# **Sponsor Assessment (Form S-5)**

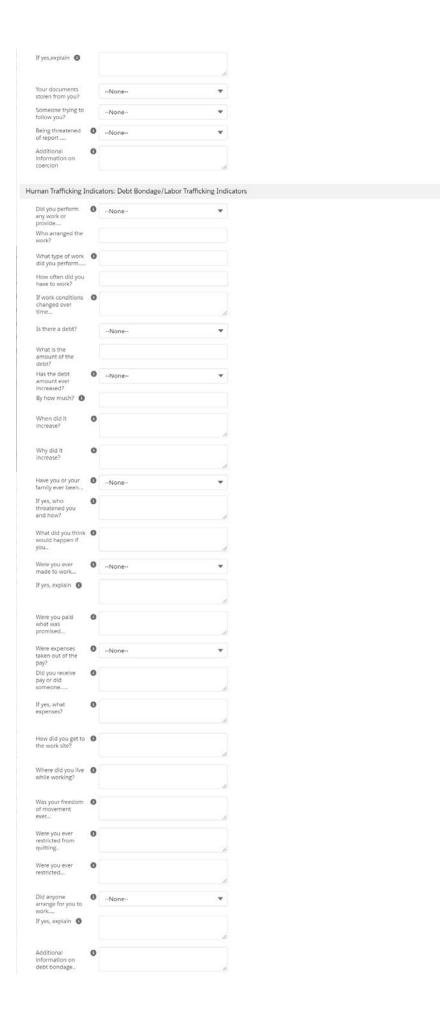
**Data Entry** 





Has he/she ever been denled	0	None	•			
If yes, then why did ORR deny his/her	0					
Is the child still residing with him/her	0	None	*			
If no, explain 0						
What contact does he/she still have	0		4			
Did he/she	0	None	*			
undergo a home study? If yes, why?						
Did the child	0	******				
received Post Release	٠	None	•			
If yes, explain 0						
Is the child enrolled in or	0	None	*			
attending What is the child's	0					
current legal status. Does the child	0		ä			
have an upcoming Court						
Did you attend an LOPC presentation?	0	None	*			
Describe the UAC's current safety	0					
2 55 5	_					
Sponsor's legal status verified with	0	None	•			
Proof of Relationshi	р					
For CAT 3 sponsor, explain how	0					
Proof of Address						
Smarty Streets Verified				Length of Stay at Current Address		
Google Earth Verified				Google Maps Verified		
Additional proof of address information	0		£			
Proof of Financial St	abili	ty				
Does the sponsor have a job?	0	None	•			
Name of Employer						
Type of Employment						
Location of Employment						
Length of Time at present employer						
Income						
Work Hours/Schedule	0					
Does the sponsor have financial needs?		None	*			
If yes, explain 0						
Sponsor Care Plan						
What school will the UAC attend?						
Does the sponsor know the school	0	None	*			
How will the UAC be transported	0					
to Are you aware of	0					
any medical						

What are your plans to address	0						
re you aware of ny mental health	0						
				-6			
What are your plans to address the UAC's	0			A			
Does the minor nave any criminal	0						
xplain how you lan to supervise	0						
				h			
Did the sponsor watch the Sponsor	3.	-None		•			
Video? Did the sponsor read the Sponsor.	0	-None		•			
	e of U	AC'S Journey and	Annrehension				
		a sourney and i	- pp. c. ret islott				
escribe the UAC's ay to day life	0			li.			
Do you know why	0						
he UAC decided				.6			
lid the potential ponsor nention	0	-None		*			
Did the potential ponsor mention	0	-None		*			
When did the UAC eave his/her ome	0			m			
How long did the trip take?							
If there is a debt	0						
Who naid for the				10			
/ho paid for the AC's trip to the .S.?							
ow did the UAC et to the U.S.?				1			
Where was the	0						
JAC planning on iving				10			
Do you know if the UAC has ever	0	-None		*			
been If yes, when? <b>①</b>							
				16			
an Trafficking Ir	ndicate	ors of Sponsor: Sp	onsor's Journey to	o the U.S	š.		
hen and why did ou first decide	0						
Vho							
lanned/organized our journey?				A.			
Please explain the costs of your	0						
Did you experience any	0						
challenges				h			
Where did you first live in the U.S	0						
If you have traveled back to	0						
your				16			
dditional nformation on ponsor's	0			ĥ			
nan Trafficking Ir	ndicate	ors of the Sponsor	: Coercion Indicat	tors			
Has anyone ever	0	-None		*			
threatened you or your If yes, explain							
- Jan - Special A				11			
cion Indicators:	Have	you ever experien	ced the following				
leld against your	1	-None		*			
will?							

