**TABLE OF DIFFERENCES**

**FORM I-821, Application for Temporary Protected Status**

**OMB Number 1615-0043**

**09/04/2013**

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| **LOCATION** | **LANGUAGE ON FORM** | **LANGUAGE ON SCREEN** |
| **Page 1, Part 1, Type of Application (***check one*) | 1.a. This is my initial *(first time)* application for Temporary Protected Status (TPS). I was not previously granted TPS.  1.b. This is my re-registration application for TPS. I was previously granted TPS.  **Are you also filing a request for employment authorization?**  2.a. Yes. I am requesting an Employment Authorization Document (EAD) and I am filing Form I-765, Request for Employment Authorization, together with my Form I-821.  2.b. No. I am not currently requesting employment authorization, but I am filing Form I-765 together with my Form I-821 for administrative purposes. | 1.a. This is my initial application for Temporary Protected Status (TPS). I was not previously granted TPS.  1.b. This is my re-registration application for TPS. I was previously granted TPS.  **Are you also filing a request for employment authorization?**  ⁪ Yes. I am requesting an Employment Authorization Document (EAD) and I am filing an Application for Employment Authorization (I-765) together with my Application for TPS (I-821).  ⁪ No. I am not currently requesting employment authorization, but I am filing an Application for Employment Authorization (I-765) *(as required for administrative purposes)* together with my Application for TPS (I-821). |
| **Page 1, Part 2. Information About You** | **1.a.** Family Name *(Last Name)*  **1.b.** Given Name *(First Name)*  **1.c.** Middle Name  ***Mailing Address***  **2.a.** In Care of Name  **2.b.** Street Number and Name  **2.c.** Apt. Ste. Flr.  **2.d.** City or Town  **2.e.** State  **2.f.** ZIP Code  **2.g.** Is your **mailing address** the same as your **current physical address**?  If you answered “No” to **Item Number 2.g.**, please provide your **current physical** address below. If “Yes”, please go to **Item Number 4.** in the “**Other Section**” below.  ***Physical 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 (if any)  **3.g.** Postal Code (if any)  **3.h.** Country (if any)  ***Other Information***  **4.** Alien registration Number (A-Number) (*if any*)  **5.** USCIS ELIS Account Number *(if any)*  **6.** U.S. Social Security Number *(if any)…*  **7.** Date of Birth *(mm/dd/yyyy)*  **8.** Gender  Male/Female  …………  **13.** Marital Status  Married/Widowed/Single/Divorced  …………  Other Names Used *(if any, including maiden name)*  **14.a.** Family Name *(Last Name)*  **14.b.** Given Name *(First Name)*  **14.c.** Middle Name  Other Dates of Birth Used *(if any)*  **15.a.** Date of Birth *(mm/dd/yyyy)*  **15.b.** Date of Birth *(mm/dd/yyyy)*  **16.** Ethnicity *(Select one)*  Hispanic or Latino  Not Hispanic or Latino  **17.** Race *(Select all applicable)*  American Indian or Alaska Native  Asian  Black or African American  Native Hawaiian or Other Pacific Islander  White  **18.** Height  Feet  Inches  **19.** Weight (in pounds)  Pounds [text box]  **20.** Eye Color (Select only one box.)  Blue  Brown  Black  Green  Gray  Hazel  Maroon  Pink  Unknown/Other  **21.** Hair Color (Select only one box.)  Bald  Black  Blonde  Brown  Gray  Red  Sandy  White  Unknown/Other  ***U.S. Entry Information***  **22.** Date of last entry into the United States (*mm/dd/yyyy*)  **23.** Immigration status when you last entered the United States *(e.g. visitor, student, entered without inspection (EWI))*  Place of last entry into the United States  **24.a.** U.S. Port of Entry  **24.b.** City or Town  **24.c.** State  **25.a.** Arrival-Departure Record (I-94)? (*if any*)  **25.b.** Date authorized period of stay in the United States expired or will expire (as shown on Form I-94 or I-95)  *(mmldd/yyyy)*  **25.c.** Passport Number  **25.d.** Travel Document Number  **25.e. C**ountry of issuance for Passport or Travel Document  **25.f.** Please enter the date your passport or travel document expires. (*mm/dd/yyyy*)  **Your Current Immigration Status**  **26.** Current immigration status *(e.g., visitor, student, visa overstay, EWI)*  **27.** Are you now or have you ever been in immigration proceedings?  Yes/No  If you answered “Yes” to **Item Number 27.**, provide the following information.  Type of Proceedings: (Check one box only)  **28.a.** Exclusion  **28.b.** Removal/Deportation  **28.c.** Rescission  **28.d.