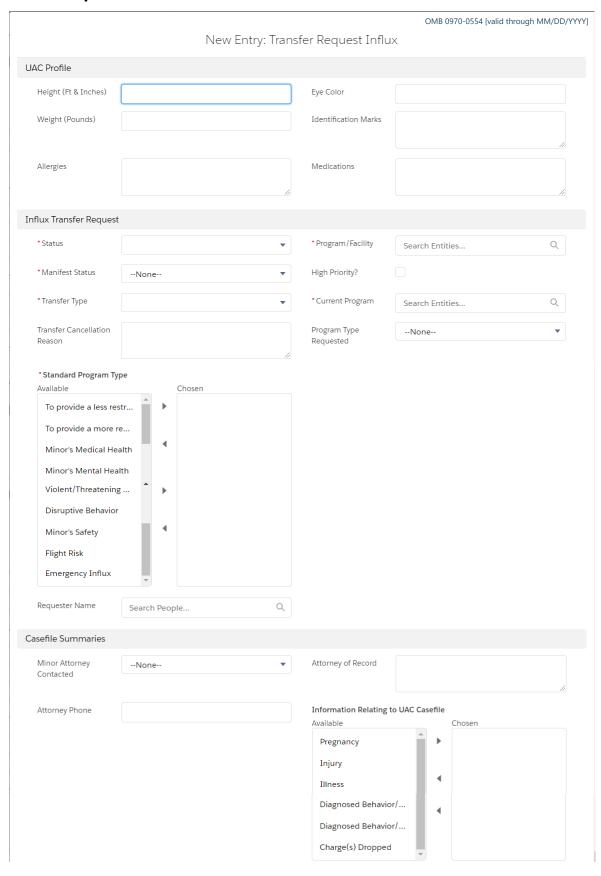
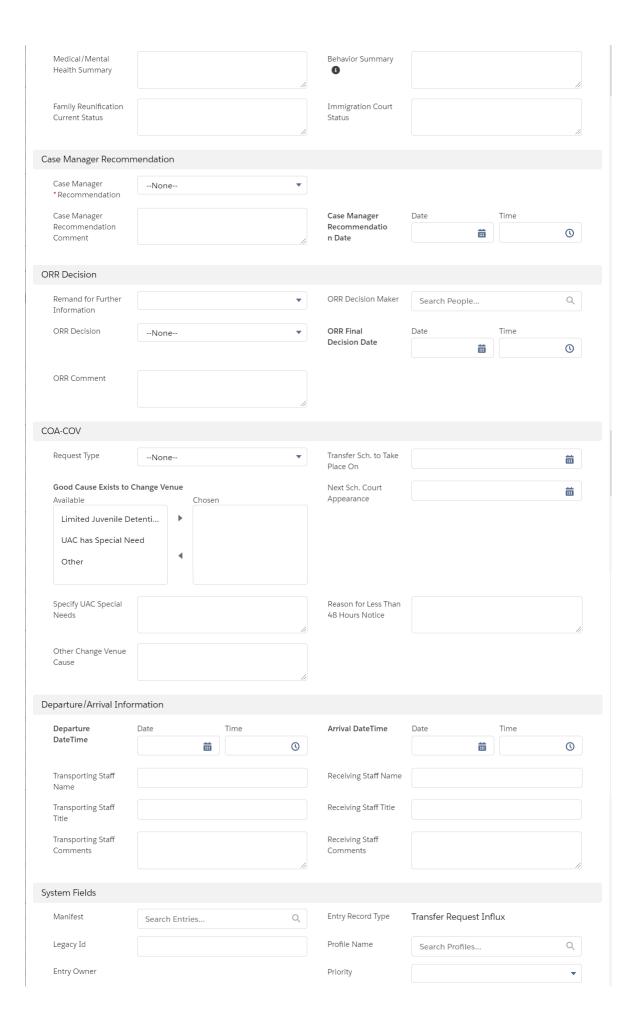
# **Influx Transfer Request (Form P-10B)**

