

### **Application for Temporary Protected Status**

**USCIS Form I-821** 

OMB No. 1615-0043 Expires 08/31/2025

## **Department of Homeland Security** U.S. Citizenship and Immigration Services

					For US	CIS Use Or	ıly		
		Receipt		Action Block				Case ID:	
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		be completed	Select this				ar Number		r Accredited Representative
		y an Attorney or Accredited	Form G-28 G-28I is	3 or	(if appli	icable)		USCIS Onli	ine Account Number (if any)
	Repr	esentative (if any).	attached.						
<b>&gt;</b>	STA	RT HERE - Type or	print in black ii	ık.					
Pa	rt 1.	Type of Applicat	tion (select on	ie)		Are	you also filin	g a request fo	r employment authorization?
appl	NOTE: Select the box for Item Number 1.a., 1.b., or 2. If applicable, select the box for Item Number 3.a. or 3.b. For Item Number 4., enter the name of the designated TPS country  1.a.   This is my initial (first time) application for Temporary Protected Status (TPS). I do not currently have TPS.		For country.	3.a. 3.b. 4.	Docume Applica with my	ent (EAD), and tion for Emplo Form I-821. n not currently	an Employment Authorization I am filing Form I-765, byment Authorization, together requesting an EAD.		
1.b.		This is my re-registra currently have TPS, a					applying.		
		NOTE: If you have							
		pending application f have TPS, select <b>Iten</b>			•	Part 2. Information About You			
	each time that you previously applied, including the receipt number (if available) and the outcome (if any)		ing the	You	ır Full Nan	ne			
		of each application.	If you currently l	nave a p	ending	1.a.	Family Nam (Last Name)		
		TPS application, plea it and the application				1.b.	Given Name		
		Part 11. Additional recall or have incomp					(First Name)		
		TPS applications, ple can, even if incomple	ase provide the i			1.c.	Middle Nam	ne	
2.		ou selected <b>Item Num</b> nted you TPS.	iber 1.b., please	indicate	e who				
		USCIS							
	Immigration Judge/Board of Immigration Appeals								

#### Part 2. Information About You (continued) Other Information 7. Alien Registration Number (A-Number) (if any) Other Names Used Provide all other names you have used since birth, including 8. USCIS Online Account Number (if any) aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 11. Additional Information. 9. U.S. Social Security Number (if any) Family Name (Last Name) 2.b. Given Name Date of Birth (mm/dd/yyyy) (First Name) Middle Name Other Dates of Birth Used (if any) Family Name Provide all other dates of birth you have ever used. If you need (Last Name) extra space to complete this section, use the space provided in **3.b.** Given Name Part 11. Additional Information. (First Name) 11.a. Other Date of Birth 3.c. Middle Name (mm/dd/yyyy) 11.b. Other Date of Birth U.S. Mailing Address (mm/dd/yyyy) 4.a. In Care Of Name 12. Gender Male Female 13. City/Town/Village of Birth Street Number 4.b. and Name Country of Birth 14. Apt. Ste. Flr. 4.d. City or Town Countries of Residence (Before entering the U.S.) 4.f. ZIP Code State 15.a. 15.b. Is your current mailing address the same as your physical 5. address (where you live)? Yes 15.c. 15.d. If you answered "No" to Item Number 5., please provide your physical address below. Country or Countries of Citizenship or Nationality (if any) (List all countries that apply.) U.S. Physical Address 16.a. Street Number 6.a. 16.b. and Name | Flr. 16.c. 16.d. **6.c.** City or Town Your Marital Information **6.e.** ZIP Code 6.d. State Current Marital Status (Select only one box) ☐ Married Single, Never Married Divorced Widowed Separated Marriage Annulled Other

