## **TABLE OF CHANGES – FORM**

# FORM I-821D, Consideration of Deferred Action for Childhood Arrivals OMB Number: 1615-0124 03/27/2014

| Current Section and<br>Page Number       | Current Text  | Proposed Text   |
|--|---|---|
| Page 1, START HERE                       | Type or print in black ink. Read the instructions for information on how to complete the form.  | Type or print in black ink. Read Form I-821D Instructions for information on how to complete the form.  |
| Page 1, Part 1. Information<br>About You |   | I am not in immigration detention <i>and</i> I have included Form I-765, Application for Employment Authorization, and Form I-765WS, Form I-765 Worksheet; and I am requesting:   |
|  |   | Consideration of Deferred Action for Childhood Arrivals – Initial Request   |
|  |   | OR  |
|  |   | <b>2.</b> Consideration of of Deferred Action for Childhood Arrivals – <b>Renewal Request</b>   |
|  |   | AND   |
|  |   | For this renewal request, my most recent period of Deferred Action for Childhood Arrivals expires on (mm/dd/yyyy  |
|  | I am not in immigration detention <i>and</i> I am requesting consideration of deferred action for childhood arrivals <i>and</i> I have included Form I-765, Application for Employment Authorization, and Form I-765WS, Form I-765 Worksheet.                         | [Deleted]   |
|  | <ul><li>Full Name</li><li>1.a. Family Name (Last Name)</li><li>1.b. Given Name (First Name)</li><li>1.c. Middle Name</li></ul>  | Full Legal Name 3.a. Family Name (Last Name) 3.b. Given Name (First Name) 3.c. Middle Name  |
|  | <ul> <li>U.S. Mailing Address (Enter the same address on Form I-765)</li> <li>2.a. In Care Of Name (if applicable)</li> <li>2.b. Street Number and Name</li> <li>2.c. Apt. Ste. Flr.</li> <li>2.d. City or Town</li> <li>2.e. State</li> <li>2.f. Zip Code</li> </ul> | <ul> <li>U.S. Mailing Address (Enter the same address on Form I-765)</li> <li>4.a. In Care Of Name (if applicable)</li> <li>4.b. Street Number and Name</li> <li>4.c. Apt. Ste. Flr.</li> <li>4.d. City or Town</li> <li>4.e. State</li> <li>4.f. ZIP Code</li> </ul> |

#### **Removal Proceedings Information Removal Proceedings Information 5.** Are you **NOW** or have you **EVER** been in **3.a.** Are you **now or have you ever been** in removal proceedings (which includes exclusion removal proceedings, or do you have a removal or deportation proceedings initiated before order issued in any other context (for example, April 1, 1997, an INA section 240 removal at the border or within the United States by an proceeding, expedited removal, reinstatement of *immigration agent)?* removal, an INA section 217 removal after admission under the Visa Waiver Program, or **NOTE:** The term "removal proceedings" removal as a criminal alien under INA section includes exclusion or deportation proceedings initiated before April 1, 1997; an Immigration 238), or do you have a removal order issued in any other context (for example, at the border or and Nationality Act (INA) section 240 removal proceeding; expedited removal; reinstatement of within the United States by an immigration agent)? a final order of exclusion, deportation, or removal; an INA section 217 removal after admission under the Visa Waiver Program; or removal as a criminal alien under INA section 238. If you answered "Yes" to the above question, If you answered "Yes" to **Item Number 5.**, you you must check a box below indicating your must select a box below indicating your current current status or outcome of your removal status or outcome of your removal proceedings. proceedings. **3.b.** Status or outcome: Status or outcome: **1.** Currently in Proceedings (Active) **5.a.** Currently in Proceedings (*Active*) 2. Currently in Proceedings (Administratively **5.b.** Currently in Proceedings (*Administratively* Closed) Closed) **3.** Terminated **5.c.** Terminated **4.** Subject to a Final Order **5.d.** Subject to a Final Order **5.e.** Other. Explain in **Part 8. Additional** Information. **3.c.** Most Recent Date of Proceedings **5.f.** Most Recent Date of Proceedings (mm/dd/yyyy) (mm/dd/yyyy) **3.d.** Location of Proceedings **5.g.** Location of Proceedings Page 2, Part 1. Information [Page 2] **About You Other Information** 4. Alien Registration Number (A-Number)(if **6.** Alien Registration Number (A-Number) (if **5.** U.S. Social Security Number (*if any*) **7.** U.S. Social Security Number (*if any*) **8.** Date of Birth **6.** Date of Birth **9.** Gender Male/Female 7. Gender Male/Female 10.a. City/Town/Village of Birth 8.a. City/Town/Village of Birth 10.b. Country of Birth **8.b.** Country of Birth **11.** Current Country of Residence **9.** Current Country of Residence **12.** Country of Citizenship or Nationality **10.** Country of Citizenship/Nationality **13.** Marital Status 11. Marital Status Other Names Used (Including maiden name) Other Names Used (including maiden name) If you require additional space, use Part 8. **Additional** Information. If you require additional space, use **Part 7.,** Additional Information. **14.a.** Family Name (*Last Name*) **12.a.** Family Name (*Last Name*) **14.b.** Given Name (*First Name*)