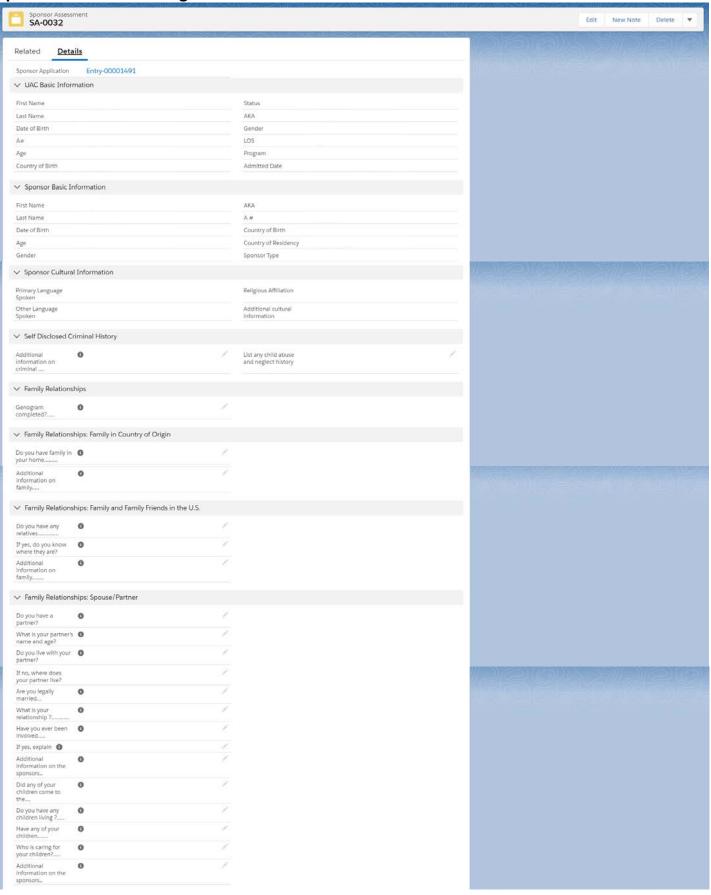




THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to document the suitability assessment of a potential sponsor to provide for the safety and well-being of a UAC. Public reporting burden for this collection of information is estimated to average 1.0 hour 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, and Trafficking Victims Protection Reauthorization Act, 8 U.S.C. 1232). 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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**Sponsor Assessment Page** 



→ Family Relationships: Children		
How do you discipline your children	×	
Have you or your spouse/partner	7	
If yes, explain	Z.	
Have you ever been involved in a child	7	
If yes, explain ①	2	
Do you provide court  ordered financial	7	
If yes, explain	7	
Have you ever had a 0	/	
child removed If yes, why? (Obtain	7	
documentation)  Have any of your household	7	
members,  If yes, why? (Obtain	/	
documentation)		
→ Household Composition		الهالهالهالهالهالها
Describe your home		
Describe where the minor will sleep		
Do you expect the UAC to contribute	8	
If yes, explain 🚯	/	
Does anyone in the household	<i>e</i>	
If yes, explain ①	2	
Do any of the occupants have criminal	<i>*</i>	
If yes, explain	/	
∨ Previous Sponsorships: Sponsor		
Have you ever attempted	·	
Have you ever attempted to sponsor	X	
If yes, then why did you withdraw?	/	/
Have you ever been denied sponsorship	×.	
If yes, then why did ORR deny your	F	
Is the child still residing with you?	J	
If no, explain 0	7	
What contact do you 6 still have with	/	
Did you undergo a home study?		
If yes, why?	£	
Did the child received  Post Release	/	
If yes, explain ①	×	
Is the child enrolled  in or attending	/	
What is the child's current legal status	/	
Does the child have an upcoming Court	· ·	
Did you attend an LOPC presentation?	2	
Describe the UAC's current safety	7	
✓ Previous Sponsorships: Household Members & A	Alternate Adult Caregiver	
Have any of your household	1	
members Did he/she ever		
attempt to sponsor  If yes, then why did		
he/she withdraw?  Has he/she ever been	×	
denied If yes, then why did		
ORR deny his/her  Is the child still	2	
residing with him/her  If no, explain	7	
What contact does	7	
he/she still have  Did he/she undergo a		
home study?		
If yes, why?	· C	

