

Sponsor Application

Part 1: Sponsor Packet Introduction - This part must be completed before other parts can be started.

Part 2: Authorization for Release of Information (ARI) - This part can be started after part 1 is completed.

2: Background

This section is complete.

3: ARI file uploads

This section is complete.

4: Authorization

This section is complete. To make updates to this part, use the Reopen menu item on the application, as long as the application is not Completed or Canceled. Reopening the part will unlock all sections in this part for editing.

Part 3: Sponsor Application - This part can be started after part 1 is completed but it cannot be completed until part 2 is completed.

5A: Sponsor information

This section is in progress, last changed by the Case Manager.

5B: Prior Sponsorship Information

This section is in progress, last changed by the Case Manager.

6: Household information

This section is in progress, last changed by the Case Manager.

7: Alternative caregiver

This section is in progress, last changed by the Case Manager.

8: Sponsor Application file upload

This section is in progress, last changed by the Sponsor.

9: Application agreement

This section is in progress, last changed by the Case Manager.

Part 4: Sponsor Care Agreement - This part can be completed after part 3 is completed.

10: Sponsor Care Agreement

This section has not been started

Sponsor Test Jane Doe's Application

This application has not been started.



Sponsor

[Sponsor Test Jane | Doe](#)

Mobile phone number

(972) 689-2656

Child

Sponsor Child Jenny | Doe - AF

Created By

Vinay Verma

Assigned FFS

Assigned Intakes

Submission Method

Online Application

5A: Sponsor information

This section has not been started

5A.1 Sponsor's relationship to child

✓ Child

Sponsor Child Jenny Doe

✓ Sponsor's relationship to child

Your relationship to this child

5A.2 About you, Sponsor Test Jane Doe

✓ Background information

Your country of origin (where you were born)

Language(s) you speak

Language 1

Language 2 (optional)

Language 3 (optional)

✓ Your contact information

Mobile phone number

Secondary phone number (optional)

Email address (optional)

✓ Your financial information

How will you financially support the child (children)?

Please explain. Include all sources and amounts of your income (for example, the amount you are paid each week) as well as explaining any financial support from others who will help with financial support.

5A.3 Sponsor’s Income and Employment Information

Are you providing court ordered financial support to children?

☒ Yes ☐ No

Are you receiving child support?

☒ Yes ☐ No

Do you have a job?

☐ Yes ☒ No

How do you earn money?

▼ Job

Add

My Job

Type of Employment / Position Title / Job Title

Weekly Average Income

Annual Income (System Generated)

\$ 0.00

Employer Name

Employer Street Address

Employer City

Employer Country

United States



Employer State



Employer Zipcode

Employer Phone

7: Alternative caregiver

This section has not been started

7.1 Adult who will care for the child(ren) if you cannot

If you become unable to care for the child(ren), who will care for the child(ren)?

✓ Alternative caregiver's name

☐ Has ARI Application

First name

Last name

Date of birth

 

7.2 About the alternative caregiver

✓ Contact information

Alternative caregiver's phone number

Country

 

Alternative caregiver's email address

Alternative caregiver's address

City

State

Zip code

▼ Relationships

Alternative caregiver's relationship to you, the sponsor

Alternative caregiver's relationship to Child 1, Hira Rio

7.3 Alternative child care

If you become unable to care for the child (children), how will this alternative caregiver care for the child (children)?

Save For Later

8: Sponsor Application file upload

This section has not been started.

8.1 Child's proof of identity and relationship



[ID Upload Examples](#)

Child

Hira Rio

Proof of child's identity

Upload front of an original or legible full color photocopy of the child's birth certificate.



Upload Files

Or drop files

Upload back of an original or legible full color photocopy of the child's birth certificate.



Upload Files

Or drop files



Proof of Identity Non-Compliant Document

Proof of relationship

Upload one of the following documents to provide proof of a relationship between you and the child. Expired documents are acceptable.

▼ Acceptable Documents

Acceptable Documents
Parent • Birth certificates • Court records • Parent's government issued photo ID
Step-Parent You have legally adopted the child • Birth certificates • Parent's government issued photo ID • Step-Parent's government issued photo ID • Marriage certificate • Court order documents confirming adoption or legal guardianship has been established
Legal Guardian • Birth certificates • Court records • Parent's government issued photo ID
Family Member • Birth certificates • Court records • Parent's government issued photo ID
You are not related to the child • Birth certificates • Parent's government issued photo ID • Step-Parent's government issued photo ID • Marriage certificate • Court order documents confirming adoption or legal guardianship has been established

Document selection

Proof of Relationship Documents Files

8.2 Sponsor's proof of current address

✓ Proof of your current address

An original version of at least one form of documentation verifying your current address. Acceptable forms of documentation include:

Proof of current address document selection

Proof of Address Documents Files

8.3 Alternative Caregiver's Proof of Identity

✓ Proof of alternative caregiver's identity

All potential alternative caregiver's must submit at least one (1) identification document that contains a photograph for all such adults. The document must be from the list of acceptable documents below and must be an unexpired original version or a legible full color photocopy, digital scan, or digital photo of a government-issued photo ID.

