



Instructions for Biographic Information (for Deferred Action)

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form G-325A
OMB No. 1615-0008
Expires 08/31/2025

What Is the Purpose of This Form?

Noncitizens use Form G-325A to request initial and subsequent deferred action (other than deferred action related to DACA, Violence Against Women Act self-petitions, and A-3, G-5, T, and U nonimmigrant status). Deferred action is a discretionary determination to defer removal of a noncitizen as an act of prosecutorial discretion. Noncitizens who receive deferred action will not be placed into removal proceedings or removed from the United States for a specified period, unless the U.S. Department of Homeland Security (DHS) chooses to terminate deferred action.

If you have any questions on how to complete the form, call our USCIS Contact Center at 1-800-375-5283. For TTY (hearing impaired) call: 1-800-767-1833.

Who May File Form G-325A?

If you are inside the United States, you may request deferred action (other than deferred action related to Deferred Action for Childhood Arrivals (DACA), Violence Against Women Act self-petitions, and A-3, G-5, T and U nonimmigrant status) from USCIS by submitting this form and supporting evidence.

NOTE: You may only use this form to request deferred action based on special immigrant juvenile (SIJ) classification in the following circumstances:

- To request an initial grant of SIJ deferred action if you have an approved SIJ-based Form I-360, Petition for Amerasian, Widow(er), or Special Immigrant, a visa is not immediately available to file Form I-485, Application to Register Permanent Residence or Adjust Status, and you did not previously receive a notice that you were considered for SIJ deferred action; or
- To request a subsequent period of SIJ deferred action.

General Instructions

We provide free forms through the USCIS website. To view, print, or complete our forms, you should use the latest version of Adobe Reader, which you can download for free at <https://get.adobe.com/reader>. If you do not have internet access, you may call the USCIS Contact Center and ask that we mail a form to you.

Signature. You must properly complete your form. USCIS will not accept a stamped or typewritten name in place of any signature on this form. If you are under 14 years of age, your parent or legal guardian may sign the form on your behalf. A legal guardian may also sign for a mentally incompetent person. If your form is not signed, or if the signature is not valid, we will reject your form. See 8 CFR 103.2(a)(7)(ii)(A). If USCIS accepts a request for adjudication and determines that it has a deficient signature, USCIS will not grant the request.

Filing Fee. See USCIS Form G-1055, Fee Schedule, available at www.uscis.gov/g-1055, for all information on filing fees.

Biometric Services Appointment. USCIS may require **you to** appear for an interview or provide biometrics (fingerprints, photograph, and/or signature) at any time to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), **before making a decision on your request.** If **we determine** an appointment is necessary, **we will send you an appointment notice with the date, time, and location of your appointment.** If you are currently overseas, **your notice will** instruct you to contact a U.S. Embassy, U.S. Consulate, or USCIS office outside the United States to **schedule** an appointment.

At your biometrics appointment, you must sign an oath reaffirming that:

1. You provided or authorized all information in your request and/or form;
2. You reviewed and understood all the information contained in, and submitted with, your request and/or form; and
3. All **of** this information was complete, true, and correct at the time of filing.

If you **do not** attend your biometrics services appointment, **we may not grant** your request.

How To **Complete** Form G-325A

1. Type or print legibly in black ink.
2. If you need extra space to complete any item within this request, use the space provided in **Part 8. Additional Information** or attach a separate sheet of paper. Type or print your name and Alien Registration Number (A-Number) (if any) at the top of each sheet; indicate the **Page Number, Part Number, and Item Number** to which your answer refers; and sign and date each sheet.
3. 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, “**My current annual income is,**” type or print “None” unless otherwise directed.

Part 1. Information About You

1. **Item Number 3. Current Mailing Address (Safe Address, if applicable).** Provide the address where you would like to receive written correspondence regarding their request.

If you have a pending or approved petition or application for Violence Against Women Act (VAWA) benefits, as a human trafficking victim (T nonimmigrant), or as a victim of qualifying criminal activity (U nonimmigrant), and do not feel safe receiving mail about this request at your physical address, provide a **safe mailing address in this field.** You may provide a post office box (PO Box) or the address of a friend, your attorney, a community-based organization that is helping you, or any other address where you can safely and timely receive mail.