** I am no longer in immigration proceedings, but I was in Federal court proceedings regarding immigration issues  **29.** Location where your proceedings were held *(or are currently being held)*  **30.** Date(s) for your proceedings: *(if your proceedings are ongoing, leave end date blank).* *From (mm/dd/yyyy)*  *To (mm/dd/yyyy)* | Family Name *(Last Name)*  Given Name *(First Name)*  [checkbox] I do not have a Given Name *(First Name)*  Middle Name  [checkbox] I do not have a Middle Name  Have you ever used any other names?  Yes/No  [If the applicant responds “Yes,” then the following will display:]  Other Name(s) Used *(List all other names you have ever used, including maiden names, aliases, and nicknames.)*  Family Name *(Last Name)*  Given Name *(First Name)*  Middle Name  [names provided will populate in a table, with the option to provide another name after each addition]  ***Mailing Address***  In Care of Name  Street Number and Name  Apt. Ste. Flr.  City or Town  State  ZIP Code  Is your **mailing address** the same as your **current physical address**?  Yes/No  [If the applicant selects “No,” the Physical Address collection will be displayed.]  ***Physical Address***  Street Number and Name  Apt. Ste. Flr.  City or Town  State  ZIP Code  Province (if any)  Postal Code (if any)  Country (if any)  ***Other Information***  Provide your Alien registration Number (A-Number) (*if any*)  Provide your USCIS ELIS Account Number *(if any)*  Provide your U.S. Social Security Number *(if any)…*  Date of Birth [date picker]  Have you ever used any other date(s) of birth?  Yes/No  [If the applicant responds “Yes,” then the following will display:]  Provide any other date(s) of birth you have used.  [dates provided will populate in a table, with the option to provide another date after each addition]  *[Gender question is asked with other biometrics information in the electronic collection]*  …………  *[Marital status is collected later in the electronic collection]*  …………  *[Other Names Used information is collected earlier, after the applicant’s full name information]*  Gender  Male/Female  What is your ethnicity? *(Select one)*  Hispanic or Latino  Not Hispanic or Latino  What is your race? *(Select all applicable)*  American Indian or Alaska Native  Asian  Black or African American  Native Hawaiian or Other Pacific Islander  White  What is your height?  Feet  Inches  What is your weight?  [text box] Pounds  What is your eye color *(Select only one)*  [drop down with all values to select from]  What is your hair color? *(Select only one)*  [drop down with all values to select from]  ***U.S. Entry Information***  When did you last enter into the United States? (*mm/dd/yyyy*)  What was your immigration status when you last entered the United States? *(e.g. visitor, student, entered without inspection (EWI))*  Where did you last enter into the United States?  U.S. Port of Entry  City or Town  State  What is your Arrival-Departure Record Number (I-94) *(if any)?*  Has your authorized period of stay in the United States expired (as shown on Form I-94 or I-95)?  Yes/No  [If applicant answers “Yes,” the following will display:]  Please enter the date your authorized period of stay expired.  [If applicant answers “No,” the following will display:]  Please enter the date your authorized period of stay will expire.  Do you have a passport or travel document?  Yes/No  [If applicant answers “Yes,” the following will display:]  Provide your Passport Number  OR  Provide your Travel Document Number  Provide the name of the country that issued your Passport or Travel Document  Provide the date your passport or travel document expires. (*mm/dd/yyyy*)  **Your Current Immigration Status**  What is your current immigration status? *(visitor, student, visa overstay, EWI)*  Are you now or have you ever been in immigration proceedings?  Yes/No  [If applicant answers “Yes,” the following will display:]  Type of Proceedings *(Select only one)*:  Exclusion  Removal/Deportation  Rescission  I am no longer in immigration proceedings, but I was in Federal court proceedings regarding immigration issues.  Please provide the location where your proceedings were held *(or are currently being held).*  Please provide the dates for your proceedings *(if your proceedings are ongoing, leave the end date blank):*  *From [date picker]*  *To [date picker]* |
