



# Discharge Notification

## UC Basic Information

<div style="border: 1px solid black; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> <p><i>Photo of Child</i> [auto-populated]</p> </div>	<p>First Name: [auto-populated]</p> <p>Last Name: [auto-populated]</p> <p>Date of Birth: [auto-populated]</p> <p>A#: [auto-populated]</p> <p>Country of Birth: [auto-populated]</p> <p>Gender: [auto-populated]</p>	<p>AKA: [auto-populated]</p> <p>Status: [auto-populated]</p> <p>Admitted Date: [auto-populated]</p> <p>Length of Stay: [auto-populated]</p> <p>Current Program: [auto-populated]</p> <p>Portal ID: [auto-populated]</p>
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## Discharge Notification

<p>Date of Discharge: [date picker]</p>	<p>Time of Discharge: [text box]</p>
<p>Discharge Type: [dropdown]</p> <ul style="list-style-type: none"> <li>Reunified (Individual Sponsor)</li> <li>Reunified (Individual Sponsor) - Court-Ordered</li> <li>Reunified (Individual Sponsor) - Immigration Relief Granted</li> <li>Transfer of Placement</li> <li>Age Out</li> <li>Age Redetermination</li> <li>Voluntary Departure</li> <li>Child Deceased</li> <li>Determined to be U.S. Citizen</li> <li>Discharged to Program/Facility</li> <li>Discharged to Program/Facility - Court-Ordered</li> <li>Discharged to Program/Facility - Immigration Relief Granted</li> <li>Government Agency</li> <li>Joint Removal with Parent (VD Order for UC)</li> <li>Joint Removal with Parent (NTA Cancelled)</li> <li>Ordered Removed</li> <li>Ran Away from Facility</li> <li>Ran Away on Field Trip</li> <li>Referral Cancelled - OCONUS Age Out</li> <li>Referral Cancelled by Referring Agency</li> <li>UC Child Discharged with UC Parent</li> <li>U.S. Citizen Child Discharged with UC Parent</li> <li>Other</li> </ul>	<p>Sponsor Name: [dropdown]</p>
<p>Sponsor DOB: [auto-populated]</p>	<p>Relationship to UC: [auto-populated]</p>

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 the physical discharge of a child from a care provider program when the child has been approved for release/discharge from ORR custody or for transfer within the ORR provider network. Public reporting burden for this collection of information is estimated to average 0.17 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 UCPolicy@acf.hhs.gov.

# Discharge Notification Office of Refugee Resettlement

Address: <i>[auto-populated]</i>	City: <i>[auto-populated]</i>
State: <i>[auto-populated]</i>	Zip Code: <i>[auto-populated]</i>
Primary Phone: <i>[auto-populated]</i>	Backup Phone Number: <i>[auto-populated]</i>

## ORR Decision from Latest Release Request

ORR Decision: <i>[auto-populated]</i> ORR Decision after Home Study: <i>[auto-populated]</i> Updated Date/Time: <i>[auto-populated]</i>
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## Transfer of Placement

Receiving Program Name: <i>[auto-populated]</i> Address: <i>[auto-populated]</i> State: <i>[auto-populated]</i> UC Legal Status: <i>[dropdown]</i> <i>NTA (in removal proceedings)</i> <i>Without status</i> <i>SIJS: I-360 approved</i> <i>SIJS: I-485 approved</i> <i>LPR derivative (of U.S. relative)</i> <i>LPR other</i> <i>Asylum: Immigration Judge Initial Order w/ 30-day appeal period</i> <i>Asylum: Immigration Judge Final Order w/ 30-day appeal period waived or completed</i> <i>Asylum: Appealed to federal court</i> <i>Asylum: USCIS grant</i> <i>U.S. Citizen</i> <i>Temporary Protected Status</i> <i>T-nonimmigrant status</i> <i>U-nonimmigrant status</i> <i>Other non-immigrant visa</i> <i>F-1 student visa (non-immigrant status)</i> <i>B-1/2 Tourist/business visa (non-immigrant status)</i> <i>Continued Presence</i> <i>Withholding of Removal</i> <i>Humanitarian Parole</i> <i>Final Order of Removal</i> <i>Other</i>	Phone: <i>[text box]</i> City: <i>[auto-populated]</i> Zip Code: <i>[auto-populated]</i>
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## Other Type of Discharge

Discharged into Custody of: <i>[dropdown]</i> <i>Individual</i> <i>Program/Facility</i>	Individual or Program/Facility Name: <i>[text box]</i>
Address: <i>[text box]</i>	City: <i>[text box]</i>

# Discharge Notification

## Office of Refugee Resettlement

State: *[text box]*

Zip Code: *[text box]*