Did the child received  Post Release			93	
If yes, explain	/			
Is the child enrolled In or attending	7			
What is the child's	1			
current legal status				
Does the child have  an upcoming Court				
Did you attend an LOPC presentation?	/			
Describe the UAC's				
current safety  Sponsor's legal status	-			
verified with				
→ Proof of Immigration Status				
Sponsor Legal Status				
✓ Proof of Relationship			_	
		Make needingston rection		
Relationship to UAC		Sponsor Category	1075	
For CAT 3 sponsor, explain how		Relationship Verified 🗸	///	
→ Proof of Address				
Address		Home Phone		
City		Alternate Phone		
		Number		
State		Email	100	
Zip Code		Length of Stay at Current Address		
Smarty Streets Verified	1	Google Maps Verified	/	
Google Earth Verified	/			
Additional proof of address information	1			
- Pool of Fire and Stability				
✓ Proof of Financial Stability				
Does the sponsor have a job?				
Name of Employer				
Type of Employment				
Location of Employment	6			
Length of Time at present employer	2		1	
Income	/			
Work Hours/Schedule	/			
Does the sponsor	1			
have financial needs?  If yes, explain	/			
✓ Sponsor Care Plan				
What school will the UAC attend?	/			
Does the sponsor know the school				
How will the UAC be transported to				
Are you aware of any	7			
medical What are your plans	/			
to address			1000	
Are you aware of any  mental health			1/4	
What are your plans to address the UAC's				
Does the minor have  any criminal	/			
Explain how you plan to supervise	1			
Did the sponsor	/			
watch the Sponsor Video?				
Did the sponsor read  the Sponsor				
✓ Sponsor's Knowledge of UAC'S Journey and	d Apprehension			
Describe the UAC's	/			
day to day life	-			
Do you know why the  UAC decided				
Did the potential sponsor mention				
Did the potential  sponsor mention	1			

When did the UAC	0	/
leave his/her home How long did the trip		/
take? If there is a debt still		
owed Who paid for the		7
UAC's trip to the U.S. How did the UAC get		
to the U.S.?		
Where was the UAC planning on living	0	
Do you know if the UAC has ever been	0	1
If yes, when?		/
✓ Human Traffick	ing Indicators of Sponsor: Spo	onsor's Journey to the U.S.
When and why did	0	/
you first decide Who		7
planned/organized your journey?		
Please explain the	0	7
costs of your Did you experience	0	1
any challenges Where did you first	0	
live in the U.S		
If you have traveled back to your		
Additional information on	0	/
sponsor's		
✓ Human Traffick	ing Indicators of the Sponsor:	Coercion Indicators
Has anyone ever threatened you or	0	1
your.  If yes, explain		
✓ Coercion Indica	ators: Have you ever experienc	ed the following:
Held against your will?		/
If yes,explain		Z.
If yes,explain		
Your documents stolen from you?		
Someone trying to follow you?		
Being threatened of report	0	1
Additional	0	8
information on coercion		
✓ Human Traffick	ing Indicators: Debt Bondage	/Labor Trafficking Indicators
Dld you perform any		AND THE PROPERTY OF THE PROPER
work or provide	- 5	
Who arranged the work?		
What type of work did you perform	0	
How often did you have to work?		7
If work conditions	0	7
changed over time Is there a debt?		- /
What is the amount of the debt?		/
Has the debt amount	0	7
ever increased?  By how much?		
When did it increase	0	7
Why did it increase?		
Have you or your family ever been	0	/
If yes, who threatened you and	0	7
	_	
how?	0	
how? What did you think would happen if you.		
how? What did you think would happen if you. Were you ever made		1
how? What did you think would happen if you. Were you ever made to work If yes, explain	0	7
how?  What did you think would happen if you.  Were you ever made to work  If yes, explain   Were you pald what	0	
how? What did you think	0	7

If yes, what	0		//
expenses?			
the work site?	0		
Where did you live while working?	•		
Was your freedom of movement ever	•		
Were you ever restricted from quitting	0		
Were you ever restricted	•		
Did anyone arrange for you to work	•		
If yes, explain	7		
Additional information on debt bondage	0 /		
✓ Human Traffickir	ng Indicators of the Sponsor: TVPRA		
Based on the sponsor assessment	0 /		
If yes, provide a short summary	0 /		
Referred to OTIP?	/		
Date referral made to OTIP?	0		
Based on the sponsor assessment	0		
If yes, provide a short summary	0		
∨ Fraud			
Have you ever been contacted and asked	•		
If yes, explain 0	/		
Have you ever been contacted and asked	0		
If yes, explain 🕚	7		
✓ Additional Information  Additional Information	mation		
Use this section to	0 /		
report any	-		
✓ Case Manager's	Assessment of Sponsor and Concluding Remarks		
Use this section to provide a thorough	0 /		
✓ Certification			
I confirm that I have completed all	0		
Printed Name	/		
Title	/		
Created By		Last Modified By	
	78 610 611		

#### OMB 0970-0553 [valid through MM/DD/YYYY]

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to document the suitability assessment of a potential sponsor to provide for the safety and well-being of a UAC. Public reporting burden for this collection of information is estimated to average 1.0 hour 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, and Trafficking Victims Protection Reauthorization Act, 8 U.S.C. 1232). 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 UACPolicy@acf.hhs.gov.

