

# Consideration of Deferred Action for Childhood Arrivals

### **Department of Homeland Security**

U.S. Citizenship and Immigration Services

**USCIS Form I-821D** OMB No. 1615-0124 Expires 10/31/2025

	Receipt		Action Block
For A-			
USCIS Use Case ID:			
Only Requestor interviewed			
on	/ / Remarks		_
Returned:         /         \vec{5}{2}         Received:           Resubmitted:         /         /         \vec{5}{2}         Sent:			
To Be Completed by an Attor	rnev or Select th	is box if Form G-28	is attached to Attorney State Bar Number ( <i>if any</i> ):
Accredited Representative,		t the requestor.	
► START HERE - Type or print i	n black ink. Read Form I-	821D Instructions	s for information on how to complete this form.
Part 1. Information About Y	ou (For Initial and		ng Address (Enter the same address on
Renewal Requests)		Form I-765	5)
I am not in immigration detention	n.	4.a. In Care C	Of Name ( <i>if applicable</i> )
I <b>am</b> in immigration detention.			
I am requesting:		4.b. Street N	
1. Initial Request - Considera	ation of Deferred Action	and Nam	
for Childhood Arrivals		<b>4.c.</b> Apt.	Ste. Flr.
OR		<b>4.d.</b> City or 7	Town
2. Renewal Request - Consid Action for Childhood Arriv		H.u. City of I	
AND		<b>4.e.</b> State	4.f. ZIP Code
For this Renewal request, my most rec		Domougl D	roceedings Information
Action for Childhood Arrivals expires	on		
(mm/dd/yyyy) ►			<b>NOW</b> or have you <b>EVER</b> been in removal ings, or do you have a removal order issued in any
Full Legal Name			ntext (for example, at the border or within the
<b>3.a.</b> Family Name			States by an immigration agent)?
(Last Name)			Yes No
<b>3.b.</b> Given Name ( <i>First Name</i> )	1/01		The term "removal proceedings" includes
<b>3.c.</b> Middle Name			on or deportation proceedings initiated before 1997; an Immigration and Nationality Act (INA)
			240 removal proceeding; expedited removal;
	_		ement 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.

<b>Part 1. Information About You</b> (For Initial and Renewal Requests) (continued)	Other Names Used (If Applicable)				
If you answered "Yes" to <b>Item Number 5.</b> , you must select a	If you need additional space, use <b>Part 8. Additional</b> Information.				
box below indicating your current status or outcome of your removal proceedings.	15.a. Family Name (Last Name)				
Status or outcome:	15.b. Given Name				
<b>6.a.</b> Currently in Proceedings ( <i>Active</i> )	(First Name)				
	15.c. Middle Name				
<b>6.b.</b> Currently in Proceedings ( <i>Administratively Closed</i> )					
6.c. Terminated	Processing Information				
<b>6.d.</b> Subject to a Final Order	<b>16.</b> Ethnicity (Select only one box)				
6.e. Other. Explain in Part 8. Additional Information.	Hispanic or Latino				
<b>6.f.</b> Most Recent Date of Proceedings	Not Hispanic or Latino				
(mm/dd/yyyy) ►	17. Race (Select all applicable boxes)				
	White				
6.g. Location of Proceedings	Asian				
	Black or African American				
	American Indian or Alaska Native				
Other Information	Native Hawaiian or Other Pacific Islander				
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 Pounds				
► ►	<b>20.</b> Eye Color ( <i>Select only one box</i> )				
9. Date of Birth $(mm/dd/yyyy)$ >	Black Blue Brown				
10. Gender Male Female	Gray Green Hazel				
	Maroon Pink Unknown/Other				
11.a. City/Town/Village of Birth	<b>21.</b> Hair Color ( <i>Select only one box</i> )				
	Bald (No hair) Black Blond				
<b>11.b.</b> Country of Birth	Brown Gray Red				
	Sandy White Unknown/				
12 Current Country of Decidence	Other				
12. Current Country of Residence					
	Part 2. Residence and Travel Information (For				
13. Country of Citizenship or Nationality	Initial and Renewal Requests)				
	<b>1.</b> I have been continuously residing in the U.S. since at least				
14. Marital Status	June 15, 2007, up to the present time. $\Box$ Yes $\Box$ No				
Married Widowed Single Divorced					

# 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

Form I-821D Edition 10/31/22

_		-	require additional space, use <b>Part 8. Additional</b>
2.a.	Dates at this residence ( <i>mm/dd/yyyy</i> )	Infor	mation.
	From ► To ► Present	Depa	rture 1
2.b.	Street Number and Name	6.a.	Departure Date ( <i>mm/dd/yyyy</i> ) ►
2.c.	Apt. Ste. Flr.	6.b.	Return Date (mm/dd/yyyy) ►
2.d.	City or Town	6.c.	Reason for Departure
2.e.	State 2.f. ZIP Code		
		Depa	rture 2
	Tess 1     Dates at this residence (mm/dd/yyyy)	7.a.	Departure Date ( <i>mm/dd/yyyy</i> ) ►
J.a.	From  To	7.b.	Return Date ( <i>mm/dd/yyyy</i> ) ►
3.b.	Street Number and Name	7.c.	Reason for Departure
3.c.	Apt. Ste. Flr.		
3.d.	City or Town		Have you left the United States without advance parole on or after August 15, 2012?YesYesNo
3.e.	State 3.f. ZIP Code	9.a.	What country issued your last passport?
Add	ress 2		
4 9	Dates at this residence ( <i>mm/dd/yyyy</i> )	9.b.	Passport Number
	From  To		
4.b.	Street Number	9.c.	Passport Expiration Date
<b></b>	and Name		(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

