ADVICE TO APPLICANT

PLEASE READ CAREFULLY. FEES WILL NOT BE RETURNED.

Permanent Resident Aliens Eligible for Cancellation of Removal

You may be eligible to have your removal cancelled under section 240A(a) of the Immigration and Nationality Act (INA). To qualify for this benefit, you must establish in a hearing before an Immigration Judge that:

1. You have been a lawful permanent resident for at least 5 years;
2. After having been admitted in any status, you have at least 7 years of continuous residence in the United States prior to both:
    a. Service of the Notice to Appear; and
    b. Commission of any offense referred to in section 212(a)(2) of the INA that renders you inadmissible under that section or removable under sections 237(a)(2) or 237(a)(4) of the INA;
3. You have not been convicted of an aggravated felony; and
4. You are deserving of a favorable exercise of discretion on your application.

NOTE: If you have served in active duty in the Armed Forces of the United States for at least 24 months, you do not have to meet the requirements of continuous residence in the United States. You must, however, have been in the United States when you entered the Armed Forces. If you are no longer in the Armed Forces, you must have been separated under honorable conditions.

Permanent Resident Aliens NOT Eligible for Cancellation of Removal

You are not eligible to have your removal cancelled under section 240A(a) of the INA if you:

1. Entered the United States as a crewman after June 30, 1964;
2. Were admitted to the United States as, or later became, a nonimmigrant exchange alien as defined in section 101(a)(15)(J) of the INA in order to receive graduate medical education or training, regardless of whether you are subject to or have fulfilled the 2-year foreign residence requirement of section 212(e) of the INA;
3. Were admitted to the United States as, or later became, a nonimmigrant exchange alien as defined in section 101(a)(15)(J) of the INA, other than to receive graduate medical education or training, and are subject to the 2-year foreign residence requirement of section 212(e) of the INA but have neither fulfilled nor obtained a waiver of that requirement;

4. Are an alien who is either inadmissible under section 212(a)(3) of the INA or deportable under section 237(a)(4) of the INA;
5. Are an alien who ordered, incited, assisted, or otherwise participated in the persecution of an individual because of the individual's race, religion, nationality, membership in a particular social group, or political opinion; or
6. Are an alien who was previously granted relief under section 212(c) of the INA, or section 244(a) of the INA as such sections were in effect prior to the enactment of the Illegal Immigration Reform and Immigration Responsibility Act of 1996, or whose removal has previously been cancelled under section 240A of the INA.

How Permanent Resident Aliens Can Apply for Cancellation of Removal

If you believe that you meet all of the requirements for cancellation of removal, you must answer all of the questions on the attached Form EOIR-42A fully and accurately. You must pay the form filing fee and comply with the Department of Homeland Security (DHS) instructions for providing biometrics and other biographical information at an Application Support Center operated by U.S. Citizenship and Immigration Services (USCIS). You must also serve a copy of your application on the Counsel for the DHS, U.S. Immigration and Customs Enforcement (ICE) as required in the proof of service page of this form, if applicable, and you must file your application with the appropriate Immigration Court. Please read the following instructions carefully before completing your application.

INSTRUCTIONS

Preparation of the Application

To apply for cancellation of removal as a permanent resident alien under section 240A(a) of the Immigration and Nationality Act (INA), you must fully and accurately answer all questions on the attached Form EOIR-42A. You must also comply with all of the instructions on this form. A separate application must be prepared and executed for each person applying for cancellation of removal. An application on behalf of an alien who is mentally incompetent or is a child under 14 years of age shall be executed by a parent or guardian.

Your responses must be typed or printed legibly. Do not leave any questions unanswered or blank. If any questions do not apply to you, write "none" or "not applicable" in the appropriate space.

To the extent possible, answer all questions directly on the form. If there is insufficient room to respond fully to a question, please continue your response on an additional sheet of paper. Please indicate the number of the question being answered next to your response on the additional sheet, write your alien registration number (A-number), print your name, and sign, date, and securely attach each additional sheet to the Form EOIR-42A using paper clips or binder clips.

Burden of Proof

The burden of proof is on you to prove that you meet all of the statutory requirements for cancellation of removal for certain permanent resident aliens under section 240A(a) of the INA and that you are entitled to such relief as a matter of discretion. To meet this burden, your responses to the questions on the application should be as detailed and complete as possible. You should also attach to your application any documents that demonstrate your eligibility for relief (see Supporting Documents section below).