**14.c.** Middle Name

**12.b.** Given Name (*First Name*)

**12.c.** Middle Name

|                                   |  | 15. Ethnicity (Select only one box) Hispanic or Latino Not Hispanic or Latino  16. Race (Select all applicable boxes) White Asian Black or African American American Indian or Alaska Native Native Hawaiian or Other Pacific Islander  17. Height Feet Inches  18. Weight Pounds  19. Eye Color (Select only one box.) Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other  20. Hair Color (Select only one box.) Bald (No hair) Black Blond Brown Gray Red Sandy White Unknown/Other |
|-----------------------------------|--|--|
| Page 3, Part 2. Arrival/Residence | Part 2. Arival/Residene Information  | Part 2. Residence and Travel Information<br>(For Initial and Renewal Requests)   |
| Information                       | <b>1.a.</b> I initially arrived and established residence in the U.S. prior to the age of 16.  | [Deleted]  |
|                                   | <b>1.b.</b> I have been continuously residing in the U.S. since at least June 15, 2007 up to the present time.   | <b>1.</b> I have been continuously residing in the U.S. since at least June 15, 2007, up to the present time.  |
|                                   | <b>Note:</b> If you departed the United States for some period of time before your 16th birthday and returned to the United States on or after your 16th birthday to begin your current period of continuous residence, submit evidence that you established residence in the United States prior to age 16 as set forth in the instructions to this form. | NOTE: If you departed the United States for some period of time before your 16th birthday and returned to the United States on or after your 16th birthday to begin your current period of continuous residence, and if this is an initial request, submit evidence that you established residence in the United States prior to 16 years of age as set forth in the instructions to this form.  |
|                                   | 3  |  |

|  |   | <b>1.a.</b> I initially arrived and established residence in the U.S. prior to 16 years of age.  |
|--|---|--|
| Page 2, Part 1. Information<br>About You [continued] | U.S. Entry and Status Information   | Part 3. For Initial Requests Only  |
|  |   | <b>10.</b> Border Crossing Card Number ( <i>if any</i> )   |
|  |   | <ul><li>9.b. Passport Number</li><li>9.c. Passport Expiration Date (mm/dd/yyyy)</li></ul>  |
|  |   | 9.a. What country issued your last passport?   |
|  |   | <b>8</b> . Have you left the United States without advance parole since August 15, 2012?   |
|  | <ul><li>7.a. Departure Date 2 (<i>mm/dd/yyyy</i>)</li><li>7.b. Return Date 2 (<i>mm/dd/yyyy</i>)</li><li>7.c. Reason for Departure</li></ul>  | <ul><li>7.a. Departure Date (mm/dd/yyyy)</li><li>7.b. Return Date (mm/dd/yyyy)</li><li>7.c. Reason for Departure</li></ul>   |
|  | To December 27 (117)  | Departure 2  |
|  | <ul><li>6.a. Departure Date 1 (<i>mm/dd/yyyy</i>)</li><li>6.b. Return Date 1 (<i>mm/dd/yyyy</i>)</li><li>6.c. Reason for Departure</li></ul>  | 6.a. Departure Date (mm/dd/yyyy) 6.b. Return Date (mm/dd/yyyy) 6.c. Reason for Departure   |
|  |   | Additional Information.  Departure 1   |
|  |   | was approved.  If you require additional space, use Part 8.  |
|  |   | <b>For Renewal Requests:</b> List only your absences from the United States since you submitted your last Form I-821D that   |
|  | since June 15, 2007. If you require additional space, use <b>Part 7., Additional Information.</b>   | from the United States since June 15, 2007.  |
|  | List all of your absences from the United States  | Travel Information  For Initial Requests: List all of your absences  |
|  | <b>5.f.</b> Zip Code  | <b>5.f.</b> ZIP Code   |
|  | 2.f. Zip Code 3.f. Zip Code 4.f. Zip Code   | 2.f. ZIP Code 3.f. ZIP Code 4.f. ZIP Code  |
|  | Present Address   | Present Address  |
|  |   | [Page 3]   |
|  |   | If you require additional space, use <b>Part 8</b> . <b>Additional Information</b>   |
|  |   | <b>For Renewal Requests:</b> List only the addresses where you resided since you submitted your last Form I-821D that was approved.  |
|  | 7. Additional Information   | present.   |
|  | List your current address and, to the best of your knowledge, the addresses where you resided since your initial entry into the United States. If you require additional space, use <b>Part</b> | For Initial Requests: List your current address and, to the best of your knowledge, the addresses where you resided since the date of your initial entry into the United States to |