UAC-S-5 [Rev. MM/DD/YYYY]



#### OMB 0970-0553 [valid through MM/DD/YYYY]

# Administration for Children & Families Office of Refugee Resettlement

# **Sponsor Assessment**

UAC BASIC	INFORMATION
First Name:	Status:
Last Name:	AKA:
Date of Birth:	Gender:
A#:	Length of Stay:
Age:	Current Program:
Country of Birth:	Admitted Date:
SPONSOR BAS	SIC INFORMATION
Use this section to document the sponsor's linguistic and cultural backgroun children.	d, including cultural, social, and communal norms and practices for the care of
First Name:	AKA:
Last Name:	A #:
Date of Birth:	Country of Birth:
Age:	Country of Residency:
Gender:	Primary Sponsor:   ✓ Yes   No
	Relationship to UAC:
SPONSOR CULTI	URAL INFORMATION
Use this section to document the sponsor's familial and other significant relaused as a tool to answer these questions and is required for distant relative	ationships in country of origin and in the U.S. A genogram (family tree) may be Cat 3 potential sponsors.
Primary Language Spoken:	Religious Affiliation:
Other Languages Spoken:	
Additional cultural information:	

#### **FAMILY RELATIONSHIPS**

Use this section to document the sponsor's familial and other significant relationships in country of origin and in the U.S. A genogram (family tree) may be used as a tool to answer these questions and is required for distant relative Cat 3 potential sponsors.

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Genogram completed? (Required for dis	tant relative Cat 3 sponsors)	☐ Yes ☐ No		
Family in Country of Origin				
Do you have family in your home countr Additional information on family in cour		☐ Yes ☐ No		
Family and Family Friends in the U.S.				
Do you have family or family friend in th	e U.S.? (If yes, list below)	✓ Yes □ No		
Name Ag	ze DOB	Home Address	Gend	ler Relationship to Sponsor
Name N				
Do you have any relatives who are also i	n ORR care?	☐ Yes ☐ No	,	'
If yes, do you know where they are		ok		
Additional information on family and far		O.K		
Spouse/Partner				
Do you have a partner? (If yes, answer b	1.5	☐ Yes ☑ No		
What is your partner's name and a	ge?			
Do you live with your partner?	_	☐ Yes 🗹 No		
if no, where does your partner live				
Are you legally married or is the re cohabitation?	lationship a partnership or			
What is your relationship like with	your spouse?			
Have you ever been involved in a Dissolu	ution of Marriage case?	☐ Yes ☐ No		
If yes, explain:				
Additional information on the sponsor's	partner:			
Children				
Do you have any children (if yes, list belo	ow)			
Name	Age DOB	Gender	Current Location	Name of Mother/Father
Did any of your children come to the U.S.	6. with you? (If not born in	☐ Yes ☐ No		
Do you have any children living in your h	nome country?	☐ Yes ☐ No		
Have any of your children ever been in C	ORR care?	☐ Yes ☐ No		
Who is caring for your children?				
Additional information on the sponsor's	children:			

Dependent on

**Employed** 

**Background Checks** 

How do you discipline your children and how do you plan to discipline the minor?	
Have you or your spouse/partner ever had Child Protective Services involvement?	☐ Yes ☐ No
If yes, explain:	
Have you ever been involved in a child support case?	☐ Yes ☐ No
If yes, explain:	
Do you provide court ordered financial support to your children?	☐ Yes ☐ No
If yes, explain:	
Have you ever had a child removed from your custody?	☐ Yes ☐ No
If yes, why? (Obtain documentation)	
Have any of your household members ever had a child removed from his/her custody?	☐ Yes ☐ No
If yes, why? (Obtain documentation)	

### HOUSEHOLD COMPOSITION

Use this section to document the sponsor's household composition, including the sponsor's knowledge of any household members who may have a serious, contagious disease; or criminal convictions or charges.

Relationship to

Phone

DOB Gender

Does anyone else live in your home? (If yes, list below)

Describe your home:  Describe where the minor will sleep:  Do you expect the UAC to contribute to your household?					Number	Sponsor	Sponsor income	
Describe where the minor will sleep:  Do you expect the UAC to contribute to your household?								
Do you expect the UAC to contribute to your household?	Describe your home:							
If yes, explain:  Does any of the occupants have criminal convictions or charges, Other than minor traffic violations?	Describe where the mino	r will sle	ep:					
If yes, explain:  Do any of the occupants have criminal convictions or charges, □ Yes □ No other than minor traffic violations?	STOLENS SELECTION OF THE PROPERTY OF	o contrib	ute to your h	ousehold?	□ Ye	es 🗆 No		
other than minor traffic violations?	•	ehold ha	ve a serious,	contagious o	disease? 🗆 Ye	es 🗆 No		
if yes, explain:				ons or charg	ges, 🗆 Ye	es 🗆 No		
	If yes, explain:							

### PREVIOUS SPONSORSHIP

Use this section to document if the sponsor and/or the sponsor's household members have ever sponsored or attempted to sponsor another child. If the sponsor and/or the sponsor's household members did sponsor or attempt to sponsor a child, document the status of the child's safety and well-being.