Supporting Documents

You should submit with your application copies of any documents which the Department of Homeland Security (DHS), formerly the Immigration and Naturalization Service (INS), issued to you. You should also submit all documents related to your criminal history, including all conviction records. The Immigration Judge may require you to submit additional records relating to your request for cancellation of removal. The original of all supporting documents must be available for inspection at the hearing. If you wish to have the original documents returned to you, you should also present reproductions.

Required Biometrics and Other Biographical Information

Each applicant 14 years of age or older must also comply with the requirement to supply biometrics and other biographical information. The DHS will provide instructions on how and where to complete the biometrics requirement. These instructions are also available on the DHS website (https://www.uscis.gov/laws-and-policy/other-resources/immigration-benefits-in-eoir-proceedings). Failure to comply with DHS instructions may result in a delay in your biometric services appointment and/or the Immigration Court may deem your application for cancellation of removal abandoned and deny it. For more information about preparing for the DHS biometric services appointment, please consult the DHS website (https://www.uscis.gov/forms/filing-guidance/preparing-for-your-biometric-services-appointment).

Translations

Any document in a foreign language must be accompanied by an English language translation and a certificate signed by the translator stating that he/she is competent to translate the document and that the translation is true and accurate to the best of the translator's abilities. Such certification must be printed legibly or typed.

Fees

Before you file this form with the Immigration Court, you must pay the required filing fee to EOIR. Current filing fee amounts are listed on the EOIR website (https://www.justice.gov/eoir/eoir-forms). The filing fee must be paid electronically through the EOIR Payment Portal (https://epay.eoir.justice.gov/index) with a debit or credit card, PayPal account, Amazon Pay, or a checking or savings account (ACH). These fees will not be refunded, regardless of the action taken on your application. Therefore, it is important that you read the advice, instructions, and application carefully before responding. Payments by cash, check, money order, or cashier's check are not accepted.

To pay electronically through the EOIR Payment Portal, you will need to enter the A-number associated with the case in the Immigration Court and select the filing type. This information will be printed on your receipt once payment is complete. You will be redirected to the U.S. Treasury Pay.gov website to complete payment. Once your transaction is completed, you will be redirected back to the EOIR Payment Portal to print your EOIR fee payment receipt. You must submit your EOIR fee payment receipt with your filing. Filings will not be accepted without proof of payment. Your filing may be rejected if you fail to submit an EOIR fee payment receipt or if your electronic payment is uncollectible. If you are unable to pay the filing fee, you may ask

the Immigration Judge to permit you to file your Form EOIR-42A without a fee by filing a Fee Waiver Request (Form EOIR-26A).

Serving and Filing Your Application

You must comply with the DHS instructions for providing biometrics and other biographical information. After you attend your biometrics appointment, retain your USCIS ASC biometrics confirmation document as proof that your biometrics were taken and bring this proof to your future Immigration Court hearings.

You must file the following documents with the appropriate Immigration Court:

1. The original completed Form EOIR-42A with all supporting documents and any continuation sheets; and
2. Proof of payment of the Form EOIR-42A filing fee or a completed Fee Waiver Request (Form EOIR-26A).

Any documents you file with the Immigration Court must be served on the opposing party. Serve your filing on the Counsel for DHS, U.S. Immigration and Customs Enforcement (ICE). Your application will be rejected if the Proof of Service section on the last page of Form EOIR-42A is not completed.

Note: Electronic filers are not required to serve the opposing party if the opposing party is participating in ECAS; the ECAS system will provide an electronic service notification to participating parties. However, electronic filers must still sign and complete the Proof of Service section.

Penalties

You must answer all questions on the Form EOIR-42A truthfully and accurately, and you must submit only genuine documents in support of your application. You will be required to swear or affirm that the contents of your application and the supporting documents are true to the best of your knowledge. Your answer to the questions on this form and the supporting documents you present will be used to determine whether your removal should be cancelled and whether you should be permitted to retain your permanent resident status. Any answer you give and any supporting document you present may also be used as evidence in any proceeding to determine your right to be admitted or readmitted, re-enter, pass through, or reside in the United States. Your application may be denied if any of your answers or supporting documents are found to be false.