- **13.** Date of *Initial* Entry into the United States, on or about (*mm/dd/yyyy*)
- **14.** Place of Entry into the United States
- **15.** Status on June 15, 2012 (*e.g.*, *No Lawful Status*, *Status Expired*, *Parole Expired*)
- **16.a.** Do you have an Arrival/Departure Record (I-94)
- **16.b.** If you answered "Yes", provide your I-94 number (*if applicable*)
- **17.** Date authorized stay expired, as shown on Form I-94, I-95, or I-94W (*if applicable*)

#### **Education Information**

- **18.** Education Status (e.g. High School Graduate, Recipient of GED, or Currently in School)
- **19.** Name...
- **20.** Date of Graduation (e.g., Receipt of a Certificate of Completion, GED Certificate, or other equivalent State-authorized exam) or, if Currently in School, Date of Last Attendance (*mm/dd/yyyy*)

#### **Military Service Information**

**21.a.** Were you a member of the U.S. Armed Forces or Coast Guard?

If you answered "Yes" to the above question, you must provide responses to Item Numbers 21.b. through 21.e.

- 21.b. Military Branch
- **21.c.** Service Start Date (*mm/dd/yyyy*)
- **21.d.** Discharge Date (*mm/dd/yyyy*)
- **21.e.** Type of Discharge

- **2.** Date of *Initial* Entry into the United States, on or about (*mm/dd/yyyy*)
- 3. Place of *Initial* Entry into the United States

#### [Page 4]

- 4. Immigration Status on June 15, 2012 (e.g., No Lawful Status, Status Expired, Parole Expired)
- **5.a.** Were you **EVER** issued an Arrival/Departure Record (I-94)
- **5.b.** If you answered "Yes", provide your I-94 number (*if available*)
- 5.c. If you answered "Yes" to **Item Number 5.a.**, provide the date your authorized stay expired, as shown on Form I-94, I-94W, or I-95 (*if available*).

#### **Education Information**

- 6. Indicate how you meet the education guideline (e.g., Graduated from high school, Received a general educational development (GED) certificate or equivalent state-authorized exam, Currently in school)
- **7.** Name...
- **8.** Date of Graduation (*e.g.*, *Receipt of a Certificate of Completion*, *GED certificate*, *other equivalent state authorized exam*) or, if currently in school, Date of Last Attendance (*mm/dd/yyyy*)

#### **Military Service Information**

**9.** Were you a member of the U.S. Armed Forces or U.S. Coast Guard?

If you answered "Yes" to **Item Number 9.**, you must provide responses to **Item Numbers 9.a. - 9.d.** 

- **9.a.** Military Branch
- **9.b.** Service Start Date (*mm/dd/yyyy*)
- **9.c.** Discharge Date (*mm/dd/yyyy*)
- **9.d.** Type of Discharge