### **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.

Par	rt 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 ( <i>on or about</i> ) ( <i>mm/dd/yyyy</i> ) ►		Saf	rt 4. Criminal, National Security, and Public Yety Information (For Initial and Renewal quests)			
3.	Place of <i>Initial</i> Entry into the United States			y of the following questions apply to you, use <b>Part 8.</b>			
				itional Information to describe the circumstances and de a full explanation.			
4.	Immigration Status on June 15, 2012 (e.g., No Lawful Status, Status Expired, Parole Expired)		1.	Have you <b>EVER</b> been arrested for, charged with, or			
5.a.	Were you <b>EVER</b> issued an Arrival-Departure Record (Form I-94, I-94W, or I-95)? Yes No			convicted of a felony or misdemeanor, <i>including incident</i> handled in juvenile court, in the United States? Do not include minor traffic violations unless they were alcohol- or drug-related.	-		
	If you answered "Yes" to <b>Item Number 5.a.</b> , provide your Form I-94, I-94W, or I-95 number ( <i>if available</i> ).	L	Y	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 <b>Item Number 5.a.</b> , provide the date your authorized stay expired, as shown on Form I-94,		2.	Have you <b>EVER</b> been arrested for, charged with, or			
	I-94W, or I-95 ( <i>if available</i> ).			convicted of a crime in any country other than the United	d		
	(mm/dd/yyyy) ►		Г	States? Yes N	0		
Ed	ucation Information		Ŀ	If you answered "Yes," you must include a certified court disposition, arrest record, charging document,			
6.	Indicate how you meet the education guideline ( <i>e.g.</i> ,			sentencing record, etc., for each arrest.			
	Graduated from high school, Received a general educational development (GED) certificate or equivalent state-authorized exam, Currently in school)	i.	3.	Have you <b>EVER</b> engaged in, do you continue to engage in, or plan to engage in terrorist activities?			
				Yes N	0		
7.	Name, City, and State of School Currently Attending or		4.	Are you <b>NOW</b> or have you <b>EVER</b> been a member of a gang? $\Box$ Ves $\Box$ N			
	Where Education Received						
ø	Date of Graduation ( <i>e.g., Receipt of a Certificate of</i>		5.	Have you <b>EVER</b> engaged in, ordered, incited, assisted, or otherwise participated in any of the following:	r		
8.	Completion, GED certificate, other equivalent state-		5.a.	Acts involving torture, genocide, or human trafficking?			
	<i>authorized exam</i> ) or, if currently in school, date of last attendance.			Yes N	0		
	attendance. ( <i>mm/dd/yyyy</i> ) ►		5.b.	Killing any person?	0		
Mil	litary Service Information		5.c.	Severely injuring any person?	0		
9.	Were you a member of the U.S. Armed Forces or U.S. $C_{\rm ev} = C_{\rm ev} + C_{\rm ev}$		5.d.	Any kind of sexual contact or relations with any person			
TC	Coast Guard?			who was being forced or threatened? $\Box$ Yes $\Box$ N	Ó		
•	u answered "Yes" to <b>Item Number 9.</b> , you must provide onses to <b>Item Numbers 9.a 9.d.</b>		6.	Have you EVER recruited, enlisted, conscripted, or used	l		
9.a.	Military Branch			any person to serve in or help an armed force or grouwhile such person was under age 15?			
					0		
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 in combat?			
9.c.	Discharge Date ( <i>mm/dd/yyyy</i> ) ►			in combat?	0		

### **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. Requestor's Signature

♦

**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

- 4. Interpreter's Daytime Telephone Number
- 5. Interpreter's Email Address

#### Interpreter's Certification

#### I certify that:

I am fluent in English and

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)  $\blacktriangleright$

**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	<b>3.e.</b> 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

which

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*) ►

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

# Part Rene

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 Page Number, Part Number, and Item Number					
to which your answer refers; and sign and date each sheet.					

	<b>rt 8. Additional Information</b> (For Initial and newal Requests)	4.a.	Page Number	<b>4.b.</b> Part N	Jumber 4	.c. Item Number
requipage and and a	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; eate the <b>Page Number</b> , <b>Part Number</b> , and <b>Item Number</b> nich your answer refers; and sign and date each sheet.	4.d.				
Ful	l Legal Name					
1.a. 1.b.	Family Name       (Last Name)       Given Name	]				
1.c.	(First Name) Middle Name	]				
2.	A-Number ( <i>if any</i> ) A-	A	FT			
3.a.	Page Number <b>3.b.</b> Part Number <b>3.c.</b> Item Number					
3.d.	NOT	5.a.	Page Number	5.b. Part N	<u>Jumber</u> 5	.c. Item Number
	PRODL	5.d.	T	IC	)/\	
	12/21		20	2	2	