2. **Item Number 5. Gender.** Indicate how you identify. Based on your selection, a gender of “M” (male), “F” (female), or “X” (another gender identity) will be reflected on your secure documents if your request is granted.
3. **Item Number 6. USCIS Online Account Number** (if any). You will only have a USCIS Online Account Number (OAN) if you previously filed a form that has a receipt number that begins with IOE. If you filed the form online, you can find their OAN in your account profile. If you mailed us the form, you can find their OAN at the top of the Account Access Notice we sent you. If you do not have a receipt number that begins with IOE, you do not have an OAN. The OAN is not the same as an A-Number.
4. **Item Number 7. Alien Registration Number (A-Number)** (if any). Provide your A-Number. We use your A-Number to identify your immigration records. It begins with an “A” and can be found on correspondence you have received from DHS or USCIS. If you do not have an A-Number, type or print “N/A.”
5. **Item Number 10. Country of Birth.** Use the current name of the country. Do not use historical, ethnic, provincial, or other local names.

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6. **Item Number 11. Country of Citizenship or Nationality.** Provide the name of the country where you are a citizen and/or national. This is not necessarily the country where you were born. If you do not have citizenship in any country, type or print “Stateless” and provide an explanation in the brief statement requesting deferred action.
 7. **Item Number 13.a. - 13.d. Your Most Recent Entry into the United States.** List the date and location of your most recent entry into the United States, as well as status upon entry and expiration date. For example: H-2 temporary worker, H-1B temporary worker, parole, etc. If you entered without inspection, write “No Status” in the “Immigration Status at the time of Entry” field and “None” in the “Date Status Expires” field.
 8. **Item Numbers 14.a. – 14.b. Form I-94, Arrival-Departure Record** (if any). If U.S. Customs and Border Protection (CBP) or USCIS issued you a Form I-94, Arrival/Departure Record, provide your Form I-94 number and date that your period of stay authorized expires or expired (as shown on their Form I-94). The Form I-94 number also is known as the Departure Number on some versions of Form I-94. You should provide a copy of your Form I-94 with your deferred action request submission.

Part 2. Deferred Action Request

1. **Request Type.** Select whether this is an “Initial” or “Subsequent” request for deferred action. Only one selection may be made.
2. **Filing Type for Your Deferred Action Request.** Select the type under which you are filing your deferred action request. You must submit evidence to demonstrate that you warrant deferred action as a matter of discretion. For more information, please see: www.uscis.gov/g-325a.

NOTE: You may select more than one filing type. For example, if you are a special immigrant juvenile and believe you are stateless, then you may select each of the boxes corresponding to those filing types. If you select more than one filing type, you should provide a brief statement and supportive evidence for each filing type selected.

- A. *Labor Investigation Based (LIB DA):* You must check this box and submit any evidence to demonstrate that you warrant deferred action as a matter of discretion. You must also provide a Statement of Interest from the labor agency addressed to DHS.
- B. *Special Immigrant Juvenile (SIJ DA):* You must check this box and submit evidence that you were approved for SIJ classification, and, if you are requesting a subsequent period of deferred action, evidence of your prior grant of SIJ deferred action (for example, a copy of a Form I-797, Notice of Action, for Form I-360, Petition for Amerasian, Widow(er), or Special Immigrant). You must also submit any evidence to demonstrate that you warrant deferred action as a matter of discretion.
- C. *Spouse, Widow(er), Parent, Son, or Daughter of Active Duty Service Member of U.S. Armed Forces or Individual in the Selected Reserve of the Ready Reserve (MIL DA):* Select this box only if you are applying as a spouse, widow(er), parent, son, or daughter of an individual who is currently serving on active duty in the U.S. Armed Forces. You must check this box and submit any evidence to demonstrate that you warrant deferred action as a matter of discretion. You must also demonstrate your relationship with the serviceperson, and evidence of their service.
- D. *Spouse, Widow(er), Parent, Son, or Daughter of Individual (Whether Living or Deceased) who Previously Served on Active Duty or in the Selected Reserve of the Ready Reserve (and was not Dishonorably Discharged) (MIL DA):* Select this box only if you are applying as a spouse, widow(er), parent, son, or daughter of an individual (whether living or deceased) who previously served in the U.S. Armed Forces or Selected Reserve of the Ready Reserve and honorably discharged. You must check this box and submit any evidence to demonstrate that you warrant deferred action as a matter of discretion. You must also demonstrate your relationship with the serviceperson, and evidence of their service.
- E. *Medical or Humanitarian:* You must check this box and submit any evidence to demonstrate that you warrant deferred action as a matter of discretion, including the medical or humanitarian basis for the request.
- F. *Statelessness:* You must check this box and submit any evidence to demonstrate that you are stateless (if available) and demonstrate that you warrant deferred action as a matter of discretion.