| **Page 2, Part 3. Information About Your Spouse and Children** *(if any)* | **[Page 3-4]**  **Provide the following information about your spouse** *(if married).*  **1.** USCIS ELIS Account Number *(if any)*  **2.** Alien Registration Number (A-Number) *(if any)*  {**3.a.-3.c.** Name information}  **Mailing Address of Spouse**  4.a. Street Number and Name  4.b. Apt., Ste., Flr.  4.c. City or Town  4.d. State  4.e. ZIP Code  4.f. Province*(if any)*  4.g. Postal Code*(if any)*  4.h. Country *(if any)*  **Other Information About Spouse**  5. Your Spouse’s Date of Birth *(mm/dd/yyyy)*  6. Date of Present Marriage *(mm/dd/yyyy)*  7. Place of Present Marriage *(mm/dd/yyyy)*  *Children (if any)*  Provide the following information about each of your children *(if any):*  Child 1  8.a. USCIS ELIS Account Number  8.b. Alien Registration Number (A-Number)  {8.c.-8.e. Name information}  8.f. Date of Birth  8.g. Street Number and Name  8.h. Apt, Ste, Flr  8.i. City or Town  8.j. State  8.k. ZIP Code  8.l. Province*(if any)*  8.m. Postal Code*(if any)*  8.n. Country *(if any)*  [Repeat data elements for up to Child 6] | What is your marital status?  Married/Widowed/Single/Divorced  [If the applicant answers “Married,” the following will display:]  Provide the following information about your spouse.  Family Name *(Last Name)*  Given Name *(First Name)*  [checkbox] No Given Name *(First Name)*  Middle Name  [checkbox] No Middle Name  Does your spouse have a USCIS ELIS Account Number?  Yes/No  [If the applicant answers “Yes,” the following will display:] Provide your spouse's USCIS ELIS Account Number:  Does your spouse have an Alien Registration Number (A-Number)?  Yes/No  [If the applicant answers “Yes,” the following will display:] Provide your spouse's Alien Registration Number (A-Number):  Is your spouse's mailing address the same as your mailing address?  Yes/No  [If the applicant answers “No,” the following will display:]  **Mailing Address of Spouse**  Street Number and Name  Apt., Ste., Flr.  City or Town  Country  State/ZIP Code  Province/Postal Code  **Other Information About Your Spouse**  What is your spouse's date of birth? [date picker]  Provide the date of your present marriage. [ date picker]  Provide the place of your present marriage. [date picker]  Do you have any children?  Yes/No  [If the applicant answers “Yes,” the following will display:]  Provide the following information about your children.  Family Name *(Last Name)*  Given Name *(First Name)*  [checkbox] No Given Name *(First Name)*  Middle Name  [checkbox] No Middle Name  What is this child’s date of birth? [date picker]  Does this child have a USCIS ELIS Account Number?  Yes/No  [If the applicant answers “Yes,” the following will display:] Provide this child’s USCIS ELIS Account Number:  Does this child have an Alien Registration Number (A-Number)?  Yes/No  [If the applicant answers “Yes,” the following will display:] Provide this child’s Alien Registration Number (A-Number):  Is this child’s address the same as your physical address?  Yes/No  [If the applicant answers “No,” the following will display:]  **Address of Child**  Street Number and Name  Apt., Ste., Flr.  City or Town  Country  State/ZIP Code  Province/Postal Code  [information provided about each child will populate in a table, with the option to provide another set of information after each addition] |
| **Page 2-5, Part 4**  **Eligibility Standards** | **Provide the following information:**  1.a. I am a national of *(or an alien having no nationality, who last habitually resided in* *the country of):*  1.b. I entered the United States on the following date, and have resided in the United States since that time. *(mm/dd/yyyy)*  1.c. Have you **EVER** resided in any country(s) other than the one you listed in **Item Number l.a.?**  Yes/No  If you answered "Yes" to **Item Number l.c.,** provide the information requested below. If you resided in more than one country prior to entering the United States, please provide the information below on the last country you resided in. For any additional countries, attach a separate sheet(s) of paper. Write your full name and A-Number *(if any),* at the top of each sheet; indicate the **Item Number** to which your answer refers, *(e.g.,* ***l.d,*** *l.e., l.f);* and date and sign each sheet.  1.d. Name of any other country in which you have resided.  1.e. Dates that you resided in the other country.  *(mm/dd/yyyy)*  *(mm/dd/yyyy)*  1.f. Your immigration status in the other country *(e.g., citizen, permanent resident, refugee, asylee, visitor, temporary resident)*  **To be eligible for TPS, you must be admissible as an immigrant to the United States, with certain exceptions.