**TABLE OF CHANGES – FORM**

**Form I-589, Application for Asylum and for Withholding of Removal**

**OMB Number: 1615-0067**

**05/28/2020**

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| **Reason for Revision: Fee Rule**  Legend for Proposed Text:   * Black font = Current text * Red font = Changes   Expires 09/30/2022  Edition Date 09/10/2019 |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1,**  **Start Here** | **[Page 1]**  **START HERE – Type or print in black ink. See the instructions for information about eligibility and how to complete and file this application. There is no filing fee for this application.**  **NOTE:** Check this box if you also want to apply for withholding of removal under the Conventional Against Torture.  [New] | **[Page 1]**  **START HERE – Type or print in black ink. See the instructions for information about eligibility and how to complete and file this application.**  **NOTE:** Check this box if you also want to apply for withholding of removal under the Conventional Against Torture.  Answer all questions fully and accurately.  If a question does not apply to you (for example, if you have never been married and the question asks, “Provide the name of your current spouse”), type or print “N/A” unless otherwise directed.  If your answer to a question which requires a numeric response is zero or none (for example, “How many children do you have?” or “How many times have you departed the United States?”), type or print “None” unless otherwise directed. |
| **Page 1,**  **Part A.I. Information About You** | **[Page 1]**  **Part A.I. Information About You**  **1.** Alien Registration Number(s) (A-Number) *(if any)*  **2.** U.S. Social Security Number *(if any)*  **3.** USCIS Online Account Number *(if any)*  **4.** Complete Last Name  **5.** First Name  **6.** Middle Name  **7.** What other names have you used *(include maiden name and aliases)*?  **8.** Residence in the U.S. *(where you physically reside)*  Street Number and Name  Apt. Number  City  State  Zip Code  Telephone Number  **9.** Mailing Address in the U.S. *(if different than the address in Item Number 8)*  In Care Of *(if applicable)*:  Telephone Number  Street Number and Name  Apt. Number  City  State  Zip Code  **10.** Gender:  Male  Female  **11.** Marital Status:  Single  Married  Divorced  Widowed  **12.** Date of Birth *(mm/dd/yyyy)*  **13.** City and Country of Birth  **14.** Present Nationality *(Citizenship)*  **15.** Nationality at Birth  **16.** Race, Ethnic, or Tribal Group  **17.** Religion  **18.** *Check the box, a through c, that applies:*  **a.** I have never been in Immigration Court proceedings.  **b.** I am now in Immigration Court proceedings.  **c.** I am **not** now in Immigration Court proceedings, but I have been in the past.  **19.** *Complete 19 a through c.*  **a.** When did you last leave your country? *(mm/dd/yyyy)*  **b.** What is your current I-94 Number, if any?  **c.** List each entry into the U.S. beginning with your most recent entry. *List date (mm/dd/yyyy), place, and your status for each entry* *(Attach additional sheets as needed.)*  Date [x3]  Place [x3]  Status [x3]  Date Status Expires  **20.** What country issued your last passport or travel document?  **21.** Passport Number  Travel Document Number  **22.** Expiration Date *(mm/dd/yyyy)*  **23.** What is your native language *(include dialect, if applicable)*?  **24.** Are you fluent in English?  Yes  No  **25.** What other languages do you speak fluently? | **[Page 1]**  **Part A.I. Information About You**  **1.** Alien Registration Number(s) (A-Number)  **2.** U.S. Social Security Number  **3.** USCIS Online Account Number  [No change]  **9.** Mailing Address in the U.S. *(if different than the address in Item Number 8)*  In Care Of:  Telephone Number  Street Number and Name  Apt. Number  City  State  Zip Code  [No change]  **23.** What is your native language *(include dialect)*?  [No change] |
| **Page 2-3,**  **Part A.II. Information About Your Spouse and Children** | **[Page 2]**  **Part A.II. Information About Your Spouse and Children**  **Your spouse** I am not married. (Skip to **Your Children** below.)  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Date of Birth *(mm/dd/yyyy)*  **4.** U.S. Social Security Number *(if any)*  **5.** Complete Last Name  **6.** First Name  **7.** Middle Name  **8.** Other names used *(include maiden name and aliases)*  **9.** Date of Marriage *(mm/dd/yyyy)*  **10.** Place of Marriage  **11.** City and Country of Birth  **12.** Nationality *(Citizenship)*  **13.** Race, Ethnic, or Tribal Group  **14.** Gender  Male  Female  **15.** Is this person in the U.S.?  Yes *(Complete Blocks 16 to 24.)*  No *(Specify location)*: [Fillable field  **16.** Place of last entry into the U.S.  **17.** Date of last entry into the U.S. *(mm/dd/yyyy)*  **18.** I-94 Number *(if any)*  **19.** Status when last admitted *(Visa type, if any)*  **20.** What is your spouse's current status?  **21.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*  **22.** Is your spouse in Immigration Court proceedings?  Yes  No  **23.** If previously in the U.S., date of previous arrival *(mm/dd/yyyy)*  **24.