

## **Application for T Nonimmigrant Status**

### **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form I-914

OMB No. 1615-0099 Expires 01/31/2019

#### START HERE - Type or print. Use black ink. See Instructions for information For USCIS Use Only about eligibility and how to complete and file this application. Receipt Returned PART A. Purpose for Filing the Application Date Check all that apply: Date I am filing for T-1 nonimmigrant status and have not previously filed for such Resubmitted status. Date I am filing for T-1 nonimmigrant status and have previously filed for such status. Receipt Number (begins with EAC) Date **Reloc Sent** I have received T-1 status and am applying to bring family members to the United States. Date Date **PART B. General Information About You** (Person filing this form as a victim) Reloc Rec'd Family Name (Last Name) Given Name (First Name) Middle Name (if any) Date Date **Other Names Used** (Include maiden name/nickname) Validity Dates Home Address - Street Number and Name Apt. Number From: To: State/Province Zip/Postal Code City Remarks Safe Mailing Address (if other than above) - Street Number and Name Apt. Number C/O (in care of): State/Province Zip/Postal Code City **Conditional Approval Safe Daytime Phone Number Home Telephone Number** (with area code) (with area code) Stamp # Date **Action Block** E-Mail Address (optional) A-Number (if any) U.S. Social Security Number (if any) Gender Male Female **Marital Status:** Widowed Single/Never Married Married Divorced Date of Birth (mm/dd/yyyy) **Country of Birth Country of Citizenship Passport Number** Place of Issuance Date of Issue (mm/dd/yyyy) To Be Completed by Attorney or Representative, if any Place of Last Entry Date of Last Entry (mm/dd/yyyy) Fill in box if G-28 is attached to represent the applicant. ATTY State Form I-94 Number (Arrival-Departure Record) **Current Immigration Status** License #

PART C.	Additional	Inform	nation

Answers to the following questions about your claim require explanation and supporting documentation. You should attach documents in support of your claim that you are a victim of a severe form of trafficking in persons and the specific facts on which you are relying to support your claim. **You must** attach a personal narrative statement describing the trafficking. If you are only applying for T derivative status for a family member subsequent to your (the principal applicant) initial filing, evidence supporting the original application is not require to be resubmitted with the new Form I-914.

Attach additional sheets of paper as needed. Write your name and Alien Registration Number (A-Number), if any, at the top of each sheet and indicate the number of the item that you are answering. Include the Part and letter or number relating to the additional information you provided (example: Part C, 3).

ı.	I am or have been a victim of a severe form of trafficking in persons. (Attach evidence to support your claim.) $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$						
2.	I <b>am</b> submitting a law enforcement agency (LEA) declaration on Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons. (If "No," explain why you are not submitting the LEA Certification.)						
3.	I am physically present in the United States, American Samoa, or the Commonwealth of the Northern  Mariana Islands, or at a port of entry, on account of trafficking, or have been allowed entry into the United States to participate in investigative or judicial processes associated with an act or perpetrator of trafficking.  (If "Yes," explain in detail and attach evidence and documents supporting this claim.)						
4.		fer extreme hardship in evidence and docume			on removal. (If "Yes," expl	ain Yes	☐ No
5.	agency and office y		ort, the address and p		ate to which law enforcem that office, and the case	nent Yes	□ No
	Law Enforcement	t Agency and Office	Address		Phone Number	Case Number	
	Circumstances:						
6.	I am under the age	of 18 years. (If "Yes,"	proceed to Question &	3.)		Yes	□No
	I have complied wi investigation or pro	th requests from Feder	ral, State, or local law	enforcement aut to cooperate wi	thorities for assistance in t th such requests due to	<u>—</u>	☐ No
	I have complied wi investigation or pro- physical or psychol This is the first time	th requests from Federosecution of acts of tradeogical trauma. (If "No	ral, State, or local law fficking, or am unable "explain the circums nited States. (If "No,"	enforcement aut to cooperate wi tances.) list each date, pi		he Yes	
7.	I have complied wi investigation or pro- physical or psychol This is the first time status you entered it	th requests from Federosecution of acts of tradeogical trauma. (If "No	ral, State, or local law fficking, or am unable "explain the circums nited States. (If "No,"	enforcement aut to cooperate wi tances.) list each date, pi	th such requests due to  lace of entry, and under wa	he Yes	□ No
7.	I have complied wi investigation or pro- physical or psychol This is the first time status you entered in arrival.)	th requests from Federosecution of acts of tra- logical trauma. (If "No e I have entered the United States for the	ral, State, or local law fficking, or am unable "explain the circums nited States. (If "No,"	enforcement auto to cooperate wintances.) list each date, pit explain the circ	th such requests due to  lace of entry, and under wa	he Yes	□ No