Sponsor

## Office of Refugee Resettlement

Have you ever attempted to (If yes, list below and answer				ras in ORF	R care?	□ No			
Name	A No.	D	ОВ	Gender	Sponsor's Relationship to UAC	Current Location	ORR Release Decision	Date o Dischar	
Have you ever attempted to withdraw your application?	sponsor a ch	ild from	ORR, but o	decided to	o □ Ye	s 🗆 No			
if yes, then why did you	withdraw?								
Have you ever been denied s	ponsorship b	y ORR?			☐ Ye	s 🗆 No			
If yes, then why did OR			hip applica	ation?					
Is the child still residing with	1610				□Ye	s 🗆 No			
If no, explain:									
What contact do you still have	ve with the cl	nild?							
Did you undergo a home stu					□Ye	s 🗆 No			
If yes, why?	-i.								
Did the child receive Post Re	lease Service	•?			ΠVe	s 🗆 No			
If yes, explain	icase service				2.10	3 L 110			
Is the child enrolled in or att	ending schoo	17			ΠVe	s □ No			
What is the child's current le	_					5 L 140			
Does the child have an upcor	•	aaring? I	fea what	is the dat	• ?				
Did you attend an LOPC pres	200	an mg.	i so, wildt	is the dat		s 🗆 No			
Describe the UAC's currents		in de				s 🗆 NO			
to the sponsor:	arety and we	ii-being	since relea	ise from C	JKK Care				
Household Members & Alter	nate Adult Ca	regiver							
Have any of your household (If yes, list below and answe				r another	child that is/was	in ORR care?	☐ Yes ☐ No		
LIAC	Name				Sponsor's		ORR	Date of	
HHM / AACG OAC Name		A No.	DOB	Gende r	Relationshi p to UAC	Current Location	Release Decision	Discharg e	Discharge Program Name
Did he/she ever attempted to withdraw your application	1?		n ORR, bu	t decided	☐ Yes ☐ No				
If yes, then why did he, Has he/she ever been denied			?		☐ Yes ☐ No				

if yes, then why did ORR deny his/her sponsorship application?

is the child still residing with him/her?		Yes □ No			
If no, explain:					
What contact does he/she still have with the					
Did he/she undergo a home study?		Yes 🗆 No			
If yes, why?					
Did the child receive Post Release Services?		Yes 🗆 No			
If yes, explain					
Is the child enrolled in or attending school?		Yes □ No			
What is the child's current legal status?					
Does the child have an upcoming Court headate?	aring? If so, what is the				
Did he/she attend an LOPC presentation?		Yes 🗆 No			
Describe the UAC's current safety and well- ORR care to the sponsor:	being since release from				
Use this section to document information a was verified. If the sponsor's Identity was u	and documents provided by the s		The state of the s	and the second s	Charles and a series of the se
	and documents provided by the s	consor to establish the explanation under the	"Addition	al information on identity	Charles and a series of the se
was verified. If the sponsor's identity was u Sponsor	and documents provided by the s mable to be verified, provide an o	oonsor to establish the	"Addition	and the second s	Charles and a series of the se
was verified. If the sponsor's identity was u Sponsor List proof of identity documents provided:	and documents provided by the s mable to be verified, provide an o	consor to establish the explanation under the Expiration Date (if	"Addition	al information on identity	'section below.
was verified. If the sponsor's Identity was u Sponsor List proof of Identity documents provided: Identity Documen	and documents provided by the s mable to be verified, provide an o	consor to establish the explanation under the Expiration Date (if	"Addition	al Information on Identity' cument Verified by overnment Agency	'section below.  Picture ID
was verified. If the sponsor's Identity was u Sponsor Ust proof of Identity documents provided: Identity Documen Household Members	and documents provided by the s mable to be verified, provide an o	consor to establish the explanation under the Expiration Date (if	"Addition	al Information on Identity' cument Verified by overnment Agency	'section below.  Picture ID
was verified. If the sponsor's Identity was u Sponsor Ust proof of Identity documents provided: Identity Documen Household Members	and documents provided by the s mable to be verified, provide an o	consor to establish the explanation under the Expiration Date (if	"Addition	al Information on Identity' cument Verified by overnment Agency	section below.  Picture ID
was verified. If the sponsor's identity was u Sponsor List proof of identity documents provided:	and documents provided by the s mable to be verified, provide an o	consor to establish the explanation under the Expiration Date (if	"Addition  Do Go	al Information on Identity' cument Verified by overnment Agency	'section below.  Picture ID  ☐ Yes ☐ No
was verified. If the sponsor's identity was u Sponsor Ust proof of identity documents provided: Identity Documen Household Members Ust proof of identity documents provided:	and documents provided by the s inable to be verified, provide an o t Type	explanation under the explanation under the Expiration Date (if applicable)	"Addition  Do Go	al Information on Identity	ection below.  Picture ID  Yes □ No
was verified. If the sponsor's Identity was u Sponsor List proof of Identity documents provided: Identity Documen Household Members List proof of Identity documents provided: Household Member Name	and documents provided by the s inable to be verified, provide an o t Type	explanation under the explanation under the Expiration Date (if applicable)	"Addition  Do Go	al Information on Identity	Picture ID  ☐ Yes ☐ No  Picture ID
was verified. If the sponsor's Identity was u Sponsor List proof of Identity documents provided: Identity Documen Household Members List proof of Identity documents provided: Household Member Name	and documents provided by the s inable to be verified, provide an o t Type	explanation under the explanation under the Expiration Date (if applicable)	"Addition  Do Go	al Information on Identity	Picture ID  ☐ Yes ☐ No  Picture ID
was verified. If the sponsor's Identity was u Sponsor List proof of Identity documents provided: Identity Documen Household Members List proof of Identity documents provided: Household Member Name	and documents provided by the s inable to be verified, provide an o t Type	explanation under the explanation under the Expiration Date (if applicable)	"Addition  Do Go	al Information on Identity	Picture ID  ☐ Yes ☐ No  Picture ID
Was verified. If the sponsor's identity was used to sponsor Ust proof of identity documents provided: Identity Documents Household Members Ust proof of identity documents provided: Household Member Name	and documents provided by the s inable to be verified, provide an o t Type	explanation under the explanation under the Expiration Date (if applicable)	Do Go	al Information on Identity	Picture ID  Yes No  Picture ID  Yes No