# **Data Entry Window**



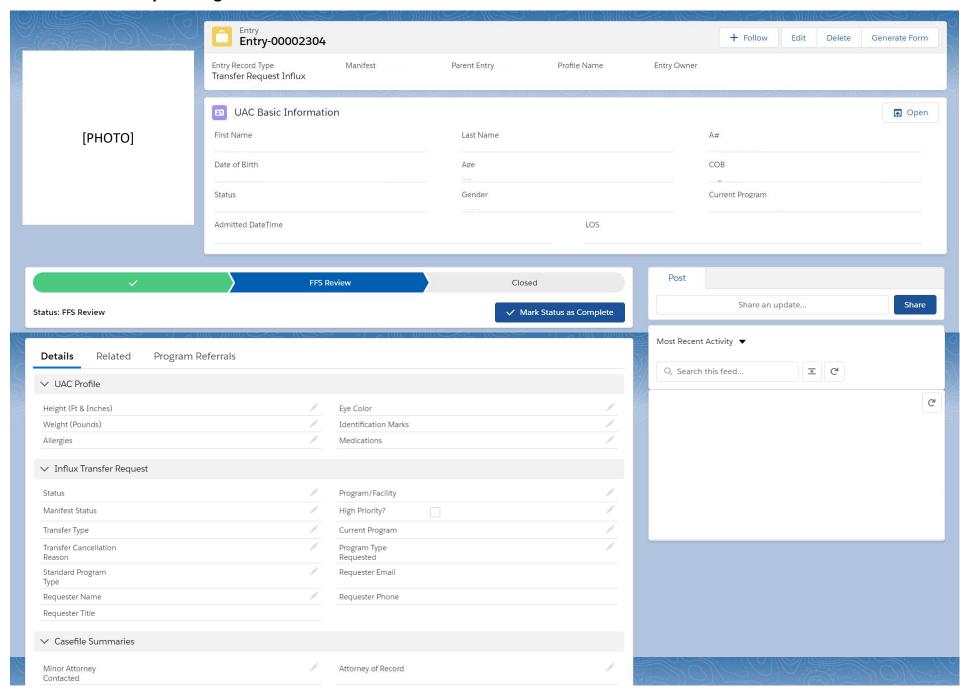


| Subject   | Entry Origin | None   | •              |
|-----------|--------------|--------|----------------|
| Web Email | Description  |        |                |
|           |              |        | h              |
|           |              |        |                |
|           |              | Cancel | ave & New Save |

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to allow ORR to process recommendations and decisions for transfer of a UAC to an influx care facility. Public reporting burden for this collection of information is estimated to average 0.42 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information (Homeland Security Act, 6 U.S.C. 279). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information please contact <a href="UACPolicy@acf.hhs.gov">UACPolicy@acf.hhs.gov</a>.

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# Influx Transfer Request Page - Details Tab