PA	RT C. Additional Information (continued	)				
9.	My most recent entry was on account of the trafficircumstances of your most recent arrival.)	icking that forms the b	pasis for my claim. (Explain th	he Yes	No	
10. I want an Employment Authorization Document.						
11.	Yes No  I. I am now applying for one or more eligible family members. (If "Yes," complete and include a Form I-914,  Supplement A, Application for Immediate Family Member of T-1 Recipient, for each family member for whom you are now applying. You may also apply to bring eligible family members to the United States at a later date.)					
PA	ART D. Processing Information					
que told 4 <i>da</i> 4 <i>ns</i>	swer the following questions about yourself. For pstions, even if your records were sealed or otherw you that you no longer have a record. (If your and litionally, explain if any of the acts or circumstance wering "Yes" does not necessarily mean that you ister for permanent residence.)	ise cleared or if anyon aswer is "Yes" to any o ces below are related i	ne, including a judge, law enform one of these questions, explain to you having been a victim of	rcement officer, or attor on a separate sheet of p a severe form of traffick	ney, paper. king.	
1.	Have you EVER:					
	a. Committed a crime or offense for which you l	nave not been arrested	?	Yes	No	
	<b>b.</b> Been arrested, cited, or detained by any law e officers) for any reason?	nforcement officer (in	cluding DHS, former INS, and	d military Yes	No	
	c. Been charged with committing any crime or o	ffense?		Yes	No	
	<b>d.</b> Been convicted of a crime or offense (even if	violation was subsequ	ently expunged or pardoned)?	Yes [	No	
	<b>e.</b> Been placed in an alternative sentencing or a prosecution, withheld adjudication, deferred a	1 -	(for example: diversion, defer	rred Yes	] No	
	f. Received a suspended sentence, been placed o	n probation, or been p	aroled?	Yes	No	
	g. Been in jail or prison?			Yes	No	
	<b>h.</b> Been the beneficiary of a pardon, amnesty, re	habilitation, or other a	ct of clemency or similar action	on? Yes	No	
	i. Exercised diplomatic immunity to avoid prose	cution for a criminal of	offense in the United States?	Yes	No	
	If you answered "Yes" to any of the above question of paper to give the same information.	ions, complete the foll	owing table. If you need more	e space, use a separate sl	heet	
	Why were you arrested, cited, detained, or charged?  Date of arrest, citation, detention, charge charged?  (mm/dd/yyyy)  Date of arrest, cited, detained, or charges filed, charged?  (City, State, Country)  Outcome or disposition (e.g., no charges filed, charges dismissed, jail, probation, etc.)					

PA	RT I	D. Processing Information (continued)		
2.	Have	you:		
		ngaged in prostitution or procurement of prostitution or do you intend to engage in prostitution or ocurement of prostitution?	Yes	☐ No
	<b>b.</b> E	VER engaged in any unlawful commercialized vice, including, but not limited to illegal gambling?	Yes	☐ No
		VER knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States legally?	Yes	☐ No
		VER illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or colluded in the licit trafficking of any controlled substance?	Yes	☐ No
3.		you EVER committed, planned or prepared, participated in, threatened to, attempted to, or conspired to comation for, or solicited funds for any of the following:	mmit, gatl	hered
	<b>a.</b> H	ijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)?	Yes	☐ No
	cc	eizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to empel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained?	Yes	☐ No
	c. As	ssassination?	Yes	☐ No
		he use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or cause substantial damage to property?	Yes	☐ No
	or	ne use of any biological agent; chemical agent; or nuclear weapon or device; explosive; or other weapon dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or cause substantial damage to property?	Yes	☐ No
4.		you EVER been a member of, solicited money or members for, provided support for, attended military traction 2339D(c)(1) of title 18, United States Code) by or on behalf of, or been associated with an organization		lefined
	a. D	esignated as a terrorist organization under section 219 of the Immigration and Nationality Act?	Yes	☐ No
		ny other group of two or more individuals, whether organized or not, which has engaged in or has a abgroup which has engaged in:		
	1.	Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)?	Yes	☐ No
	2.	Seizing or detaining, and threatening to kill, injure, or continue to detain another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained?	Yes	☐ No
	3.	Assassination?	Yes	☐ No
	4.	The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property?	Yes	☐ No
	5.	Soliciting money or members or otherwise providing material support to a terrorist organization?	Yes	☐ No
	6.	The use of any biological agent; chemical agent; or nuclear weapon or device; explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property?	Yes	☐ No