G. Government Referral (Other than a Labor Agency): You must check this box and submit any evidence to demonstrate that you warrant deferred action as a matter of discretion. You must also provide a statement from the supporting government agency addressed to DHS supporting the request for deferred action.

H. Other: You must check this box and submit any evidence to demonstrate that you warrant deferred action as a matter of discretion. This also includes deferred action supported by Local, State, or Federal Governments.

3. Supporting Statement. Provide a brief statement as to why you believe your request for deferred action should be considered and why you believe you warrant deferred action as a matter of discretion. If extra space is needed for the explanation, use the space provided in **Part 8. Additional Information.**

Part 3. Employment Authorization

1. Employment Authorization. If you are also requesting employment authorization upon a grant of deferred action, select “Yes.” If your deferred action request is not granted, the request for employment authorization would also not be granted.

2. Economic Necessity. You must establish economic necessity for employment. In the spaces provided, indicate your current annual income, current annual expenses, and the total current value of your assets. If extra space is needed for the explanation of economic need, use the space provided in **Part 8. Additional Information.**

NOTE: If you are applying for employment authorization based on SIJ DA, you do not need to provide evidence of economic necessity.

Supporting evidence is not required, but USCIS will accept and review any documentation submitted. You do not need to include other household members’ financial information to establish economic necessity.

NOTE: You are also required to provide the applicable filing fee when requesting employment authorization, with the exception of those requesting employment authorization based on a grant of SIJ deferred action. A request for employment authorization for those with SIJ deferred action is fee exempt. Requesting employment authorization upon a grant of deferred action using the Form G-325A is an alternative to submitting a separate Form I-765, Application for Employment Authorization, under the (c)(14) employment authorization category and subject to the General Filing fee category. If you would like to submit a fee waiver request for the employment authorization, you may file Form I-912, Request for Fee Waiver, with this application. Instructions are available at: www.uscis.gov/i-912. Failure to submit the appropriate fee or a fee waiver request could result in USCIS denying your request for employment authorization.

Part 4. Social Security Card

If you select “Yes” in **Part 3. Employment Authorization, Item Number 1.**, you must complete **Item Numbers 1. – 3.** You must have a Social Security Number (SSN) properly assigned in your name to work in the United States. However, you are not required to request a social security card using this request. If you want a Social Security Card, follow the instructions below.

NOTE: If your deferred action and employment authorization are not granted through this request, you will not receive a social security card through this process.

Item Numbers 1. – 3. Questions Regarding Social Security Number (SSN). If you want the Social Security Administration (SSA) to issue you an original or replacement Social Security card, then answer “Yes” to both **Item Numbers 1. and 3. in Part 4.**, which gives your consent for USCIS to provide your information to the SSA. You must also provide your parents’ family and given names at birth, even if the parent is now deceased, in **Part 1., Item Numbers 15. and 21.** SSA will use **Part 1., Item Numbers 15. and 21.** in issuing you a Social Security card.

If you want a replacement card, you must enter the SSN from your card in **Part 4., Item Number 2.** If you provide your Consent for Disclosure in **Part 4., Item Number 3.**, then if USCIS grants your deferred action request, we will provide information from your request and USCIS systems to the SSA. The SSA may assign you an SSN and issue you an original or replacement Social Security card.

*NOTE: If you are unable to complete any of the questions in **Part 1**, SSA may not be able to process your SSN and Social Security card request and you will need to contact your local Social Security office. In addition, if you select “Another Gender Identity” as your gender in **Part 1**, see www.ssa.gov/ssnvisa/ebe.html for additional information.*

If you have not received your Social Security Card within 14 days after you receive your EAD, please contact your local Social Security office. To locate a Social Security office, you can use the Social Security Office Locator available on the SSA website at <https://secure.ssa.gov/ICON/main.jsp>.