Presenting false answers or false documents may also subject you to criminal prosecution under 18 U.S.C. § 1546 and/or to civil penalties under 8 U.S.C. § 1324c if you submit your application knowing that the application, or any supporting document, contains any false statement with respect to a material fact. If convicted, you could be fined up to $250,000, imprisoned for up to 10 years, or both. *See* 18 U.S.C. §§ 1546(a), 3559(a)(4), 3571(b)(3). If it is determined that you have violated the prohibition against document fraud and a final order is entered against you, you could be subject to a civil penalty up to $2,000 for each document used or created for the first offense, and up to $5,000 for any second or subsequent offense. In addition, if you are the subject of a final order for violating 8 U.S.C. § 1324c, relating to civil penalties for document fraud, you will be removable from the United States.

Paperwork Reduction Act Notice

Under the Paperwork Reduction Act (PRA), a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often, this process is difficult because some immigration laws are very complex. The reporting burden for this collection of information is estimated at an average of 5 hours, 50 minutes per application, computed as follows: (1) learning about the form, 50 minutes; (2) completing the form, 2 hours; and (3) assembling and filing the form, 3 hours. If you have comments regarding the accuracy of this burden estimate, or any other aspect of this collection of information, including suggestions for reducing this burden, you may write to the U.S. Department of Justice, Executive Office for Immigration Review, Office of the General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041, or email EOIR.PRA.Comments@usdoj.gov.

Privacy Act Notice

This collection of information is authorized by Section 240A(a) of the INA (8 U.S.C. § 1229b(a)) in order to adjudicate an applicant's request for cancellation of removal for certain permanent residents. The collected information is mandatory and required to decide whether to permit the applicant to remain in the United States. Failure to provide the requested information would prevent the applicant from establishing their eligibility for cancellation of removal. EOIR may share this information with others in accordance with approved routine uses as described in the following system of records notices (SORNs), or their successors: JUSTICE/EOIR-001, Adjudication and Appeal Records of the Office of the Chief Immigration and Board of Immigration Appeals, 90 Fed. Reg. 42265 (Aug. 29, 2025). This SORN can be found on the Department of Justice website (https://www.justice.gov/opcl/doj-systems-records#).

OMB#1125-0001

U.S. Department of Justice
Executive Office for Immigration Review

Application for Cancellation of Removal for Certain Permanent Residents

PLEASE READ ADVICE AND INSTRUCTIONS BEFORE FILLING IN FORM

PLEASE TYPE OR PRINT

Fee Stamp (Official Use Only)

PART 1 - INFORMATION ABOUT YOURSELF

1) My present true name is: *(Last, First, Middle)*		2) Alien Registration (or "A") Number(s):		
3) My name given at birth was: *(Last, First, Middle)*		4) Birth Place: *(City and Country)*		
5) Date of Birth: *(Month, Day, Year)*	6) Sex: ❑ Male ❑ Female	7) Height:	8) Hair Color:	9) Eye Color:
10) Current Nationality and Citizenship:	11) Social Security Number:	12) Home Phone Number:	13) Work Phone Number:	
14) I currently reside at:		15) I have been known by these additional name(s):		

16) I have resided in the following locations in the United States: (List PRESENT ADDRESS FIRST, and work back in time for at least 7 years.)

Street and Number - Apt. or Room # - City or Town - State - Zip Code	Resided From: *(Month, Day, Year)*	Resided To: *(Month, Day, Year)*
		PRESENT

PART 2 - INFORMATION ABOUT THIS APPLICATION

17) I, the undersigned, hereby request that my removal be cancelled under the provisions of section 240A(a) of the Immigration and Nationality Act (INA). I believe that I am eligibile for this relief because I have been a lawful permanent resident alien for 5 or more years, have 7 years of continuous residence in the United States after having been admitted in any status, and have not been convicted of an aggravated felony. I was admitted as or adjusted to the status of an alien lawfully admitted for permanent residence on _____ *(Date)*

at _____ *(Place)*

Please continue answers on a separate sheet as needed.

Form EOIR-42A
Rev. Apr. 2026
Exp. TBD

PART 3 - INFORMATION ABOUT YOUR PRESENCE IN THE UNITED STATES

18) My first arrival into the United States was under the name of: *(Last, First, Middle)*

19) My first arrival to the United States was on: *(Month, Day, Year)*

20) Place or port of first arrival: *(Place or Port, City, and State)*

21) I: ☐ was inspected and admitted.
- ☐ I entered using an immigrant visa. _____
  Class of immigrant visa: _____
- ☐ I entered using a _____ visa which is valid until _____.
  (Specify Type of Visa) *(Month, Day, Year)*

☐ was not inspected and admitted.
- ☐ I entered without documents. Explain: _____.
- ☐ I entered without inspection. Explain: _____.
- ☐ Other. Explain: _____.

