

# **Application for Provisional Unlawful Presence Waiver**

# **Department of Homeland Security**

U.S. Citizenship and Immigration Services

# USCIS Form I-601A

OMB No. 1615-0123 Expires 07/31/2018

	Initial Receipt	F	Fee Stamp		Action Block
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			Attorney State B	ar Number	Attorney or Accredited Representative
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<b>►</b> S	START HERE - Type or print	in black ink.			
Par	t 1. Information About Y	Zou	You	ır U.S. Me	ailing Address
F	Provide the following information	n about yourself.	7.a.	In Care Of	Name
1.	Alien Registration Number (A-	Number) (if any)			
	► A-		7.b.	Street Num and Name	nber
2.	U.S. Social Security Number (i	f any)	7.c.	Apt.	Ste. Flr.
3.	USCIS Online Account Number	er (if any)	7.d.	City or To	wn
	<b>&gt;</b>		7.e.	State	7.f. ZIP Code
You	r Full Name		8.	Is your cur address?	rrent physical address the same as your mailing  Yes No
4.a.	Family Name (Last Name)				wered "No" to <b>Item Number 8.</b> , provide your
4.b.	Given Name			physical ac	ddress in Item Numbers 9.a 9.e.
4.c.	(First Name) Middle Name		You	ır U.S. Ph	ysical Address
			9.a.	Street Num and Name	nber
	er Names Used (if any)		9.b.	Apt.	Ste. Flr.
5.a.	Family Name (Last Name)		9.c.	City or To	wn
5.b.	Given Name (First Name)				
5.c.	Middle Name		9.a.	State	9.e. ZIP Code
				er Inform	nation
6.a.	Family Name (Last Name)		10.	Gender	Male Female
6.b.	Given Name (First Name)		11.	•	rth (mm/dd/yyyy)
6.c.	Middle Name			Date of Di	( 46.))))))

12. City or Town of Birth  23.b. State  13. Country of Birth  24.a. From (On or	
12 Country of Digth	
	r about mm/dd/yyyy)
14. Country of Citizenship or Nationality	bout mm/dd/yyyy)  n Status (At the time of entry)
15.a. Mother's Family Name (Last Name)	
<b>26.</b> Are there of	her previous entries? Yes No
place of entr	ered "Yes" to <b>Item Number 26.</b> , include the ry, dates, and your immigration status at the y for any other prior entries in the space
	Part 9. Additional Information.
16.b. Father's Given Name (First Name)  Your Immigra	tion or Criminal History
27. Are you curr	rently in removal, exclusion, or deportation in which there is no final order issued by the
Your Last Entry Into the United States  17 Date of Entry (On or about mm/dd/yyyyy)  immigration  DHS officer proceedings	in which there is no final order issued by the a judge, the Board of Immigration Appeals, a r, or a Federal court yet? (This includes a under INA section 239, an exclusion or proceeding initiated before April 1,1997, a
Visa Waiver section 217,	r Program removal proceeding under INA expedited removal under INA 235, and a judicial removal order under INA section  Yes No
19. Immigration Status (At the time of entry)  Number 29.  27., select the	ered "No" to <b>Item Number 27.</b> , go to <b>Item l.a.</b> If you answered "Yes" to <b>Item Number</b> the statement below (either <b>Item Number b.</b> ) that most accurately describes your current
	n removal, exclusion, or deportation
20.a. Place or Port-of-Entry (Actual or approximate city or town) the time placed	edings that are administratively closed and, at ne of filing my Form I-601A, have not been I back on EOIR's calendar to continue my val, exclusion, or deportation proceedings.
20.b. State unlaw admin	E: You may be eligible for a provisional ful presence waiver. Provide a copy of the histrative closure order. Also, if U.S.
21.b. To (On or about mm/dd/yyyy)  approv waiver	nship and Immigration Services (USCIS) ves your provisional unlawful presence r, you should seek termination or dismissal of removal, exclusion, or deportation proceedings
before	e you depart the United States for your grant visa interview.