### Page 4, Part 3. Criminal, National Security and Public Safety Information

#### [Page 4]

Part 4. Criminal, National Security, and

|  |  | Public Safety Information (For Initial and Renewal Requests)   |
|--|--|--|
|  | If any of the following questions apply to you, use <b>Part 7., Additional Information</b> , to describe the circumstances and include a full explanation.   | If any of the following questions apply to you, use <b>Part 8</b> . <b>Additional Information</b> , to describe the circumstances and include a full explanation.  |
|  | <b>1.</b> Have you ever been arrested for, charged with, or convicted of a felony or misdemeanor in the United States? <i>Do not include minor traffic violations unless they were alcohol- or drug-related. Do include incidents handled in juvenile court</i>                                      | <b>1.</b> Have you <b>EVER</b> been arrested for, charged with, or convicted of a felony or misdemeanor, <i>including incidents handled in juvenile court</i> , in the United States? <i>Do not include minor traffic violations unless they were alcohol- or drug-related</i>   |
|  | 2. Have you ever been  | 2. Have you <b>EVER</b> been   |
|  | <b>3.</b> Have you ever engaged  | 3. Have you <b>EVER</b> engaged  |
|  | <b>4.</b> Are you now or have ever been a member of a gang?  | <b>4.</b> Are you <b>NOW</b> or have <b>EVER</b> been a member of a gang?  |
|  | Have you ever engaged in, ordered, incited, assisted or otherwise participated in any of the following   | <b>5.</b> Have you <b>EVER</b> engaged in, ordered, incited, assisted, or otherwise participated in any of the following   |
|  |  | <b>6.</b> Have you EVER recruited, enlisted, conscripted, or used any person to serve in or help an armed force or group while such person was under age 15?   |
|  |  | <b>7.</b> Have you EVER used any person under age 15 to take part in hostilities, or to help or provide services to people in combat?  |
| Page 4, Part 4. Signature of Requestor |  | [Page 5]   |
| Requestor                              |  | Part 5. Statement, Certification, Signature, and Contact Information of the Requestor (For Initial and Renewal Requests)   |
|  | Requestor's Statement (check one)  | <b>NOTE:</b> Select the box for either <b>Item Number 1.a.</b> or <b>1.b.</b>  |
|  | 1.a  | 1.a  |
|  | <b>1.b.</b> Each and every question and instruction on this form, as well as my answer to each question, has been read to me by the person named below in a language in which I am fluent. I understand each and every question and instruction on this form, as well as my answer to each question. | <b>1.b.</b> The interpreter named in <b>Part 6.</b> has read to me each and every question and instruction on this form, as well as my answer to each question, in [Fillable Field], a language in which I am fluent. I understand each and every question and instruction on this form as translated to me by my interpreter, and have provided true and correct responses in the language indicated above. |
|  | Requestor's Certification I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Copies of documents submitted are exact photocopies of   | Requestor's Certification I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct and that copies of documents submitted are exact photocopies of   |

|                              | unaltered original documents, and I understand that I may be required to submit original   | unaltered original documents. I understand that I may be required to submit original documents   |
|------------------------------|--|--|
|                              | documents to USCIS at a later date. Furthermore, I authorize the release of any information from my records that USCIS needs to reach a determination on deferred action.  | to U.S. Citizenship and Immigration Services (USCIS) at a later date. I also understand that knowingly and willfully providing materially false information on this form is a federal felony punishable by a fine, imprisonment up to 5 years, or both, under 18 U.S.C. section 1001. Furthermore, I authorize the release of any information from my records that USCIS may need to reach a determination on my derferred action request. |
|                              | <ul><li>2.a. Signature of Requestor</li><li>2.b. Date of Signature (<i>mm/dd/yyyy</i>)</li></ul>   | <ul><li>2.a. Requestor's Signature</li><li>2.b. Date of Signature (<i>mm/dd/yyyy</i>)</li></ul>  |
|                              | 3. Daytime Phone Number  | Requestor's Contact Information 3 Requestor's Daytime Telephone Number 4. Requestor's Mobile Telephone Number 5. Requestor's Email Address   |
|                              | <b>NOTE:</b> Deferred action is unlikely to be considered for anyone who fails to completely fill out this form or to submit required documents listed in the instructions. Deferred action does not confer lawful status upon an individual. Furthermore, a decision on deferred action is wholly within the discretion of DHS. | [Deleted]  |
|                              | <b>4.</b> Did someone help you prepare this form or a portion of it? (You must answer Yes or No.)  |  |
|                              | If yes, complete Part 5., Signature of Person Preparing This Request, If Other Than the Requestor.   |  |
| Page 5, Part 6. Signature of |  | [Page 5]   |
| Interpreter                  |  | Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests)  |
|                              | Interpreter's Information  | Interpreter's Full Name Provide the following information concerning the interpreter:  |
|                              | <ul><li>3.a. Interpreter's Family Name (<i>Last Name</i>)</li><li>3.b. Interpreter's Given Name (<i>First Name</i>)</li></ul>  | <ul><li>1.a. Interpreter's Family Name (<i>Last Name</i>)</li><li>1.b. Interpreter's Given Name (<i>First Name</i>)</li><li>2. Interpreter's Business or Organization Name (<i>if any</i>)</li></ul>   |
|                              |  | Interpreter's Mailing Address 3.a. Street Number and Name 3.b. Apt. Ste. Flr. 3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country   |