If your employer uses E-Verify to confirm new employees’ eligibility to legally work in the United States, the information you provide on Form I-9, Employment Eligibility Verification, will be compared to data in SSA and DHS databases. Employees must have an SSN in order for E-Verify to confirm their eligibility to legally work in the United States.

NOTE: Based on existing confidentiality provisions (see 8 U.S.C. 1160(b)(6), 1255a(c)(5), and Section (c)(5) of Pub. L. 106-553), USCIS will not share information with SSA if an applicant files Form I-765 based on the legalization program in Sections 210 or 245A of the INA or the LIFE Act (Pub. L. 106-553), as amended by the LIFE Act Amendments (Pub. L. 106-544). Applicants covered by these confidentiality provisions may not waive them and should contact SSA after the approval of their Form I-765.

For information about SSA’s privacy policies, see **SSA Privacy Act Statement** below.

SSA Privacy Act Statement

Sections 205(c) and 702 of the Social Security Act, as amended, allow SSA to collect this information, which SSA will use to assign a SSN and issue a Social Security card. Providing this information is voluntary, but not providing all or part of the information may prevent SSA from assigning you an SSN and issuing a Social Security card. As law permits, SSA may use and share the information you submit, including with other Federal agencies, contractors, employers, and others, as outlined in the routine uses within System of Records Notice (SORN) 60-0058, available at www.ssa.gov/privacy. The information you submit may also be used in computer matching programs to establish or verify eligibility for Federal benefit programs and to recoup debts under these programs.

Part 5. Requestor’s Contact Information, Certification, and Signature. You must sign and date your request and, if applicable, provide your daytime telephone number, mobile telephone number, and email address. The signature of a parent or legal guardian, if applicable, is acceptable. A stamped or typewritten name in place of a signature is not acceptable.

Part 6. Interpreter’s Contact Information, Certification, and Signature. If you used anyone as an interpreter to read the Instructions and questions on this request to you in a language in which you are fluent, the interpreter must fill out this section and sign and date the request.

Part 7. Contact Information, Certification, and Signature of the Person Preparing this Request, if Other Than the Requestor. The person who completed your request, if other than the requestor, must sign this section. If the same individual acted as your interpreter and your preparer, then that person should complete both **Part 6**. and **Part 7**. A stamped or typewritten name in place of a signature is not acceptable.

Where To File?

Please see our website at www.uscis.gov/g-325a for the most current information about where to file this **form**.

USCIS Forms and Information

To ensure you are using the latest version of this form, visit the USCIS website at www.uscis.gov.

Penalties

If you knowingly and willfully falsify or conceal a material fact or submit a false document with your Form G-325A, we may **not grant** your request for deferred action and any other immigration benefit. In addition, you will face severe penalties provided by law and may be subject to criminal prosecution.

DHS Privacy Notice

AUTHORITIES: The information requested on this **request**, and the associated evidence, is collected pursuant to Section 103 of the Immigration and Nationality Act, 8 U.S.C. 1103(a)(1).

PURPOSE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result **in your request not being granted**.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result **in your request not being granted**.

ROUTINE USES: DHS may share the information you provide on this **request** with other Federal, state, local, and foreign government agencies and other authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS/ICE/CBP-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-007 - Benefits Information System] and the published privacy impact assessment [DHS/USCIS/PIA-061 Benefit Request Intake Process], which can be found at www.dhs.gov/privacy. DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act

USCIS may not conduct or sponsor an information collection, and **you are** not required to respond to a collection of information, unless it displays a currently valid **Office of Management and Budget (OMB)** control number. The public reporting burden for this collection of information is estimated at **2.39 hours per** response, including the time for reviewing instructions, **gathering the required documentation and information, completing the form, preparing statements, attaching necessary documentation, and submitting the form**. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and

Immigration Services, Office of Policy and Strategy, Regulatory Coordination Division, 5900 Capital Gateway Drive,
Mail Stop #2140, Camp Springs, MD 20588-0009; OMB No. 1615-0008. **Do not mail your completed Form G-325A to
this address.**

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