Par	t 2. Information About You (continued)	You	ur Current Immigration Status		
18.	Date of Current Marriage (if currently married)	31.	Current Immigration Status or Lack of	of Status	
	(mm/dd/yyyy)				
U.S	. Entry Information	32.	Are you now or were you <b>EVER</b> in it proceedings?	immigration	
19.	Date of Last Entry into the United States (mm/dd/yyyy)		ou answered "Yes" to <b>Item Number 32</b> owing information.	2., provide the	
20.	Immigration Status (or Lack of Status) When You Last	Тур	e of Proceedings (Select all boxes that	apply):	
	Entered the United States (for example, visitor, student, no status)	<b>33.a.</b>			
		33.b. Board of Immigration Appeals (BIA)			
	e of Last Entry into the United States	33.c	I am no longer in Department of Department of Homeland Securi immigration proceedings, but I a	ity (DHS)	
21.	U.S. Port of Entry (if any)		court proceedings regarding imn		
22.a.	City or Town	34.	Locations Where Your DOJ and/or E were Held (or are currently being hel		
	State	35.	Locations Where Your Federal Court Regarding Immigration Issues were I being held) (if applicable)		
23.	Form I-94 Arrival-Departure Record Number (if any)		being field) (If applicable)		
24.	Date Your Authorized Period of Stay in the United States	Date	es for Your Proceedings		
	Expired or Will Expire (as shown on Form I-94 or Crewman's Landing Permit (Form I-95)) (mm/dd/yyyy or duration of status (D/S)	NO blan	<b>ΓE:</b> If your proceedings are ongoing, lk. If you have been in more than one the Federal Court, list dates for each time	type of proceedings,	
25.	Passport Number (most recent passport) (if any) (If you			period.	
	have other expired or valid passports, please list all of them and provide all information requested below about	36.a	. From (mm/dd/yyyy)		
	each passport.)	<b>36.</b> b	To (mm/dd/yyyy)		
		36.c	. Present		
26.	Travel Document Number (if any)				
		Pal	rt 3. Biographic Information		
27.	Additional Passport or Travel Document Number	1.	Ethnicity (Select only one box)		
			Hispanic or Latino		
28.	Additional Passport or Travel Document Number		☐ Not Hispanic or Latino		
		2.	Race (Select all applicable boxes)		
29.	Country of Issuance for most recent Passport or Travel		White		
	Document		Asian		
20	Enginetics Data for word was 4 D 4 T = 1		Black or African American		
30.	Expiration Date for most recent Passport or Travel Document (mm/dd/yyyy)		American Indian or Alaska Nativ	e	
			Native Hawaiian or Other Pacific	Islander	

Pai	rt 3. Biographic Information (continued)	Mai	ling Address of Spouse	
3.	Height Feet Inches	4.a.	Street Number and Name	
4.	Weight Pounds Dunds	4.b.	Apt. Ste. Flr.	
5.	Eye Color (Select only one box)	4.c.	City or Town	
	Black Blue Brown	4.d.	State 4.e. ZIP Code	
	Gray Green Hazel			
	Maroon Pink	4.f.	Province	
	Unknown/Other	4.g.	Postal Code	
6.	Hair Color (Select only one box)	4.h.	Country	
	Bald (No hair) Black Blond			
	Brown Gray Red	Oth	er Information About Your C	urrent Snouse
	Sandy White	5.	Your Spouse's Date of Birth	arrem Spouse
	Unknown/Other	5.	(mm/dd/yyyy)	
		6.	Date of Marriage to Your Current S	pouse
	et 4. Information About Your Current Spouse		(mm/dd/yyyy)	
,	any)	7.	Place of Marriage to Your Current S	Spouse
	plete this section only if you are filing a <b>late initial</b> ication for TPS. See the form instructions for information			
	equirements for late initial filing for TPS. If you need extra e to complete this section on all former spouses and all of	8.a.	City or Town	
your	children, please use the space provided in Part 11.			
	itional Information.	8.b.	State	
Prov marr	ide the following information about your current spouse (if ied).	8.c.	Province (if any)	
1.	USCIS Online Account Number (if any and if known)	8.d.	Country	
	<b>&gt;</b>			
2.	A-Number (if any and if known)	9.	If you know, has your current spous	
	► A-			Yes No
3.a.	Family Name (Last Name)	If yes	, what dates did he or she have TPS'	?
3.b.	Given Name	10.a.	From (mm/dd/yyyy)	
	(First Name)	10.b.	To (mm/dd/yyyy)	
3.c.	Middle Name	10.c.	Present	
		10.d.	I do not know the dates	
		11.	Is your spouse's TPS still valid? (if	known)
			Yes No	I Do Not Know

## Part 5. Information About Your Former Spouses (if any)

Complete this section only if you are filing a **late initial** application for TPS. See the form instructions for information on requirements for late initial filing for TPS. If you need extra space to complete this section on all former spouses or all of your children, please use the space provided in **Part 11**. **Additional Information**.