|  | 1. Language Used  I certify that I am fluent in English and the language above.  I further certify that I have read each and every question and instruction on this form, as well as the answer to each question, to this requestor in the above mentioned language, and that the | Interpreter's Contact Information 4. Interpreter's Daytime Telephone Number 5. Interpreter's Email Address  [Page 6]  Interpreter's Certification I certify that:  I am fluent in English and [Fillable Field] which is the same language provided in Part 5., Item Number 1.b.;  I have read to this requestor each and every question and instruction on this form, as well as the answer to each question, in the language provided in Part 5,. Item Number 1.b.; and |
|--|---|--|
|  | requestor has informed me that he or she has understood each and every instruction and question of the form, as well as the answer to each question.  | The requestor has informed me that he or she understands each and every instruction and question on the form, as well as the answer to each question.  |
|  | <ul><li>2.a. Signature of Interpreter</li><li>2.b. Date of Signature (<i>mm/dd/yyyy</i>)</li></ul>  | <b>6.a.</b> Interpreter's Signature <b>6.b.</b> Date of Signature ( <i>mm/dd/yyyy</i> )  |
| Page 5, Part 5. Signature and Contact Information of Person Preparing This Form, If Other Than the Requestor |   | [Page 6]  Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests)   |
|  | Preparer's Full Name  | Preparer's Full Name   |
|  | Preparer's Mailing Address  | Preparer's Mailing Address 3.f. Province 3.g. Postal Code 3.h. Country   |
|  | <ul><li><i>Preparer's Contact Information</i></li><li>4. Daytime Phone Number</li><li>5. Email Address</li></ul>  | <ul> <li>Preparer's Contact Information</li> <li>4. Preparer's Daytime Telephone Number</li> <li>5. Preparer's Fax Number</li> <li>6. Preparer's Email Address</li> </ul>  |
|  | Preparer's Declaration  To be completed by all preparers, including attorneys and authorized representatives.   | Preparer's Declaration   |
|  | I declare that I prepared this Form I-821D at the requestor's behest, and it is based on all the information of which I have knowledge.   | I declare that I prepared this Form I-821D at the requestor's behest, and it is based on all the information of which I have knowledge.  |
|  | <b>6.a.</b> Signature of Preparer <b>6.b.</b> Date of Signature ( <i>mm/dd/yyyy</i> )   | <ul><li>7a. Preparer's Signature</li><li>7.b. Date of Signature (<i>mm/dd/yyyy</i>)</li></ul>  |
|  |   | <b>NOTE:</b> If you need extra space to complete any item within this request, see the next page for <b>Part 8. Additional Information.</b>  |

| D 0 D 1 T A 1 1 1 1                    |   |   |
|--|---|---|
| Page 6, Part 7. Additional Information |   | [Page 7]  |
|  | Part 7. Additional Information  | Part 8. Additional Information (For Initial and Renewal Requests)   |
|  | If you require more space to provide any additional information within this request, please use the space below. If you require more space than what is provided to complete this request, you may use a separate sheet(s) of paper. You must include your full name on each sheet of paper along with the page number, Part Number, and Item Number related to your explanation. | If you need extra space to complete any item within this request, use the space below. You may also make copies of this page to complete and file with this request. Include your name and A-Number ( <i>if any</i> ) at the top of each sheet of paper; indicate the <b>Page Number</b> , <b>Part Number</b> , and <b>Item Number</b> to which your answer refers; and sign and date each sheet. |
|  | <ul><li>1.a. Family Name (<i>Last Name</i>)</li><li>1.b. Given Name (<i>First Name</i>)</li><li>1.c. Middle Name</li></ul>  | <ul><li>1.a. Family Name (<i>Last Name</i>)</li><li>1.b. Given Name (<i>First Name</i>)</li><li>1.c. Middle Name</li></ul>  |
|  | <ul> <li>2.a. Page Number</li> <li>2.b. Part Number</li> <li>2.c. Item Number</li> <li>2.d. [Narrative space]</li> <li>3.a3.d</li> <li>4.a 4.d</li> </ul>   | <ol> <li>A-Number (<i>if any</i>)</li> <li>a. Page Number</li> <li>b. Part Number</li> <li>c. Item Number</li> <li>d. [Narrative space]</li> <li>a4.d</li> <li>a 5.d</li> <li>b. Date of Signature (<i>mm/dd/yyyy</i>)</li> </ol>   |