PROOF OF IMMIGRATION STATUS OR U.S. CITIZENSHIP							
Sponsor Legal Status:							
Sponsor's legal status verified with non-expir	ed document(s): ☐ Yes ☐ No						
List proof of immigration status or U.S. citize	ishin document(s) provided:						
	ionip accamoni(o, promaca:						
Proof of Immigration Document Type	Expiration Date (if applicable)	Date Document Issued (if applicable)	Verified by Government A	gency or Consulate			
			☐ Yes ☐ I	No			
	PROOF OF RE	LATIONSHIP					
Use this section to document information an relationship was verified. If the sponsor's rel related to or knows the UAC and/or the UAC	ationship to the UAC was unable to						
Sponsor's Relationship to UAC: Father		Sponsor Category:					
Sponsor's Relationship to UAC is Verified:	☐ Yes ☑ No						
List proof of relationship documents provide	d:						
		Date Document Issued	Varified by Government				
Relationship Document Type	Expiration Date (if applicable)	Date Document Issued (if applicable)	Verified by Government Agency or Consulate	Picture ID			
- The second of				Picture ID  ☐ Yes ☐ No			
Relationship Document Type  Explain how the sponsor is related to or known family:			Agency or Consulate	CONTRACTOR OF THE PARTY OF THE			
Explain how the sponsor is related to or know		(if applicable)	Agency or Consulate	CONTRACTOR OF THE PARTY OF THE			
Explain how the sponsor is related to or known family:  Use this section to document information and that the reported address is a residence, address information" section below.	PROOF OF d documents provided by the sponsor's address was unable	(if applicable)  ADDRESS sor to establish that the spo	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information and that the reported address is a residence, address information" section below.  What is your current address and contact information in the section below.	PROOF OF d documents provided by the sponsor's address was unable	(if applicable)  ADDRESS sor to establish that the spole to be verified, provide an o	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information an and that the reported address is a residence, address information" section below.  What is your current address and contact informations:	PROOF OF d documents provided by the sponsor's address was unable	(if applicable)  ADDRESS sor to establish that the spole to be verified, provide and	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information and that the reported address is a residence, address information" section below.  What is your current address and contact information:  Address:  City:	PROOF OF d documents provided by the sponsor's address was unable	ADDRESS sor to establish that the spole to be verified, provide and Home Phone: Alternate Phone:	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information and and that the reported address is a residence, address information" section below.  What is your current address and contact information:  Address:  City:  State:	PROOF OF d documents provided by the sponsor's address was unable	(if applicable)  ADDRESS sor to establish that the spole to be verified, provide and	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information and and that the reported address is a residence, address information" section below.  What is your current address and contact information and the contact information and contact information and contact information and contact information.	PROOF OF d documents provided by the spon If the sponsor's address was unable ormation? (enter below)	ADDRESS sor to establish that the spole to be verified, provide and Home Phone: Alternate Phone:	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information and and that the reported address is a residence, address information" section below.  What is your current address and contact information:  Address:  City:  State:	PROOF OF d documents provided by the spon If the sponsor's address was unable ormation? (enter below)	ADDRESS sor to establish that the spole to be verified, provide and Home Phone: Alternate Phone:	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information and and that the reported address is a residence, address information" section below.  What is your current address and contact information and the contact information and contact information and contact information and contact information.	PROOF OF d documents provided by the spon of the sponsor's address was unable to mation? (enter below)	ADDRESS sor to establish that the spo le to be verified, provide and Home Phone: Alternate Phone: Email:	Agency or Consulate  Yes No  Yes No	Yes No			
Explain how the sponsor is related to or known family:  Use this section to document information and and that the reported address is a residence, address information" section below.  What is your current address and contact information and the contact information address:  City:  State:  Zip Code:  How long have you lived at the current address.	PROOF OF dedocuments provided by the spon of the sponsor's address was unable to mation? (enter below)	ADDRESS sor to establish that the spo le to be verified, provide an of the spontage of the spo	Agency or Consulate  Yes No  No  No  No  No  No  No  No  No  No	Yes No			