** If in the U.S., is your spouse to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your spouse in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **Your Children.** List **all** of your children, regardless of age, location, or marital status.  I do not have any children. *(Skip to Part A.III.,* ***Information about your background.****)*  I have children.  Total number of children: [Fillable field]  (**NOTE:** *Use Form I-589 Supplement A or attach additional sheets of paper and documentation if you have more than four children.*)  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number (if any)  **5.** Complete Last Name  **6.** First Name  **7.** Middle Name  **8.** Date of Birth *(mm/dd/yyyy)*  **9.** City and Country of Birth  **10.** Nationality *(Citizenship)*  **11.** Race, Ethnic, or Tribal Group  **12.** Gender  Male  Female  **13.** Is this child in the U.S.?  Yes *(Complete Blocks 14 to 21.)*  No *(Specify location)*:  **14.** Place of last entry into the U.S.  **15.** Date of last entry into the U.S. *(mm/dd/yyyy)*  **16.** I-94 Number *(If any)*  **17.** Status when last admitted *(Visa type, if any)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.** If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **[Page 3]**  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number *(if any)*  **5.** Complete Last Name  **6.** First Name  **7.** Middle Name  **8.** Date of Birth *(mm/dd/yyyy)*  **9.** City and Country of Birth  **10.** Nationality *(Citizenship)*  **11.** Race, Ethnic, or Tribal Group  **12.** Gender  Male  Female  **13.** Is this child in the U.S.?  Yes *(Complete Blocks 14 to 21.)*  No *(Specify location)*:  **14.** Place of last entry into the U.S.  **15.** Date of last entry into the U.S. *(mm/dd/yyyy)*  **16.** I-94 Number *(If any)*  **17.** Status when last admitted *(Visa type, if any)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.** If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number *(if any)*  **5.** Complete Last Name  **6.**  First Name  **7.** Middle Name  **8.** Date of Birth *(mm/dd/yyyy)*  **9.** City and Country of Birth  **10.** Nationality *(Citizenship)*  **11.** Race, Ethnic, or Tribal Group  **12.** Gender  Male  Female  **13.** Is this child in the U.S.?  Yes *(Complete Blocks 14 to 21.)*  No *(Specify location)*:  **14.** Place of last entry into the U.S.  **15.** Date of last entry into the U.S. *(mm/dd/yyyy)*  **16.** I-94 Number *(If any)*  **17.** Status when last admitted *(Visa type, if any)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.** If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number (if any)  **5.** Complete Last Name  **6.** First Name  **7.** Middle Name  **8.** Date of Birth *(mm/dd/yyyy)*  **9.** City and Country of Birth  **10.** Nationality *(Citizenship)*  **11.** Race, Ethnic, or Tribal Group  **12.** Gender  Male  Female  **13.** Is this child in the U.S.?  Yes *(Complete Blocks 14 to 21.)*  No *(Specify location)*:  **14.** Place of last entry into the U.S.  **15.** Date of last entry into the U.S. *(mm/dd/yyyy)*  **16.** I-94 Number *(If any)*  **17.** Status when last admitted *(Visa type, if any)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.** If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No | **[Page 2]**  **Part A.II. Information About Your Spouse and Children**  **Your spouse** I am not married. (Skip to **Your Children** below.)  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Date of Birth *(mm/dd/yyyy)*  **4.** U.S. Social Security Number *(if any)*  [No change]  **18.** I-94 Number  **19.** Status when last admitted *(Visa type)*  **20.** What is your spouse's current status?  **21.** What is the expiration date of his/her authorized stay? *(mm/dd/yyyy)*  [No change]  **1.** Alien Registration Number (A-Number)  **2.** Passport/ID Card Number*)*  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number  [No change]  **16.** I-94 Number *(If any)*  **17.** Status when last admitted *(Visa type)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay? *(mm/dd/yyyy)*  [No change]  **[Page 3]**  **1.** Alien Registration Number (A-Number)  **2.** Passport/ID Card Number  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number  [No change]  **16.** I-94 Number  **17.** Status when last admitted *(Visa type)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.** If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **1.** Alien Registration Number (A-Number)  **2.** Passport/ID Card Number  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number  **[No change]**  **16.** I-94 Number  **17.** Status when last admitted *(Visa type)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.** If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **1.** Alien Registration Number (A-Number)  **2.** Passport/ID Card Number  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number  [No change]  **16.** I-94 Number  **17.** Status when last admitted *(Visa type)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.** If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No |