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Par	t 1. Information About You (continued)	31.	departure that has not expired and that was granted to you		
28.b.	I am currently in removal, exclusion, or deportation proceedings that are not administratively closed, or in removal, exclusion, or deportation proceedings that were administratively closed, but EOIR has placed my proceedings back on its calendar in order to continue them.		by the immigration judge or the Board of Immigration Appeals during removal, exclusion, or deportation proceedings?  Yes No  NOTE: If you answered "Yes" to Item Number 31., you are ineligible for a provisional unlawful presence waiver.		
	<b>NOTE:</b> You are ineligible for a provisional unlawful presence waiver unless your proceedings are administratively closed at the time you file your Form I-601A, and the proceedings have not been put back on EOIR's calendar to continue your removal, exclusion, or deportation after having been previously administratively closed.		If you were granted voluntary departure in the past, but then you withdrew your voluntary departure request or otherwise terminated voluntary departure you should not select "Yes" to <b>Item Number 31.</b> In this case you may be in removal proceedings or you may be the subject of a final order of removal, deportation, or exclusion. You should select the statements that apply to you in <b>Item</b>		
	Are you currently subject to a final order of removal, exclusion or deportation? (This includes an order entered in proceedings under INA section 239, an exclusion or deportation order entered in proceedings initiated before		<b>Numbers 27 28.b.</b> or <b>Item Number 29.a.</b> If you filed a motion to withdraw your voluntary departure request, please submit a copy with your Form I-601A.		
	deportation order entered in proceedings initiated before April 1, 1997, a Visa Waiver Program removal order under INA section 217, an expedited removal order under INA section 235, and a judicial order under INA section 238(c))?  NOTE: If you answered "Yes" to Item Number 29.a., you are ineligible for a provisional unlawful presence waiver unless you applied for, and USCIS has already approved, an application for permission to reapply for admission under INA section 212(a)(9)(A)(iii) and 8 CFR 212.2 on Form I-212, Application for Permission to Reapply for Admission into the United States after		Answer <b>Item Numbers 32 38.</b> If you answer "Yes" to any question in <b>Item Numbers 32 38.</b> , your application for a provisional unlawful presence waiver may be denied as a matter of discretion. For each "Yes" response for <b>Item Numbers 32 38.</b> , provide the location and date of the event and a brief		
			ription in <b>Part 9. Additional Information</b> . For <b>Item</b> liber 32., if you were arrested but not charged with any e or offense, provide a statement or other documentation the arresting authority, prosecutor's office, or court to that you were not charged with any crime or offense. If answer "Yes" to <b>Item Number 35.</b> , you must provide all ed court dispositions.		
	Deportation or Removal. If you have already applied for and if USCIS has already granted you permission to reapply for admission, provide the relevant information in <b>Item Number 29.b.</b> If you answered "No" to <b>Item Number 31.</b>	32.	Have you <b>EVER</b> knowingly and willfully given false or misleading information to a U.S. Government official while applying for an immigration benefit or to gain entry or admission into the United States? Yes No		
29.b.	USCIS Receipt Number for Your Approved Form I-212:	33.	Have you <b>EVER</b> been engaged in alien smuggling?  Yes No		
	NOTE: You may also provide a copy of the approval notice that USCIS sent to you when it approved your Form I-212.	34.	Have you <b>EVER</b> been arrested, cited, or detained by a law enforcement officer (including immigration and military officers) in the United States, your home country, and/or any other country for any reason other than traffic		
1	. Has DHS served you with a DHS Form I-871, giving you notice that DHS intends to reinstate a prior deportation, exclusion, or removal order against you as permitted under INA section 241(a)(5)?  Yes No  If you answered "Yes" to <b>Item Number 30.a.</b> , has DHS served you with a final decision reinstating a prior		violations? Yes No  Have you <b>EVER</b> been charged, indicted, convicted, imprisoned, or jailed in the United States, your home		
30.b.			country, and/or any other country for any crime or offense?  Yes No		
	deportation, exclusion, or removal order under INA section 241(a)(5)?  Yes No	36.	Have you <b>EVER</b> trafficked in or are you <b>NOW</b> trafficking in any controlled substance?  Yes No		