22) I applied on _____ for additional time to stay and it was ☐ granted on _____
(Month, Day, Year) *(Month, Day, Year)*
and valid until _____, or ☐ denied on _____.
(Month, Day, Year) *(Month, Day, Year)*

23) Since the date of my first entry, I departed from and returned to the United States at the following places and on the following dates:
(Please list all departures regardless of how briefly you were absent from the United States.)
If you have never departed from the United States since your original date of entry, please mark an X in this box: ☐

1	Port of Departure *(Place or Port, City and State)*	Departure Date *(Month, Day, Year)*	Purpose of Travel	Destination
	Port of Return *(Place or Port, City and State)*	Return Date *(Month, Day, Year)*	Manner of Return	Inspected and Admitted? ☐ Yes ☐ No
2	Port of Departure *(Place or Port, City and State)*	Departure Date *(Month, Day, Year)*	Purpose of Travel	Destination
	Port of Return *(Place or Port, City and State)*	Return Date *(Month, Day, Year)*	Manner of Return	Inspected and Admitted? ☐ Yes ☐ No

24) Have you ever departed the United States: a) under an order of deportation, exclusion, or removal?. ..... ☐ Yes ☐ No

b) pursuant to a grant of voluntary departure?. ..... ☐ Yes ☐ No

PART 4 - INFORMATION ABOUT YOUR MARITAL STATUS AND SPOUSE *(Continued on page 3)*

25) I am not married: ☐
I am married: ☐

26) If married, the name of my spouse is: *(Last, First, Middle)*

27) My spouse's name before marriage was:

28) The marriage took place in: *(City and Country)*

29) Date of marriage: *(Month, Day, Year)*

30) My spouse currently resides at:

_____
Apt. number and/or in care of

_____
Number and Street

_____
City or Town *State/Country* *Zip Code*

31) Place and date of birth of my spouse: *(City & Country; Month, Day, Year)*

32) My spouse is a citizen of: *(Country)*

33) If your spouse is other than a native born United States citizen, answer the following:

He/she arrived in the United States at: *(Place or Port, City and State)* _____.

He/she arrived in the United States on: *(Month, Day, Year)* _____.

His/her alien registration number(s) is: A# _____.

He/she was naturalized on: *(Month, Day, Year)* _____ at _____.
(City and State)

34) My spouse ☐ - is ☐ - is not employed. If employed, please give salary and the name and address of the place(s) of employment.

Full Name and Address of Employer	Earnings Per Week *(Approximate)*
	$
	$
	$

Please continue answers on a separate sheet as needed.

Form EOIR-42A
Rev. Apr. 2026
Exp. TBD

PART 4 - INFORMATION ABOUT YOUR MARITAL STATUS AND SPOUSE *(Continued)*

35) I ☐ - have ☐ - have not been previously married: *(If previously married, list the name of each prior spouse, the dates on which each marriage began and ended, the place where the marriage terminated, and describe how each marriage ended.)*

Name of prior spouse: *(Last, First, Middle)*	Date marriage began: Date marriage ended:	Place marriage ended: *(City and Country)*	Description or manner of how marriage was terminated or ended:

Name of prior spouse: *(Last, First, Middle)*	Date marriage began: Date marriage ended:	Place marriage ended: *(City and Country)*	Description or manner of how marriage was terminated or ended:

36) Have you been ordered by any court, or are otherwise under any legal obligation, to provide child support and/or spousal maintenance as a result of a separation and/or divorce? ☐ - Yes ☐ - No

PART 5 - INFORMATION ABOUT YOUR EMPLOYMENT AND FINANCIAL STATUS

37) Since my arrival into the United States, I have been employed by the following named persons or firms: *(Please begin with present employment and work back in time. Any periods of unemployment or school attendance should be specified. Attach a separate sheet for additional entries if necessary .)*

Full Name and Address of Employer	Earnings Per Week *(Approximate)*	Type of Work Performed	Employed From: *(Month, Day, Year)*	Employed To: *(Month, Day, Year)*
_____	$			PRESENT
_____	$			
_____	$			