List proof of address documents provided:						
Address Document Type			Date Do	Date Document Issued (if applicable)		
Additional proof of address information:						
Address History (Required for the past 5-years)						
Address history (Required for the past 3-years)						
Address	City	State	Zip Code	Date Range Resided at Address		
	PPOOF	OF STABILITY				
Discusses with the sponsor, his/her ability to support	12.00-2.00	-2-32-32-2-3	in their care			
AND THE REAL PROPERTY AND THE RESERVE OF THE PROPERTY OF THE P		e lor the millor while i	in their care.			
Does the sponsor have a job? (If yes, answer the follow questions)	wing □ Yes □ No					
Name of Employer:						
Location of Employment:						
Length of Time at present employer:						
Income:						
Work Hours/Schedule:						
Does the sponsor have financial needs?						
Ust proof of address documents provided:						
Proof of Stability Do	cument Type		Date Do	ocument Issued (if applicable)		
SPONSOR CARE PLAN						
Use this section to document that the sponsor's plan to care for the minor adequately addresses the care, supervision, safety, education, and resources required to meet the UAC's needs.						
Care Plan						
What school will the minor attend?						
Does the sponsor know the school enrollment process? ☐ Yes ☐ No						
How will the UAC be transported to and from school?						

Are you aware of any n	nedical con	ditions of the	UAC which	ı will need				
What are your pla the medical service child, also address	ces in your a	area. (If the U	AC is pregn	ant or with				
Are you aware of any n need treatment?	nental heal	th conditions	of the UAC	which will				
What are your pla								
Does the minor have a are aware of?	ny criminal	history or beh	navior issue	es that you				
Did the sponsor watch	the Sponso	or Video?			☐ Yes ☐ No			
Did the sponsor read th	40.00				☐ Yes ☐ No			
Safety Plan								
Explain how you plan t of the UAC:	o supervise	and ensure ti	he safety					
Supervision Plan								
Does the sponsor have family or friends nearby that will be helping in caring for the minor? (If yes, list the individual(s))								
Name	Age	DOB	Gender	Phone Number	Relationship to Sponsor	Employed	Dependent on Sponsor Income	Background Checks
Alternate Adult Caregio	ver Plan							
List the adult caregiver unavailable?		ssume respon	sibility for	the UAC if Spons	or becomes			
Nam e	Age	DOB	Gender	Phone Number	Relationship to Sponsor	Employed	Dependent on Sponsor Income	Background Checks
SELF-DISCLOSED CRIMINAL HISTORY								
Use this section to document the sponsor's self-disclosures of any criminal charges, sexual offenses or child abuse/neglect charges or arrests.								
Any criminal history? (if yes, list below)								
History of Incarceration or Detention								
	THE RESERVE OF THE PARTY OF THE							
Cri			Da		Conviction		Location	

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Additional information on criminal history:	
List any child abuse and neglect history:	

UAC JOURNEY AND APPREHENSION						
The state of the s	to live with this sponsor and to assess if the potential sponsor had a role in coordinating or nuch the potential sponsor knows about the UAC's journey, which should be compared against					
Describe the UAC's day to day life in home country:						
Do you know why the UAC decided to travel to the U.S. at this time?						
Did the potential sponsor mention any U.S. immigration policy or practice as a factor in the UAC's decision to travel to the U.S.?	□ Yes □ No					
Did the potential sponsor mention economic, job, or educational opportunities as a factor in the UAC's decision to travel to the U.S.?	☐ Yes ☐ No					
When did the UAC leave his/her home country (month, day, and year)?						
How long did the trip take?						
If there is a debt still owed for the UAC's journey, please explain						
Who paid for the UAC's trip to the U.S.?						
How did the UAC get to the U.S.?						
Where was the UAC planning on living in the U.S. and with whom?						
Do you know if the UAC has ever been to the U.S. before?	☐ Yes ☐ No					
If yes, when?						