PA	RT D.	Processing Information (continued)		
5.	Do you	intend to engage in the United States in:		
	a. Espi	onage?	Yes	☐ No
		unlawful activity, or any activity the purpose of which is in opposition, to control, or overthrow of the ernment of the United States?	Yes	☐ No
		y, principally, or incidentally in any activity related to espionage or sabotage or to violate any law lying the export of goods, technology, or sensitive information?	Yes	☐ No
6.	-	ou ever been or do you continue to be a member of the Communist or other totalitarian party, except embership was involuntary?	Yes	☐ No
7.	Govern	ou, during the period of March 23, 1933, to May 8, 1945, in association with either the Nazi ment of Germany or any organization or government associated or allied with the Nazi Government of y, ever ordered, incited, assisted, or otherwise participated in the persecution of any person because of igion, nationality, membership in a particular social group, or political opinion?	Yes	□ No
8.	Have yo	ou EVER been present or nearby when any person was:		
	a. Inter	ationally killed, tortured, beaten, or injured?	Yes	☐ No
	<b>b.</b> Disp	laced or moved from his or her residence by force, compulsion, or duress?	Yes	☐ No
	c. In an	y way compelled or forced to engage in any kind of sexual contact or relations?	Yes	☐ No
9.	a. Are	removal, exclusion, rescission, or deportation proceedings pending against you?	Yes	☐ No
	<b>b.</b> Have	e removal, exclusion, rescission, or deportation proceedings EVER been initiated against you?	Yes	☐ No
	c. Have	you EVER been removed, excluded, or deported from the United States?	Yes	☐ No
	<b>d.</b> Have	e you EVER been ordered to be removed, excluded, or deported from the United States?	Yes	☐ No
		e you EVER been denied a visa or denied admission to the United States? (If a visa was denied, ain why on a separate sheet of paper.)	Yes	☐ No
		you EVER been granted voluntary departure by an immigration officer or an immigration judge and I to depart within the allotted time?	Yes	☐ No
10.	Have yo	ou EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any	of the follo	owing:
	a. Acts	involving torture or genocide?	Yes	☐ No
	<b>b.</b> Killi	ng any person?	Yes	☐ No
	c. Inter	tionally and severely injuring any person?	Yes	☐ No
	d. Enga	aging in any kind of sexual contact or relations with any person who was being forced or threatened?	Yes	☐ No
	e. Limi	ting or denying any person's ability to exercise religious beliefs?	Yes	☐ No
11.	Have yo	ou EVER:		
		ed in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?	Yes	☐ No
		ed in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved ning persons?	Yes	☐ No

PA	RT D. Processing Information	(continued)					
	Have you EVER been a member of, in which you or other persons used a					Yes	☐ No
	Have you EVER assisted or participal knowledge used them against another knowledge used them against another against another them.	er person, or in				Yes	☐ No
14.	Have you EVER received any type of	of military, para	amilitary, or wear	oons training?		Yes	☐ No
	Are you under a final order or civil penalty for violating section 274C (producing and/or using false documentation to unlawfully satisfy a requirement of the Immigration and Nationality Act)?						
	Have you EVER, by fraud or willful visa or other documentation, for entr				ocured, a	Yes	☐ No
17.	Have you EVER left the United State	es to avoid bein	ng drafted into the	e U.S. Armed Forces?		Yes	☐ No
	Have you EVER been a J nonimmig requirement and not yet complied with				residence	Yes	☐ No
	Have you EVER detained, retained, citizenship, outside the United States		•	, .	J.S.	Yes	☐ No
20.	Do you plan to practice polygamy in	the United Sta	ates?			Yes	☐ No
21.	Have you entered the United States a	ıs a stowaway?	?			Yes	☐ No
22.	a. Do you have a communicable dis	ease of public	health significanc	e?		Yes	☐ No
	<b>b.</b> Do you have or have you had a p likely to recur) associated with the or welfare of yourself or others?	•		•		Yes	☐ No
	c. Are you now or have you been a	drug abuser or	drug addict?			Yes	☐ No
PA	RT E. Information About You	r Family Me	mbers				
	vide the following information about et of paper.	your spouse ar	nd all of your sons	and daughters. If you need	more space, at	tach an ad	ditional
1.	Spouse						
	Family Name (Last Name)	Given Name	(First Name)	Middle Name (if any)	Date of F	Birth (mm/	'dd/yyyy)
	Country of Birth		Current Locati	On.			
	Country of Diffil		Current Locati	VII			