Nai	mes of All Your Former Spe	ouses (if any)
First	t Marriage	
1.a.	Family Name (Last Name)	
1.b.	Given Name (First Name)	
1.c.	Middle Name	
2.	Nationalities of Former Spouse	
3.	A-Number of Former Spouse (if  ▶ A-	any and if known)
4.	Date of Birth of Former Spouse (mm/dd/yyyy)	
5.	Date of Death if Former Spouse (mm/dd/yyyy)	Deceased
Date	s of Marriage to Former Spouse	
6.a.	From (mm/dd/yyyy)	
6.b.	To (mm/dd/yyyy)	
7.	How Marriage Ended (for examannulled)	ple, divorce, widowed,
8.	Did or does this former spouse h	ave TPS (if known)? No
If ye	s, what dates did he or she have T	PS (if known)?
9.a.	From (mm/dd/yyyy)	
9.b.	To (mm/dd/yyyy)	
9.c.	Present	
9.d.	I do not know the dates	
10.	Is this former spouse currently a registering for TPS (if known)?	pplying for or re-
	Yes	No I Do Not Know

Seco	nd Marriage			
11.a.	Family Name (Last Name)			
11.b.	Given Name (First Name)			
11.c.	Middle Name			
12.	Nationalities o	f Former Spo	ouse	
13.	A-Number of I	Former Spou	se (if any	and if known)
		<b>A-</b>		
14.	Date of Birth of (mm/dd/yyyy)	of Former Sp	ouse	
15.	Date of Death	if Former Sp	ouse Dec	eased
	(mm/dd/yyyy)			
Date	s of Marriage to	Former Spo	use	
16.a.	From (mm/dd/	уууу)		
16.b.	. To (mm/dd/yy	уу)		
17.	How Marriage annulled)	Ended (for 6	example, o	livorce, widowed,
18.	Did or does thi	s former spo	use have	TPS (if known)?
18.	Did or does thi	s former spo	use have	TPS (if known)?
	Did or does thi	Yes	No	☐ I Do Not Know
If yes		Yes  I he or she ha	No	☐ I Do Not Know
If yes 19.a.	s, what dates dic	Yes I he or she hayyyyy)	No	☐ I Do Not Know
If yes 19.a. 19.b.	s, what dates did From (mm/dd/	Yes I he or she hayyyyy)	No	☐ I Do Not Know
If yes 19.a. 19.b. 19.c.	s, what dates did From (mm/dd/ To (mm/dd/yy	Yes  I he or she hayyyyy)  yyy)	No	☐ I Do Not Know
If yes 19.a. 19.b. 19.c.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present	Yes  I he or she hayyyy)  yyy)  ow the dates spouse currer	□ No  ave TPS (	I Do Not Know
If yes 19.a. 19.b. 19.c. 19.d.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present I do not known is this former s	Yes  I he or she hayyyy)  yyy)  ow the dates spouse currer	No No TPS (	I Do Not Know
If yes 19.a. 19.b. 19.c. 19.d.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present I do not known is this former s	Yes  I he or she hayyyyy)  yy)  ow the dates spouse current TPS (if know	No No TPS (	I Do Not Know if known)?
If yes 19.a. 19.b. 19.c. 19.d.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present I do not known is this former s	Yes  I he or she hayyyyy)  yy)  ow the dates spouse current TPS (if know	No No TPS (	I Do Not Know if known)?
If yes 19.a. 19.b. 19.c. 19.d.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present I do not known is this former s	Yes  I he or she hayyyyy)  yy)  ow the dates spouse current TPS (if know	No No TPS (	I Do Not Know if known)?
If yes 19.a. 19.b. 19.c. 19.d.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present I do not known is this former s	Yes  I he or she hayyyyy)  yy)  ow the dates spouse current TPS (if know	No No TPS (	I Do Not Know if known)?
If yes 19.a. 19.b. 19.c. 19.d.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present I do not known is this former s	Yes  I he or she hayyyyy)  yy)  ow the dates spouse current TPS (if know	No No TPS (	I Do Not Know if known)?
If yes 19.a. 19.b. 19.c. 19.d.	s, what dates did From (mm/dd/ To (mm/dd/yy) Present I do not known is this former s	Yes  I he or she hayyyyy)  yy)  ow the dates spouse current TPS (if know	No No TPS (	I Do Not Know if known)?