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Par	t 1. Information About You (continued)	42.	Have you <b>EVER</b> assisted or participated in selling or providing weapons to any person who to your knowledge
37.	Are you <b>NOW</b> or have you <b>EVER</b> knowingly assisted, abetted, conspired, or colluded with others in the unlawful trafficking of any controlled substance?  Yes No	42	used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?  Yes No
38.	Are you <b>NOW</b> or have you <b>EVER</b> been engaged in prostitution?	43. 44.	Have you <b>EVER</b> received any type of military, paramilitary, or weapons training? Yes No  Have you <b>EVER</b> recruited, enlisted, conscripted, or used
quest provi matte	ver Item Numbers 39.a 45. If you answer "Yes" to any ion in Item Numbers 39.a 45., your application for a sional unlawful presence waiver may be denied as a er of discretion. For each "Yes" response for Item bers 39.a 45., provide a complete explanation in	45.	any person under 15 years of age to serve in or help an armed force or group?  Yes No  Have you <b>EVER</b> used any person under 15 years of age to take part in hostilities, or to help or provide services to
	9. Additional Information.		people in combat?
	you <b>EVER</b> ordered, incited, called for, committed, assisted, d with, or otherwise participated in any of the following:		
-	Acts involving torture or genocide? Yes No	Par	t 2. Biographic Information
	Killing any person? Yes No	1.	Ethnicity (Select <b>only one</b> box)
	Intentionally and severely injuring any person?		Hispanic or Latino  Not Hispanic or Latino
37.0.	Yes No	2.	Race (Select all applicable boxes)
39.d.	Engaging in any kind of sexual contact or relations with any person who was being forced or threatened?  Yes No		☐ White ☐ Asian
39.e.	Limiting or denying any person's ability to exercise religious beliefs?		<ul> <li>□ Black or African American</li> <li>□ American Indian or Alaska Native</li> <li>□ Native Hawaiian or Other Pacific Islander</li> </ul>
	you EVER:	3.	Height Feet Inches
40.a.	Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, or insurgent organization?  Yes No	4. 5.	Weight Pounds Pounds Eye Color (Select <b>only one</b> box)
40.b.	Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?  Yes No		☐ Black         ☐ Blue         ☐ Brown           ☐ Gray         ☐ Green         ☐ Hazel           ☐ Maroon         ☐ Pink         ☐ Unknown/Other
41.	Have you <b>EVER</b> been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?  Yes No	6.	Hair Color (Select <b>only one</b> box)  Bald (No hair) Black Blond Gray Red Sandy White Unknown/ Other

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### Part 3. Information About Your Immigrant Part 4. Information About Your Qualifying Visa Case Relative Provide the basis on which you are immigrating to the United Provide the following information about the qualifying relative States using the check boxes below. (Select **only one** box) (the U.S. citizen or Lawful Permanent Resident (LPR) spouse or parent) who would experience extreme hardship if you were Diversity Visa Program Selectee or Derivative refused admission to the United States. 1.b. Immediate Relative Petition (Form I-130) Your Qualifying Relative's Full Name and Preference-Based Family Petition (Form I-130), Relationship to You including Derivatives **1.a.** Family Name **1.d.** Employment-Based Petition (Form I-140), including (Last Name) Derivatives 1.b. Given Name Special Immigrant/Widow Petition (Form I-360), (First Name) including Derivatives Middle Name If you selected **Item Number 1.a.** because you are a Diversity U.S. Citizen Spouse Visa (DV) Program selectee or derivative, provide information about your (or your spouse's or parent's) DV case: 2.b. U.S. Citizen Parent **2.a.** DOS DV Case Number (KCC Case Number) LPR Spouse **2.d.** LPR Parent DV Program Selectee's Full Name (If you are a derivative and your parent or spouse is the DV Program Selectee) Your Other Qualifying Relative **2.b.** Family Name Do you have more than one qualifying relative (U.S. citizen (Last Name) or LPR spouse or parent)? Yes $\square$ No Given Name (First Name) If you answered "Yes" to Item Number 3., provide the **2.d.** Middle Name other qualifying relative's name and your relationship to the qualifying relative in Item Numbers 4.a. - 5.d. If you selected **Item Numbers 1.b.**, **1.c.**, **1.d.**, or **1.e.** provide Also provide evidence of the U.S. citizenship or LPR the following information about the approved immigrant visa status of the other qualifying relative with your petition (Form I-130, Form I-140, or Form I-360) that was filed application. See the What Evidence Must I Submit on your (or your spouse's or parent's) behalf, or that you used to With Form I-601A section of the Instructions. self-petition on your behalf, that is your basis to immigrate and the related Department of State (DOS) immigrant visa Additional Qualifying Relative's Full Name and application. Relationship to You 3.a. USCIS Receipt Number **4.a.** Family Name (Last Name) 4.b. Given Name **3.b.** DOS Consular Case Number (NVC Case Number) (First Name) **4.c.** Middle Name **Petitioner Name** (Provide the full name of the family member or U.S. Citizen Spouse the company who petitioned for you (or your spouse or parent).) 5.b. U.S. Citizen Parent Family Name (Last Name) 5.c. LPR Spouse **3.d.** Given Name **5.d.** LPR Parent (First Name) **3.e.** Middle Name Company or Organization Name

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### Part 5. Statement From Applicant

In the space provided, explain in detail why you believe USCIS should approve your application for a provisional unlawful presence waiver as a matter of discretion. Provide all of the reasons you believe support your application for this waiver, including information about the extreme hardship your qualifying relatives would experience if you were refused admission to the United States. If you need extra space to complete your statement, use the space provided in Part 9. Additional Information.