| **Page 4,**  **Information About Your Background** | **[Page 4]**  **Part A.III. Information About Your Background**  **1.** List your last address where you lived before coming to the United States. If this is not the country where you fear persecution, also list the last address in the country where you fear persecution. *(List Address, City/Town, Department, Province, or State and Country.)*  *(***NOTE:** *Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)*  [Table with 6 columns and 3 rows, including these headings]  Number and Street *(Provide if available)*  City/Town  Department, Province, or State  Country  Dates From *(Mo/Yr)*  To *(Mo/Yr)*  **2.** Provide the following information about your residences during the past 5 years. List your present address first.  **…** | **[Page 4]**  **Part A.III. Information About Your Background**  **1.** List your last address where you lived before coming to the United States. If this is not the country where you fear persecution, also list the last address in the country where you fear persecution. *(List Address, City/Town, Department, Province, or State and Country.)*  *(***NOTE:** *Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)*  [Table with 6 columns and 3 rows, including these headings]  Number and Street  City/Town  Department, Province, or State  Country  Dates From *(Mo/Yr)*  To *(Mo/Yr)*  [No change]  **…** |
| **Page 11,**  **Supplement A, Form I-589** | **[Page 11]**  **Supplement A, Form I-589**  A-Number *(If available)*  Date  Applicant’s Name  Applicant’s Signature  **List All of Your Children, Regardless of Age or Marital Status** (**NOTE:** *Use this form and attach additional pages and documentation as needed, if you have more than four children*)  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number *(if any)*  **5.** Complete Last Name  **6.** First Name  **7.** Middle Name  **8.** Date of Birth *(mm/dd/yyyy)*  **9.** City and Country of Birth  **10.** Nationality *(Citizenship)*  **11.** Race, Ethnic, or Tribal Group  **12.** Gender  Male  Female  **13.** Is this child in the U.S.?  Yes *(Complete Blocks 14 to 21.*)  No *(Specify location)*:  **14.** Place of last entry into the U.S.  **15.** Date of last entry into the U.S. *(mm/dd/yyyy)*  **16.** I-94 Number *(If any)*  **17.** Status when last admitted *(Visa type, if any)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.**  If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **1.** Alien Registration Number (A-Number) *(if any)*  **2.** Passport/ID Card Number *(if any)*  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number *(if any)*  **5.** Complete Last Name  **6.** First Name  **7.** Middle Name  **8.** Date of Birth *(mm/dd/yyyy)*  **9.** City and Country of Birth  **10.** Nationality *(Citizenship)*  **11.** Race, Ethnic, or Tribal Group  **12.** Gender  Male  Female  **13.** Is this child in the U.S.?  Yes *(Complete Blocks 14 to 21.*)  No *(Specify location)*:  **14.** Place of last entry into the U.S.  **15.** Date of last entry into the U.S. *(mm/dd/yyyy)*  **16.** I-94 Number *(If any)*  **17.** Status when last admitted *(Visa type, if any)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay, if any? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.**  If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No | **[Page 11]**  **Supplement A, Form I-589**  A-Number  Date  Applicant’s Name  Applicant’s Signature  **List All of Your Children, Regardless of Age or Marital Status** (**NOTE:** *Use this form and attach additional pages and documentation as needed, if you have more than four children*)  **1.** Alien Registration Number (A-Number)  **2.** Passport/ID Card Number  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number  [No change]  **16.** I-94 Number  **17.** Status when last admitted *(Visa type)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.**  If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No  **1.** Alien Registration Number (A-Number)  **2.** Passport/ID Card Number  **3.** Marital Status *(Married, Single, Divorced, Widowed)*  **4.** U.S. Social Security Number  [No change]  **16.** I-94 Number  **17.** Status when last admitted *(Visa type)*  **18.** What is your child's current status?  **19.** What is the expiration date of his/her authorized stay? *(mm/dd/yyyy)*  **20.** Is your child in Immigration Court proceedings?  Yes  No  **21.**  If in the U.S., is this child to be included in this application? *(Check the appropriate box.)*  Yes *(Attach one photograph of your child in the upper right corner of Page 9 on the extra copy of the application submitted for this person.)*  No |
| **Page 12,**  **Supplement B, Form I-589** | **[Page 12]**  **Supplement B, Form I-589**  **Additional Information About Your Claim to Asylum**  A-Number (if available)  Date  Applicant’s Name  Applicant’s Signature  **NOTE:** *Use this as a continuation page for any additional information requested. Copy and complete as needed.*  **Part** [Fillable field]  **Question** [Fillable field]  [Fillable field] | **[Page 12]**  **Supplement B, Form I-589**  **Additional Information About Your Claim to Asylum**  A-Number  Date  Applicant’s Name  Applicant’s Signature  **NOTE:** *Use this as a continuation page for any additional information requested. Copy and complete as needed.*  **Part** [Fillable field]  **Question** [Fillable field]  [Fillable field] |