Proof of Identity document selection

Proof Of Identity Document Files

8.4 Sponsor's Proof of Income

✓ Proof of your income

A copy of at least one form of documentation verifying your income. Acceptable forms of documentation include:

☐ Angelica S. Waiver Applies

Proof of your income

Proof of Income Document Files

Other Files

 Upload Files

 Or drop files

Other Files

Save For Later

Start Date Of Employment

Employment Start Month

Employment Start Year

Length of Employment

Average Total Hours Worked per Week

Days Worked per Week on Average

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday
- ☐ Saturday
- ☐ Sunday

Comment

Are you financially supported by the Household Members, a partner, Alternative Caregiver, or spouse?
☒ Yes ☐ No

▼ Supporter's Job

Add

My Supporter's job

Type of Employment / Position Title / Job Title

Weekly Average Income

Annual Income (System Generated)

\$ 0.00

Employer Name

Employer Street Address

Employer City

Employer Country

United States



Employer State



Employer Zipcode

Employer Phone

Start Date Of Employment

Employment Start Month

Employment Start Year

Length of Employment

0.00

Average Total Hours Worked per Week

Days Worked per Week on Average

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday
- ☐ Saturday
- ☐ Sunday

Comment

Are you able to meet and pay for all your expenses?

☒ Yes ☐ No

What are your other sources of income?

List your monthly expenses for:

Food - Average cost per month

Rent - Average cost per month

Clothing - Average cost per month

School Needs - Average cost per month

Total Monthly Expenses

\$ 0.00

Total Monthly Income

\$ 0.00

Total Annual Income

\$ 0.00

[Save For Later](#)

5B: Prior Sponsorship Information

This section has not been started

Have you ever attempted to sponsor a child in ORR Care?

☒ Yes ☐ No

▼ Prior Sponsorship

Add

Date of Sponsorship

Child's UAC Portal ID ⓘ

Child's A# ⓘ

Child's first name

Child's last name

Child's date of birth

Child Sex

Your relationship to this child

Is/was the child enrolled in or attending school?

Did the child attend their immigration court date?

☒ Yes ☐ No

If yes, what was the court date?

Has the Child received Post Release Services from ORR? Has a case manager been in touch to support the child?

☒ Yes ☐ No

Is the child you sponsored still residing with you?

☐ Yes ☒ No

Explain why the child is not residing with you

Have you ever had an ORR Home Study for your sponsorship?

☒ Yes ☐ No

Have you ever withdrawn or discontinued an application to sponsor a child?

☒ Yes ☐ No

Why did you withdraw?

Have you ever been told no when trying to Sponsor a child?

☒ Yes ☐ No

Why?

Do you have any relatives in ORR care?

☒ Yes ☐ No

Have you ever had a child removed from your custody?

☒ Yes ☐ No

Explain

Save For Later

Complete section

6: Household information
This section has not been started

6.1 Where will you and the child (children) live?

▼ Address

Same as your current address?

- ☐ Yes
☒ No

Country

United States ▼

Street Address

City

State

Zip code

Please explain why this varies from your current address

6.2 Household members

▼ Household Members



[Include everyone in who lives in your household](#)

Include everyone who lives at this address, except yourself. A phone number and email address for adults (age 18 or older).

▼ Household member

☐ Has ARI Application

Add

Delete

Household member's first name

Household member's last name

Household member's date of birth

 

Household member's phone number

Household member's email address

Household member's relationship to you, the sponsor

Household member's relationship to the child (children)

6.3 Health information

✓ Serious contagious diseases

Does any person in your household have any serious contagious diseases (TB, AIDS, hepatitis, etc.)?

- ☒ Yes
☐ No

Please explain.

✓ Child health conditions

Are you aware of any health conditions the child(ren) may have (disabilities, allergies, diseases, etc.)? If so, please explain:

- ☒ Yes
☐ No

Please explain.

6.4 Criminal history

If you answer "YES" to either of these questions, you will need to provide more information. See the Supporting Documentation page (page 6 of this packet) for more information.

✓ Incident

Have you or any person in your household ever been charged with or convicted of a crime (other than a minor traffic violation)? e.g. speeding, parking ticket, etc.

- ☒ Yes
☐ No

▼ Incident

Add

Name of household member(s) involved

Place of the incident

Date of the incident

 

Explanation of the incident

Disposition of the incident. e.g., charges dropped, fined, imprisoned, probation

▼ Abuse or abandonment

Have you or any person in your household ever been investigated for the physical abuse, sexual abuse, neglect or abandonment of a minor?

- ☒ Yes
☐ No

▼ Abuse or abandonment

Add

Name of household member(s) involved

Place of the incident

Date of the incident

mm/dd/yyyy



Explanation of the incident



Disposition of the incident. e.g., charges dropped, fined, imprisoned, probation



Save For Later