# Part 6. Applicant's Statement, Contact Information, Certification, and Signature

**NOTE:** Read the **Penalties** section of the Form I-601A Instructions before completing this part. You must file Form I-601A while in the United States.

App	plicant's Statement
	TE: Select the box for either Item Number 1.a. or 1.b. If cable, select the box for Item Number 2.
1.a.	☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
1.b.	The interpreter named in <b>Part 7.</b> read to me every question and instruction on this application and my answer to every question in
	,
	a language in which I am fluent, and I understood all of this information as interpreted.
2.	At my request, the preparer named in <b>Part 8.</b> ,
	,
	prepared this application for me based only upon
	information I provided or authorized.
App	plicant's Contact Information
3.	Applicant's Daytime Telephone Number
4.	Applicant's Mobile Telephone Number (if any)
5.	Applicant's Email Address (if any)
App	olicant's Certification
of un may	es of any documents I have submitted are exact photocopies naltered, original documents, and I understand that USCIS require that I submit original documents to USCIS at a later. Furthermore, I authorize the release of any information.

date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I further authorize release of information contained in this application, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

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# Part 6. Applicant's Statement, Contact Information, Certification, and Signature (continued)

I understand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:

- 1) I reviewed and provided or authorized all of the information in my application;
- 2) I understood all of the information contained in, and submitted with, my application; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

# and that all of this information is complete, true, and correct. Applicant's Signature 6.a. Applicant's Signature 6.b. Date of Signature (mm/dd/yyyy)

**NOTE TO ALL APPLICANTS:** If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

# Part 7. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Inte	Interpreter's Full Name		
l.a.	Interpreter's Family Name (Last Name)		
l.b.	Interpreter's Given Name (First Name)		
2.	Interpreter's Business or Organization Name (if any)		

Inte	erpreter's Mailing Address
3.a.	Street Number and Name
3.b.	Apt. Ste. Flr.
3.c.	City or Town
3.d.	State 3.e. ZIP Code
3.f.	Province
3.g.	Postal Code
3.h.	Country
Inte	erpreter's Contact Information
4.	Interpreter's Daytime Telephone Number
5.	Interpreter's Mobile Telephone Number (if any)
6.	Interpreter's Email Address (if any)
Inte	erpreter's Certification
I cert	tify, under penalty of perjury, that:
which 1.b., every answ she u appli	th is the same language specified in <b>Part 6.</b> , <b>Item Number</b> and I have read to this applicant in the identified language of question and instruction on this application and his or her ter to every question. The applicant informed me that he or inderstands every instruction, question, and answer on the cation, including the <b>Applicant's Certification</b> , and has ited the accuracy of every answer.
Inte	erpreter's Signature
7.a.	Interpreter's Signature (sign in ink)
7.b.	Date of Signature (mm/dd/yyyy)

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# Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Pre	parer's Full Name
1.a.	Preparer's Family Name (Last Name)
1.b.	Preparer's Given Name (First Name)
2.	Preparer's Business or Organization Name (if any)
Pre	parer's Mailing Address
3.a.	Street Number and Name
3.b.	Apt. Ste. Flr.
3.c.	City or Town
3.d.	State 3.e. ZIP Code
3.f.	Province
3.g.	Postal Code
3.h.	Country
Pre	parer's Contact Information
4.	Preparer's Daytime Telephone Number
5.	Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)

Preparer's	Statement
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7.a.	I am not an attorney or accredited representative but have prepared this form on behalf of the authorized individual and with the authorized individual's consent.
7.b.	I am an attorney or accredited representative and have prepared this form on behalf of the authorized individual and with the authorized individual's consent.
	NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application

## Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Si	gnature
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8.a.	Preparer's Signature (sign in ink)	
8.b.	Date of Signature (mm/dd/yyyy)	

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		<b>5</b> o	Page Number	<i>5</i> h	Dout Number	<b>5</b> a	Item Number
Part 9. Additional Information		5.a.	Page Number	5.0.	Part Number	5.c.	Item Number
If you need extra space to provide any adwithin this application, use the space below space than what is provided, you may mat to complete and file with this application sheet of paper. Type or print your name at the top of each sheet; indicate the <b>Page Number</b> , and <b>Item Number</b> to which you sign and date each sheet.	ow. If you need more ke copies of this page or attach a separate and A-Number (if any) e Number, Part	5.d.					
1.a. Family Name (Last Name)							
1.b. Given Name (First Name)							
1.c. Middle Name							
2. A-Number (if any) ► A-							
3.a. Page Number 3.b. Part Number	3.c. Item Number	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
3.d.		6.d.					
<b>4.a.</b> Page Number <b>4.b.</b> Part Number	4.c. Item Number	7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
4.d.		7.d.					

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