**  If any of the questions beginning below on this page and continuing through the end of Part 4.apply to you, describe the circumstances and include a full explanation on a separate sheet(s) of paper. Write your full name and A-Number *(if any),* at the top of each sheet; indicate the **Item Number** to which your answer refers, *(e.g.,*  *2.a., 2.****b.,*** *etc.);* and date and sign each sheet.  If you were EVER arrested, provide the disposition *(outcome)* for all arrests. *(For example, “case dismissed” from the appropriate authority.)* For information about waivers concerning the grounds of inadmissibility, see the NOTE at the end of Part 4.  …………  **NOTE ABOUT WAIVERS:** A TPS applicant must be admissible under the applicable grounds in section 212 of the Immigration and Nationality Act (INA). A discretionary waiver may be granted for some, but not all, of the applicable inadmissibility grounds based on humanitarian, family unity or public interest reasons.  If you answered "Yes" to certain **Item Numbers in Part 4.,** you may be eligible for a waiver of some of the grounds of inadmissibility. Please see the **General Requirements** section of Form I-821 Instructions for further information.  The Form I-601, Application for Waiver of Grounds of Inadmissibility, is the application used to request a waiver. *Please be sure to read the special instructions related to TPS applicants on Form I-601.* The form is available at local USCIS offices, on our Web site at [www.uscis.gov /i-601](http://www.uscis.gov/i-601) or by calling the USCIS toll-free forms line at **1-800-870-3676.** For TDD (deaf or hard of hearing) call: **1-800-767-1833.** | Provide the following information:  I am a national of *(or an alien having no nationality, who last habitually resided in the country of):*  I entered the United States on the following date, and have resided in the United States since that time. [date picker]  Have you ever resided in any country(ies) other than the one you listed above?  Yes/No  [If the applicant answers “Yes,” the following will display:]  Provide the name of any other country in which you have resided.  Provide the dates that you resided in this country.  *From [date picker]*  *To [date picker]*  Provide your immigration status in this country *(for example: citizen, permanent resident, refugee, asylee, visitor, temporary resident).*  [information provided about each country will populate in a table, with the option to provide another set of information after each addition]  **To be eligible for TPS, you must be admissible as an immigrant to the United States, with certain exceptions.**  If any of the questions below apply to you, you must describe the circumstances and include a full explanation. Space to provide this information will be provided in the next section of this application, if necessary.  If you were EVER arrested, charged, or convicted for any criminal offense, you must provide dispositions (outcomes) for all such arrests, charges, or convictions in the Evidence Upload section. For example, you can provide a disposition from the appropriate authority indicating that your case was dismissed.  **NOTE ABOUT WAIVERS:** A TPS applicant must be admissible under the applicable grounds in section 212 of the Immigration and Nationality Act (INA). A discretionary waiver may be granted for some, but not all, of the applicable inadmissibility grounds based on humanitarian, family unity or public interest reasons.  If you answer "Yes" to certain Item Numbers in the questions below, you may be eligible for a waiver of some of the grounds of inadmissibility. Please see the General Requirements section of the Application for Temporary Protected Status (I-821) Instructions for further information. You can file an Application for Waiver of Grounds of Inadmissibility (I-601), which is the application used to request a waiver, by returning to the Benefit Request page after you have finished your TPS application and selecting "Application for Waiver of Grounds of Inadmissibility (I-601)." *Please be sure to read the special instructions related to TPS applicants on the Application for Waiver of Grounds of Inadmissibility (I-601).*  *[Next Screen]*  To be eligible for Temporary Protected Status, you must be admissible as an immigrant to the United States, with certain exceptions.  You indicated that the questions below apply to you.  [If the applicant responded affirmatively to any of the inadmissibility questions, a list of those questions will be displayed, and the applicant will be able to provide an explanation for each individual question.]  Please describe the circumstances and include a full explanation for each question in the space provided below. |
