court that has jurisdiction over the youth
  - Enter the date the initial petition was filed and the date that the court established legal responsibility (custody, guardianship, conservatorship, etc.). If court jurisdiction has ended for this youth, proceed to questions 3 and 4.

2. Agency to whom legal responsibility assigned: Provide the name and address of the agency with legal responsibility for the youth.
3. Has legal responsibility ended? Check the appropriate box to indicate “yes” or “no” and if yes, enter the date legal responsibility ended.
4. Voluntary Placement Agreement: Check the appropriate box to indicate whether the youth signed a voluntary placement agreement; if yes, enter the date the agreement was signed.

## **SECTION VI: INDEPENDENT LIVING RESIDENCE and SERVICES**

1. Youth Residence: Provide the youth’s address, city, state, and zip code. This field only needs to be filled out for youth living independently. Leave this address field blank if the youth is receiving ORR- funded placement services.
2. Independent Living – URM placement has ended; Select “yes” if the youth manages his/her own living arrangement and is no longer receiving placement from the URM program, but continues to receive an ORR-funded independent living service or benefit, including education or training vouchers. This may include youth who are no longer eligible for placement or those who have opted not to receive placement services at some point after reaching the age of majority. For purposes of reporting to ORR, a youth may be considered to be living independently, rather than in a semi-independent living placement, if the *youth*: 1) manages and pays for his or her own living arrangement (perhaps with financial support from the URM program), and 2) receives no *formal* adult supervision. A youth that is living independently may choose to live in a variety of settings, such as in an apartment, with a *former* foster family, with roommates, or in another living arrangement. A youth who is living independently may or may not receive an ORR-funded living allowance or stipend. Youth who are living independently also may only be receiving an ORR-funded education or training voucher, without a stipend specifically for living expenses. Note: If the youth is receiving ORR-funded placement services, do not check this box; the youth’s placement should be captured under section under Section IV for *Placement Data* above.
  - o Enter the amount of stipend per month. Enter the number zero if the youth does not receive a monthly stipend.
3. Independent Living Services: Check the appropriate box(es) to indicate if the youth is receiving Educational Benefits (Ed) or Independent Living (IL) services and select a corresponding funding source. If the funding source is different than ORR, State/Chafee or Private, please select the Other option. If there is more than one funding source, you may also select more than one box. This section should be filled out for any URM who is receiving IL services in parity with their state’s plan for providing IL services, whether or not they are in an ORR-funded placement or are living independently after placement services end.

## **SECTION VII: FORM SUBMISSION AUTHORITY**

This section will populate from the first page. However, please fill in all missing information i.e. phone number and email address of the person(s) preparing and submitting the report.

1. Unaccompanied Refugee Minor (URM) Provider Agency: Provide the name and address of the URM provider agency; and the name, title, phone number and email address of the person preparing the report and *the date of the report was prepared*.
2. State Agency: Provide the name and address of the state agency; and the name, title, phone number and email address of the state official submitting the report, and *the date the report was submitted to ORR*.

## **DISTRIBUTION of REPORT:**

The appropriate state agency representative should send the ORR-3 form to the Office of Refugee Resettlement via the ACF electronic URM mailbox: **URMProgram@acf.hhs.gov**.



The appropriate state agency representative may choose to send the ORR-3 form to the National Voluntary Agency.

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Public reporting burden for this collection of information is estimated to average one-quarter hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.