### **HUMAN TRAFFICKING**

Use this section to document any trafficking concerns in the sponsor's country of origin and in the U.S. and to determine if additional services or referrals are needed. It should be explained to the sponsor that this information is not for immigration purposes, but to have a better understanding of his/her journey and any challenges they may have faced during this time.

#### Sponsor's Journey to the U.S. (if applicable)

Use this section to document information regarding the sponsor's journey from their country of origin will be gathered here.

When and why did you first decide to travel to the U.S.?

Who planned/organized your journey?

Please explain the costs of your journey, and any outstanding debt that needs

to be repaid:	
Did you experience any challenges, trauma, or abuse by family in home country?	☐ Yes ☐ No
Where did you first live in the U.S. and with whom?	
If you have traveled back to your country of origin since your arrival in the U.S., please explain	
Additional information on sponsor's journey to the U.S.:	
Coercion Indicators	
Use this section to assess for indicators of trafficking by force, fraud, or coercion U.S. This includes any pressure, threats, deception, or harm experienced by the	No. 10 10 10 10 10 10 10 10 10 10 10 10 10
Has anyone threaten you or your family?	☐ Yes ☐ No
If yes, explain:	
Have you ever experienced the following:	
Held against your will?	☐ Yes ☐ No
if yes, explain	
Your documents stolen from you?	☐ Yes ☐ No
Someone trying to follow you?	☐ Yes ☐ No
Being threatened of report to police or immigration?	☐ Yes ☐ No
Additional information on coercion indicators:	
Debt Bondage/Labor Trafficking Indicators	
Use this section to assess for indicators of debt bondage and labor trafficking in This includes any information regarding contracts, commitments, arrangements sponsor felt unsafe or scared in their working environment.	
Did you perform any work or provide any services?	☐ Yes ☐ No
Who arranged the work?	
What type of work did you perform and where?	
How often did you have to work?	
If work conditions changed over time, please explain?	
Is there a debt?	☐ Yes ☐ No
What is the amount of the debt?	
Has the debt amount ever increased?	☐ Yes ☐ No
By how much?	
When did it increase?	
Why did it increase?	
Have you or your family ever been threatened over payment or work for the journey?	☐ Yes ☐ No
If yes, who threatened you and how?	
What did you think would happen if you left the job or stopped working?	
Were you ever made to work or do anything you did not want to do?	□ Ves □ No

if yes, explain:						
Did you receive pay or did someone else keep the pay?						
Were you paid what was promised when you started working and were those promises kept?						
Were expenses taken out of the pay?	☐ Yes ☐ No					
If yes, what expenses?						
How did you get to the work site?						
Where did you live while working?						
Was your freedom of movement ever restricted or closely monitored?						
Were you ever restricted from quitting or leaving the work?						
Were you ever restricted from communicating or socializing with others, not allowed to speak for yourself, told what to say, or isolated from others?						
Did anyone arrange for you to work after arriving in the U.S.?	☐ Yes ☐ No					
If yes, explain:						
Additional information on debt bondage/labor trafficking indicators:						
TVPRA						
Use this section to document whether the case requires a TVPRA-mandated h relevant sources.	ome study based information gathered in this assessment and from any other					
Based on the sponsor assessment, does the sponsor present signs of being abused, maltreated, exploited, or trafficked?	☐ Yes ☐ No					
If yes, provide a short summary:						
Referred to OTIP?	☐ Yes ☐ No					
Date referral made to OTIP?						
Based on the sponsor assessment, does the sponsor clearly present a risk of abuse, maltreatment, exploitation, or trafficking to the UAC?	☐ Yes ☐ No					
If "Yes" is checked, the case must be referred for a mandatory home study.						
If yes, provide a short summary:						
FRAUD						
Use this section to document if any individual or entity has attempted to defraud the sponsor in relation to the ORR reunification process.						
Have you ever been contacted and asked to pay fees/money $\ \square$ Yes $\ \square$ No related to the release of the minor?						
If yes, explain:						
Have you ever been contacted and asked to pay fees/money						
nd Incodence Incode						

### ADDITIONAL INFORMATION

Use this section to report any additional information that may be pertinent to the sponsor's assessment that has not been covered in the sections above or that require further elaboration.

### CASE MANGER'S ASSESSMENT OF SPONSOR AND CONCLUDING REMARKS

Use this section to provide a thorough assessment of the sponsor's ability to safely care for the UAC, provide for the UAC's individual needs, and ensure the safety and well-being of the UAC.

#### CERTIFICATION

I confirm that I have completed all of the required sections	and the information is accurate.	
Print Name:	Created By:	
Title:	Date:	