38) If self-employed, describe the nature of the business, the name of the business, its address, and net income derived therefrom:

_____

_____

39) My assets (and if married, my spouse's assets) in the United States and other countries, not including clothing and household necessities, are:

Self

Cash, Stocks, and Bonds..... $ _____
Real Estate..... $ _____
Auto (dollar value minus amount owed)..... $ _____
Other (describe on line below)..... $ _____
_____ **TOTAL** $ _____

Jointly Owned With Spouse

Cash, Stocks, and Bonds..... $ _____
Real Estate..... $ _____
Auto (dollar value minus amount owed) ..... $ _____
Other (describe on line below). ..... $ _____
_____ **TOTAL** $ _____

40) I ☐ - have ☐ - have not received public or private relief or assistance (e.g., Welfare, Unemployment Benefits, Medicaid, TANF, AFDC, etc.). If you have, please give full details including the type of relief or assistance received, date for which relief or assistance was received, place, and total amount received during this time: _____

_____

41) Please list each of the years in which you have filed an income tax return with the Internal Revenue Service:

_____

PART 6 - INFORMATION ABOUT YOUR FAMILY *(Continued on page 5)*

42) I have_____*(Number of)* children. Please list information for each child below, include assets and earnings information for children over the age of 16 who have separate incomes:

Name of Child: *(Last, First, Middle)* Child's Alien Registration Number:	Citizen of What Country: Birth Date: *(Month, Day, Year)*	Now Residing At: *(City and Country)* Birth Place: *(City and Country)*	Immigration Status of Child
A#:			
Estimated Total of Assets: $_____	Estimated Average Weekly Earnings: $_____		
A#:			
Estimated Total of Assets: $_____	Estimated Average Weekly Earnings: $_____		
A#:			
Estimated Total of Assets: $_____	Estimated Average Weekly Earnings: $_____		

43) If your application is denied, would your spouse and all of your children accompany you to your:

Country of Birth - ☐ Yes ☐ No

Country of Nationality - ☐ Yes ☐ No

Country of Last Residence - ☐ Yes ☐ No

If you answered "No" to any of the responses, please explain:

44) Members of my family, including my spouse and/or child(ren) ☐ - have ☐ - have not received public or private relief or assistance (e.g., Welfare, Unemployment Benefits, Medicaid, TANF, AFDC, etc.). If any member of your immediate family has received such relief or assistance, please give full details including identity of person(s) receiving relief or assistance, dates for which relief or assistance was received, place, and total amount received during this time: _____

45) Please give the requested information about your parents, brothers, sisters, aunts, uncles, and grandparents, living or deceased. As to residence, show street address, city, and state, if in the United States; otherwise show only country:

Name: *(Last, First, Middle)* Alien Registration Number:	Citizen of What Country: Birth Date: *(Month, Day, Year)*	Relationship to Me: Birth Place: *(City and Country)*	Immigration Status of Listed Relative
A#:			
Complete Address of Current Residence, if Living: _____			
A#:			
Complete Address of Current Residence, if Living: _____			

Please continue answers on a separate sheet as needed.

PART 7 - MISCELLANEOUS INFORMATION *(Continued on page 6)*

46) I ☐ - have ☐ - have not entered the United States as a crewman after June 30, 1964.

47) I ☐ - have ☐ - have not been admitted as, or after arrival in the United States acquired the status of, an exchange alien.

48) I ☐ - have ☐ - have not submitted address reports as required by section 265 of the Immigration and Nationality Act.

49) I ☐ - have ☐ have never (either in the United States or in any foreign country) been arrested, cited, charged, summoned into court as a defendant, convicted, fined, imprisoned, placed on probation, or forfeited collateral for an act involving a felony, misdemeanor, or breach of any public law or ordinance (including, but not limited to, traffic violations or driving incidents involving alcohol). *(If answer is in the affirmative, please give a brief description of each offense including the name and location of the offense, date of conviction, any penalty imposed, any sentence imposed, and the time actually served. You are required to submit documentation of any such occurrences.)*

_____

_____

_____

_____

50) Have you ever served in the Armed Forces of the United States? ☐ - Yes ☐ - No. If "Yes" please state branch *(Army, Navy, etc.)* and service number: _____

Place of entry on duty: *(City and State)* _____

Date of entry on duty: *(Month, Day, Year)* _____ Date of discharge: *(Month, Day, Year)* _____

Type of discharge: *(Honorable, Dishonorable, etc.)* _____

I served in active duty status from: *(Month, Day, Year)* _____ to *(Month, Day, Year)* _____.

