

I am requesting:

Initial Request - Consideration of Deferred Action 1. for Childhood Arrivals

OR

AND

Renewal Request - Consideration of Deferred 2. Action for Childhood Arrivals

For this Renewal request, my most recent period of Deferred Action for Childhood Arrivals expires on

(mm/dd/yyyy) ►

Full Legal Name

3 .a.	Family Name (Last Name)	
3 .b.	Given Name (First Name)	
3 .c.	Middle Name	

07/01

4. b.	Street Number and Name
4 .c.	Apt. Ste. Flr.
4 .d.	City or Town
4 .e.	State 4.f. ZIP Code

Removal Proceedings Information

5. Are you NOW or have you EVER been in removal proceedings, or do you have a removal order issued in any other context (for example, at the border or within the United States by an immigration agent)?

	Yes		No
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NOTE: The term "removal proceedings" includes exclusion or deportation proceedings initiated before April 1, 1997; an Immigration and Nationality Act (INA) section 240 removal proceeding; expedited removal; reinstatement of 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.

USCIS Form I-821D OMB No. 1615-0124

For USCIS

> Use Only

Returned: Resubmitted:

Part 1. Information About You (For Initial and Renewal Requests) (continued)		Other Names Used (If Applicable)				
If you answered "Yes" to Item Number 5., you must select a		If you need additional space, use Part 8. Additional Information.				
	elow indicating your current status or outcome of your val proceedings.	15. a.	Family Name <i>(Last Name)</i>			
Statu	s or outcome:	15 .b	Given Name (<i>First Name</i>)			
6 .a.	Currently in Proceedings (Active)	15. c.	Middle Name			
6.b.	Currently in Proceedings (Administratively Closed) Terminated	Pro	ocessing Infor	rmation		
6.c. 6.d.	Subject to a Final Order	16.	Ethnicity (Selec		ar)	
6.e.	Other. Explain in Part 8. Additional Information .	10.	Hispanic o	-	,,,)	
6.f.	Most Recent Date of Proceedings		Not Hispan	nic or Latino		
	(mm/dd/yyyy) ►	17.	Race (Select al	l applicable b	oxes)	
<mark>6</mark> .g.	Location of Proceedings		White Asian			
				frican Ameri	can	
041	an Information		American	Indian or Ala	ska Native	
	er Information		Native Hav	waiian or Oth	er Pacific I	slander
7.	Alien Registration Number (A-Number) (<i>if any</i>) ► A-	18.	Height		Feet	Inches
8.	U.S. Social Security Number (<i>if any</i>)	19.	Weight		Pe	ounds
		20.	Eye Color (Sele	ect only one b	vox)	
9.	Date of Birth (mm/dd/yyyy)	T	Black	Blue		Brown
10.	Gender Male Female		Gray Maroon	Green		Hazel Unknown/Other
<mark>11.</mark> a.	City/Town/Village of Birth	21.	Hair Color (Sel	lect only one	box)	
			Bald (No h		lack	Blond
11. b.	Country of Birth		Brown Sandy		bray Vhite	Red Unknown/
			buildy		, inte	Other
12.	Current Country of Residence					
13.	Country of Citizenship or Nationality		r t 2. Residen tial and Renev			rmation (For
14.	Marital Status Married Widowed Single Divorced	1.	I have been cor June 15, 2007,		-	U.S. since at least

Part 2. Residence and Travel Information (For Initial and Renewal Requests) (continued)

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.

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 present.

For Renewal Requests: List only the addresses where you resided since you submitted your last Form I-821D that was approved.

If you require additional space, use Part 8. Additional Information.

Present Address

2.9	Dates at this residence (<i>mm/dd/yyyy</i>)		rmation.
2.a.	From \blacktriangleright To \blacktriangleright Present		arture 1
2.b.	Street Number and Name	_	Departure Date (<i>mm/dd/yyyy</i>) ►
2.c.	Apt Ste Flr	6.b.	Return Date (<i>mm/dd/yyyy</i>) ►
2.d.	City or Town	6.c.	Reason for Departure
2.e.	State 2.f. ZIP Code	Dent	
Add	ress 1		arture 2
	Dates at this residence (<i>mm/dd/yyyy</i>)	7 . a.	Departure Date (<i>mm/dd/yyyy</i>) ►
ciui	From To	7.b.	Return Date (mm/dd/yyyy) ►
3.b.	Street Number and Name	7.c.	Reason for Departure
3.c.	Apt. Ste. Flr.		
3.d.	City or Town	8.	Have you left the United States without advance parole on or after August 15, 2012? Yes No
3.e.	State 3.f. ZIP Code	9.a.	What country issued your last passport?
Add	ress 2		
4.a.	Dates at this residence (<i>mm/dd/yyyy</i>)	9.b.	Passport Number
	From To F		
4.b.	Street Number and Name	9.c.	Passport Expiration Date (mm/dd/yyyy) ►
4.c.	Apt. Ste. Flr.	10.	Border Crossing Card Number (<i>if any</i>)
4.d.	City or Town		
4.e.	State 4.f. ZIP Code		

Address 3

5.a.	Dates at this residence (<i>mm/dd/yyyy</i>)
	From To
5.b.	Street Number and Name
5.c.	Apt. Ste. Flr.
5.d.	City or Town
5.e.	State 5.f. ZIP Code
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Travel Information

For Initial Requests: List all of your absences from the United States since June 15, 2007.

For Renewal Requests: List only your absences from the United States since you submitted your last Form I-821D that was approved.