PA	PART E. Information About Your Family Members (continued)						
2.		Children	·		,		
	a.	Family Name (Last Name)	Given Nam	ne (First Name)	Middle Na	ame (if any)	Date of Birth (mm/dd/yyyy)
		C. A. C. D. A.		D. C. II			
		Country of Birth		Relationship		Current Loca	ation
	b.	Family Name (Last Name)	Given Nam	ne (First Name)	Middle Na	ame (if any)	Date of Birth (mm/dd/yyyy)
		Country of Birth		Relationship		Current Loca	ation
	c.	Family Name (Last Name)	Given Nam	ne (First Name)	Middle Na	ame (if any)	Date of Birth (mm/dd/yyyy)
		Country of Birth		Relationship		Current Loca	ation
		you are now applying to have join  Γ F. Applicant's Statement					on, and Signature
		: Read the <b>Penalties</b> section of th	e Form I-914	Instructions before	re completing	g this part.	, 0
		cant's Statement	or D in Iton	n Number 1 If e	nnliaghla gal	act the box for 1	Itam Numbau 2
		: Select the box for either <b>Item A</b> plicant's Statement Regarding the		n Number 1. 11 a	ppiicable, sei	lect the box for i	item Number 2.
	A.		nglish, and I l	have read and und	lerstand every	y question and in	nstruction on this application
	В.	The interpreter named in Paquestion in a language in which I am flu		• •		tion on this appl	ication and my answer to every
2.	Αŗ	oplicant's Statement Regarding the		derstood everytiin	ng.		
		At my request, the preparer nam prepared this application for me		1	provided or a	nuthorized.	,

(cc	ontinued)				
Ap	Applicant's Contact Information				
3.	Applicant's Daytime Telephone Number	4.	Applicant's Mobile Telephone Number (if any)		
5.	Applicant's Email Address (if any)				

PART F. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

## Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I authorize the release of any information from my record that USCIS needs to determine eligibility for the benefit I am seeking to investigate my claim, and to investigate fraudulent claims. I further authorize USCIS to release information to law enforcement agencies and prosecutors investigating crimes of trafficking or related crimes. I further authorize USCIS to release information to Federal, State, and local public and private agencies providing benefits, to be used solely in making determinations of eligibility for benefits pursuant to 8 USC 1641(c).

I furthermore 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 law.

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

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

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

Applicant's Signature				
6. Applicant's Signature (sign in ink)	Date of Signature (mm/dd/yyyy)			
<b>→</b>				

**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.

PA	ART G. Interpreter's Contact Information, Certification	ation, and Signature	
Pro	ovide the following information about the interpreter.		
In	terpreter's Full Name		
1.	Interpreter's Family Name (Last Name)	nterpreter's Given Name (First Na	ume)
2.	Interpreter's Business or Organization Name (if any)		
In	terpreter's Mailing Address		
3.	Street Number and Name	Apt. Ste. F	Ir. Number
	City or Town	State	ZIP Code
	Province Postal Code	Country	
In	terpreter's Contact Information		
4.	Interpreter's Daytime Telephone Number 5.	. Interpreter's Mobile Telephon	ne Number (if any)
_			
6.	Interpreter's Email Address (if any)		
In	terpreter's Certification		
I ce	ertify, under penalty of perjury, that:		
I an	m fluent in English and	, which is the same language s	specified in Part F., Item B. in
	m Number 1., and I have read to this applicant in the identified la		
	her answer to every question. The applicant informed me that he oblication, including the <b>Applicant's Declaration and Certificatio</b>	5	
In	terpreter's Signature		
7.	Interpreter's Signature (sign in ink)	<u>D</u>	ate of Signature (mm/dd/yyyy)

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

Provide the following information about the preparer.

Pr	eparer's Full Name	
1.	Preparer's Family Name (Last Name)	Preparer's Given Name (First Name)
2.	Preparer's Business or Organization Name (if any)	٦
Pr	reparer's Mailing Address	
3.	Street Number and Name	Apt. Ste. Flr. Number
	City or Town	State ZIP Code
	Province Postal Code	Country
Pr	reparer's Contact Information	
4.	Preparer's Daytime Telephone Number	5. Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)	
Pr	reparer's Statement	
7.	<b>A.</b> I am not an attorney or accredited representative but hat the applicant and with the applicant's consent.	have prepared this application on behalf of
	<b>B.</b> I am an attorney or accredited representative and my respectively.	-
	extends does not extend beyond the preparation	••
	NOTE: If you are an attorney or accredited representation Notice of Entry of Appearance as Attorney or Accredit	ntative, you may be obliged to submit a completed Form G-28, dited Representative, with this application.
Pr	reparer's Certification	
revi	iewed this completed application and informed me that he or she	this application at the request of the applicant. The applicant then e understands all of the information contained in, and submitted with, <b>Certification</b> , and that all of this information is complete, true, and it the applicant provided to me or authorized me to obtain or use.
Pr	eparer's Signature	
8.	Preparer's Signature (sign in ink)	Date of Signature (mm/dd/yyyy)