51) Have you ever left the United States or the jurisdiction of the district where you registered for the draft to avoid being drafted into the military or naval forces of the United States? ☐ Yes ☐ No

52) Have you ever deserted from the military or naval forces of the United States while the United States was at war? ☐ Yes ☐ No

53) If male, did you register under the Military Selective Service Act or any applicable previous Selective Service (Draft) Laws? ☐ Yes ☐ No
If "Yes," please give date, Selective Service number, local draft board number, and your last draft classification: _____

_____

54) Were you ever exempted from service because of conscientious objection, alienage, or any other reason? ☐ Yes ☐ No

55) Please list your present or past membership in or affiliation with every organization, association, fund, foundation, political party, club, society, or similar group in the United States or any other place since your 16th birthday. Include any foreign military service in this part. If none, write "None." Include the name of the organization, location, nature of the organization, and the dates of membership.

Name of Organization	Location of Organization	Nature of Organization	Member From: *(Month, Day, Year)*	Member To: *(Month, Day, Year)*

Please continue answers on a separate sheet as needed.

PART 7 - MISCELLANEOUS INFORMATION *(Continued)*

56) Have you ever:

☐ Yes ☐ No been ordered deported, excluded, or removed?

☐ Yes ☐ No overstayed a grant of voluntary departure from an Immigration Judge or the Department of Homeland Security (DHS), formerly the Immigration and Naturalization Service (INS)?

☐ Yes ☐ No failed to appear for deportation or removal?

57) Have you ever been:

Yes	No	
☐	☐	one who by fraud or willfully misrepresenting a material fact has procured or sought to procure any immigration benefit?
☐	☐	one who knowingly encouraged, induced, assisted, abetted, or aided any other alien to illegally enter or try to enter the U.S.?
☐	☐	except as already disclosed in response to Question 49, one who has either (1) committed any crime (even if you were not arrested, cited, charged, or convicted) or (2) committed any offense or act referred to in section 212(a)(2) of the INA?
☐	☐	inadmissible or deportable on security-related grounds under sections 212(a)(3) or 237(a)(4) of the INA?
☐	☐	one who has ordered, incited, assisted, or otherwise participated in the persecution of an individual on account of his or her race, religion, nationality, membership in a particular social group, or political opinion?
☐	☐	a person previously granted relief under sections 212(c) or 244(a) of the INA or whose removal has previously been canceled under section 240A of the INA?

If you answered "Yes" to any of the above questions, explain:

58) Name of School, Type of School, Degree Earned / Date (if any), Location (City/Country), Attended From (MM/YY) To (MM/YY)

59) The following certificates or other supporting documents are attached hereto as part of this application (Refer to the Instructions for documents which should be attached.)

Please continue answers on a separate sheet as needed.

PART 8 - SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

(Read the following information and sign below)

I declare that I have prepared this application at the request of the person named in Part 1, that the responses provided are based on all information of which I have knowledge, or which was provided to me by the applicant, and that the completed application was read to the applicant in a language the applicant speaks fluently for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information on the Form EOIR-42A may subject me to civil penalties under 8 U.S.C. § 1324(c).

Signature of Preparer:	Print Name:	Date:
Daytime Telephone #:	Address of Preparer: *(Number and Street, City, State, Zip Code)*	

PART 9 - SIGNATURE OF APPLICANT

NOTICE: YOU MUST SIGN BELOW BEFORE YOU FILE THIS APPLICATION.

I swear or affirm that I know the contents of this application that I am signing, including the attached documents and supplements, and that they are all true to the best of my knowledge.

_____ _____

Print Name *(Signature of Applicant or Parent or Guardian)*

_____

Date: (Month, Day, Year)

PART 10 - PROOF OF SERVICE

I hereby certify that a copy of the foregoing Form EOIR-42A was sent to to the Counsel for the DHS (U.S. Immigration and Customs Enforcement-ICE) on _____ at:

(Month, Day, Year)

_____

(Email Address or Physical Address (Number and Street, City, State, Zip Code))

☐ No service needed. I electronically filed this document, and the opposing party is participating in ECAS.

_____

Signature of Applicant (or Attorney or Representative)

Please continue answers on a separate sheet as needed.