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Par	t 3. For Initial Requests Only	9.d.	Type of Discharge
1.	I initially arrived and established residence in the U.S. prior to 16 years of age.		
2.	Date of <i>Initial</i> Entry into the United States (on or about) (mm/dd/yyyy) ►	Saf	rt 4. Criminal, National Security, and Public Tety Information (For Initial and Renewal quests)
3.	Place of <i>Initial</i> Entry into the United States	Add	y of the following questions apply to you, use Part 8. itional Information to describe the circumstances and
4.	Immigration Status on June 15, 2012 (e.g., No Lawful Status, Status Expired, Parole Expired)	inclu 1.	de a full explanation. Have you EVER been arrested for, charged with, or convicted of a felony or misdemeanor, <i>including incidents</i> <i>handled in juvenile court</i> , in the United States? <i>Do not</i>
5.a.	Were you EVER issued an Arrival-Departure Record (Form I-94, I-94W, or I-95)?		include minor traffic violations unless they were alcohol- or drug-related.
5.b.	If you answered "Yes" to Item Number 5.a. , provide your Form I-94, I-94W, or I-95 number (<i>if available</i>).		If you answered "Yes," you must include a certified court disposition, arrest record, charging document, sentencing record, etc., for each arrest, unless disclosure is prohibited under state law.
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 (<i>if available</i>). (<i>mm/dd/yyyy</i>) ►	2.	Have you EVER been arrested for, charged with, or convicted of a crime in any country other than the United States?
Edı	ucation Information		If you answered "Yes," you must include a certified court disposition, arrest record, charging document, sentencing record, etc., for each arrest.
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)	3.	Have you EVER engaged in, do you continue to engage in, or plan to engage in terrorist activities?
7.	Name, City, and State of School Currently Attending or Where Education Received	4.	Are you NOW or have you EVER been a member of a gang?
8.	Date of Graduation (e.g., Receipt of a Certificate of	5.	Have you EVER engaged in, ordered, incited, assisted, or otherwise participated in any of the following:
0.	Completion, GED certificate, other equivalent state- authorized exam) or, if currently in school, date of last attendance. $(mm/dd/yyyy)$	5.a.	Acts involving torture, genocide, or human trafficking?
		5.b.	Killing any person?
Mil	itary Service Information	5.c.	Severely injuring any person? Yes No
9.	Were you a member of the U.S. Armed Forces or U.S. Coast Guard?	5.d.	Any kind of sexual contact or relations with any person who was being forced or threatened?
•	a answered "Yes" to Item Number 9. , you must provide nses to Item Numbers 9.a 9.d. Military Branch	6.	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? Yes No
9.b.	Service Start Date (<i>mm/dd/yyyy</i>)	7.	Have you EVER used any person under age 15 to take part in hostilities, or to help or provide services to people
9.c.	Discharge Date (<i>mm/dd/yyyy</i>) ►		in combat?

Part 5. Statement, Certification, Signature, and Contact Information of the Requestor (For Initial and Renewal Requests)

NOTE: Select the box for either Item Number 1.a. or 1.b.

- **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 in **Part 6.** 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. 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 Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the request that I seek.

I furthermore authorize release of information contained in this request, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and provided or authorized all of the information in my request;

2) I understood all of the information contained in, and submitted with, my request; and

3) All of this information was complete, true, and correct at the time of filing.

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. I understand that I may be required to submit original documents 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 deferred action request.

2.a. <u>Requestor's Signature</u>

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2.b. Date of Signature (mm/dd/yyyy)

Requestor's Contact Information

- 3. Requestor's Daytime Telephone Number
- 4. Requestor's Mobile Telephone Number
- 5. Requestor's Email Address

Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests)

Interpreter's Full Name

Provide the following information concerning the interpreter:

- **1.a.** Interpreter's Family Name (Last Name)
- **1.b.** Interpreter's Given Name (*First Name*)
- 2. Interpreter's Business or Organization Name (*if any*)

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

Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests) (continued)

Interpreter's Contact Information

Interpreter's Daytime Telephone Number
 Interpreter's Email Address

Interpreter's Certification

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 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

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.

- 6.a. Interpreter's Signature
- 6.b. Date of Signature (*mm/dd/yyyy*) ►

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

Provide the following information concerning the preparer:

- 1.a. Preparer's Family Name (Last Name)
- **1.b.** Preparer's Given Name (*First Name*)
- 2. Preparer's Business or Organization Name

Preparer'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	

Preparer's Contact Information

- 4. Preparer's Daytime Telephone Number
- **5.** Preparer's Fax Number
- 6. Preparer's Email Address

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.

- 7.a. Preparer's Signature
- **7.b.** Date of Signature (*mm/dd/yyyy*) ►

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NOTE: If you need extra space to complete any item within this request, see the next page for **Part 8. Additional Information.**

	rt 8. Additional Information (For Initial and newal Requests)	4.a.	Page Number	4.b. Part Number	4.c. Item Number
reque page and A indic	u need extra space to complete any item within this est, use the space below. You may also make copies of this to complete and file with this request. Include your name A-Number (<i>if any</i>) at the top of each sheet of paper; ate the Page Number , Part Number , and Item Number nich your answer refers; and sign and date each sheet.	4.d.			
Ful	l Legal Name				
	Family Name (Last Name) Given Name				
1.c.	(First Name)				
2.	A-Number (<i>if any</i>) \blacktriangleright A-				
3.a.	Page Number 3.b. Part Number 3.c. Item Number				
3.d.					
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