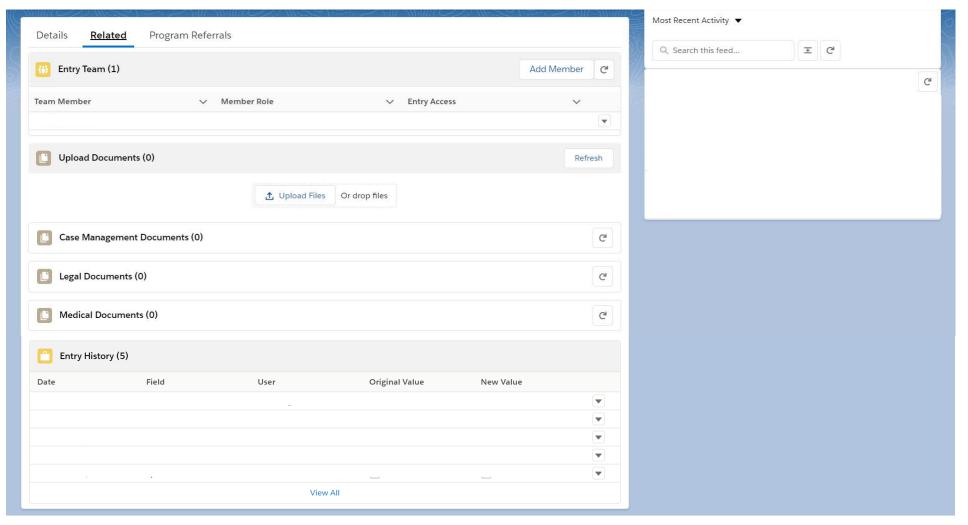
| Attorney Phone                            | / | Information Relating to UAC Casefile    | /   |  |
|---|---|---|-----|--|
| Medical/Mental<br>Health Summary          | / | Behavior Summary 1                      | /   |  |
| Family Reunification<br>Current Status    |   | Immigration Court<br>Status             |     |  |
| ✓ Case Manager Recommendation             |   |   |     |  |
| Case Manager<br>Recommendation            | 1 |   |     |  |
| Case Manager<br>Recommendation<br>Comment | / | Case Manager<br>Recommendation<br>Date  |     |  |
| ✓ ORR Decision                            |   |   |     |  |
| Remand for Further<br>Information         | / | ORR Decision Maker                      | /   |  |
| ORR Decision                              |   | ORR Final Decision<br>Date              | /   |  |
| ORR Comment                               | / |   |     |  |
| ✓ COA-COV                                 |   |   |     |  |
| Request Type                              | / | Transfer Sch. to Take<br>Place On       | 1   |  |
| Good Cause Exists to<br>Change Venue      |   | Next Sch. Court<br>Appearance           | /   |  |
| Specify UAC Special<br>Needs              |   | Reason for Less Than<br>48 Hours Notice |     |  |
| Other Change Venue<br>Cause               | / |   |     |  |
| → Departure/Arrival Information           |   |   |     |  |
| Departure DateTime                        | / | Arrival DateTime                        | /   |  |
| Transporting Staff Name                   | / | Receiving Staff<br>Name                 | 7   |  |
| Transporting Staff<br>Title               | 1 | Receiving Staff Title                   | - 1 |  |
| Transporting Staff<br>Comments            | 1 | Receiving Staff<br>Comments             | /   |  |
| ✓ System Fields                           |   |   |     |  |
| Created By                                |   | Last Modified By                        |     |  |
| Manifest                                  | 1 | Entry Record Type                       | 17  |  |
| Legacy Id                                 | / | Profile Name                            | /   |  |
| Entry Owner                               |   | Priority                                | /   |  |
| Subject                                   | / | Entry Origin                            | /   |  |
| Web Email                                 | / | Description                             | /   |  |
|   |   |   |     |  |
|   |   |   |     |  |

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# Influx Transfer Request Page - Related Tab

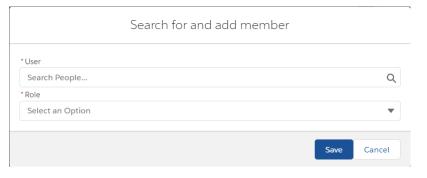


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### **Entry Team Data Entry Window**

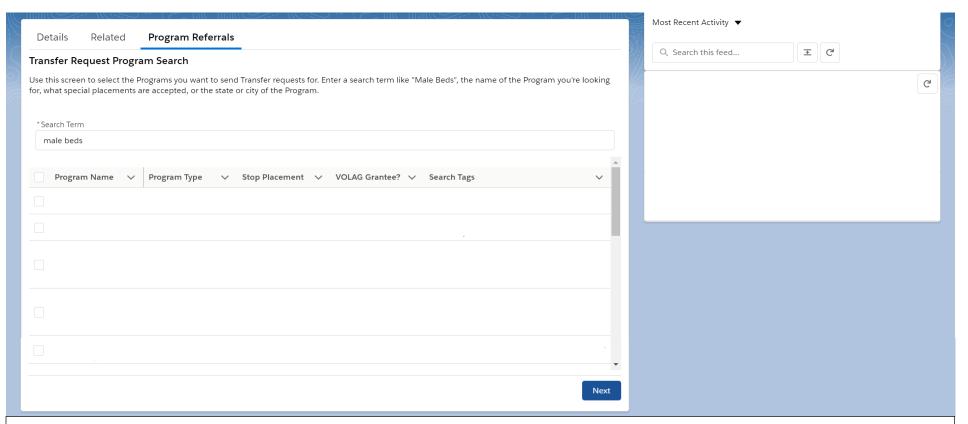


## **Documents Data Entry Window**

Add File Details Record Type \* Title Verified by Government Agency/Consulate --None--\* Document Type Entry --None--Search Entries... Q Date Document Issued (if applicable) Individual Q Search Profiles... Adult Contact Relationship Date Received 苗 Search Adult Contact Relationshi Q **Expiration Date** 繭



# Influx Transfer Request - Program Referrals Tab



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