| **Page 5**  **Part 5. Statement, Certification, Signature and Contact Information of the Applicant *(check applicable boxes)*** | 1.a. I can read and understand English, and have read and understand each and every question and instruction on this form, as well as my answer to each question.  1.b. The interpreter named below has read to me each question and instruction on this form, as well as my answer to each question, in \_\_\_\_\_\_\_ 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.  2.a. I have requested the services of and consented to \_\_\_\_\_\_\_\_ who is/is not an attorney or accredited representative, preparing this form for me.  2.b. I have not requested the services or consented to any person or any organization preparing this form for me.  ***Applicant 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 unaltered original documents, and I understand that I may be required to submit original documents to U.S. Citizenship and Immigration Services (USCIS) at a later date. Furthermore, I authorize the release of any information from my records that USCIS may need to determine my eligibility for the benefit that I seek.  I furthermore authorize release of information contained in this form, supporting documents, and my USCIS records to other entities and persons where necessary for the administration of U.S. immigration laws.  Applicant’s Signature  Date of Signature  Daytime Telephone Number  Mobile Telephone Number  E-mail Address | 1. I can read and understand English, and have read and understand each and every question and instruction on this form, as well as my answer to each question.  2. The interpreter named below has read to me each and every question and instruction on this form, as well as my answer to each question, in a language in which I am fluent, as noted below. 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 to each and every question in the language indicated below.  Name of Interpreter  Interpreted Language  3.a. I have requested that the individual named below prepare this form on my behalf and I have consented to this individual preparing this form on my behalf.  Name of Preparer  My preparer **is** an attorney or accredited representative.  My preparer **is not** an attorney or accredited representative.  3.b. I have not requested the services or consented to any person or any organization preparing this form for me.  [If the applicant indicated that an interpreter and/or preparer were used to prepare the application, instructions for preparing the interpreter and/or preparer information collection(s) will be displayed.]  **Contact Information, Certification, and Signature of the Interpreter**  If you selected Item Number 2. above, information about your Interpreter must be provided. After your Interpreter has completed and signed the Interpreter Information, you will need to upload it as evidence with your benefit request before submitting your application to USCIS.  **Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other than the Applicant.**  If you selected Item Number 3.a. above, information about your Preparer must be provided. After your Preparer has completed and signed the Preparer Information, you will need to upload it as evidence with your benefit request before submitting your application to USCIS. |
| **Page 6, Part 6. Contact Information, Certification, and Signature of Interpreter** | …………  ***Interpreter’s Certification and Signature***  I certify that I am fluent in English and \_\_\_\_\_\_\_, which is the same language provided in Part 5., Item Number 1.b.  I have read to the applicant 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.  The applicant 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.  **6.a.** Interpreter’s Signature  **6.b.** Date of Signature (*mm/dd/yyyy*) | …………  **I certify that:**  I am fluent in English and [text box]  which is the same language provided by the applicant as a language in which he or she is fluent.  I have read to this applicant each and every question and instruction on this form, as well as the answer to each question, in the language provided by the applicant as a language in which he or she is fluent; and  The applicant 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.  Interpreter’s Signature  Date (*mm/dd/yyyy*) |