Part 6.	Information About Your Children
(if any)	
	this section only if you are filing a late initial

Complete this section only if you are filing a **late initial** application for TPS. See the form instructions for information on requirements for late initial filing for TPS. If you need extra space to complete this section on all former spouses or all of your children, please use the space provided in **Part 11**. **Additional Information**.

Provide the following information about each of your children (if any). If you need extra space to complete this section, use the space provided in **Part 11. Additional Information**.

	•
Chil	d 1
1.a.	Family Name (Last Name)
1.b.	Given Name (First Name)
1.c.	Middle Name
2.	USCIS Online Account Number (if any and if known)
	<b>▶</b>
3.	Alien Registration Number (A-Number) (if any and if known)  ► A-
4.	Date of Birth (mm/dd/yyyy)
Ma	iling Address
5.a.	Street Number and Name
5.b.	Apt. Ste. Flr.
5.c.	City or Town
5.d.	State 5.e. ZIP Code
5.f.	Province
5.g.	Postal Code
5.h.	Country
	as child has or had TPS, please provide the dates of his or TPS (if known).
6.a.	From (mm/dd/yyyy)
6.b.	To (mm/dd/yyyy)
7.	If you know, is this child currently applying for or re- registering for TPS (if known)? Yes No

Chil	1.2						
	Child 2						
8.a.	Family Name (Last Name)						
8.b.	Given Name (First Name)						
8.c.	Middle Name						
9.	USCIS Online	Account Number (if any and if known)					
10.	Alien Registrat known)	tion Number (A-Number) (if any and if					
11.	Date of Birth (	mm/dd/yyyy)					
Mai	iling Address						
12.a.	Street Number and Name						
12.b.	Apt. S	Ste. Flr.					
12.c.	City or Town						
12.d.	State	12.e. ZIP Code					
12.f.	Province						
12.g.	Postal Code						
12.h.	Country						
	s child has or ha PS (if known).	d TPS, please provide the dates of his or					
13.a.	From (mm/dd/	уууу)					
13.b.	To (mm/dd/yy	yy)					
14.	-	this child currently applying for or re- TPS (if known)? Yes No					
Par	t 7. Eligibili	ty Standards					
Bas	is for Eligibi	lity					
Provi	de the following	g information:					
1.a.	I am a national	of (or a person having no nationality who					

last habitually resided in the country of):

Par	rt 7. Eligibility Standards) (continued)	Your Immigration and Criminal History		
1.b. 1.c.	I entered the United States on the following date, and have resided in the United States since that time.  (mm/dd/yyyy)  Have you EVER traveled to and entered another country, other than the one listed in Item Number 1.a. before you	To be eligible for TPS, you must be <b>admissible</b> as an immigran to the United States, with certain exceptions. The questions below and your responses to these questions will help USCIS determine if you are eligible for TPS. See the <b>Who Is Eligible for TPS</b> section of the Instructions for additional information on admissibility and available waivers.		
infor coun State	u answered "Yes" to Item Number 1.c., provide the rmation requested in Item Numbers 2 5. for EACH stry you traveled to and entered prior to entering the United es. If you need extra space to complete this section, use the provided in Part 11. Additional Information.	If any of the questions apply to you, please provide information about the events, including the places and dates of occurrence. Provide a full explanation of the circumstances related to the specific event. If you need additional space to respond to a question, use the space provided in <b>Part 11. Additional Information</b> .		
2.	Name of All the Other Countries to Which You Traveled	Criminal Offenses		
Date	and Entered Prior to Entering the United States  s That You Were in the Other Country or Countries	If you were <b>EVER</b> arrested or detained for an offense, you must provide information about the event regardless of the country where the event occurred. If you were arrested, charged, or convicted for an offense, you must provide		
3.a.	From (mm/dd/yyyy)	certified court dispositions showing the court proceedings' outcome wherever possible. You also must provide copies of		
3.b.	To (mm/dd/yyyy)	arrest reports, statements of charges, indictment information, or any other charging document issued against you. If you were		
4.	Your Immigration Status, if Any, in the Other Country (for example, citizen, legal permanent resident, refugee, asylee, visitor, student, temporary resident, or no status)	not charged with any crime or offense, provide a statement or other documentation from the arresting authority or prosecutor's office to show that you were not charged with any crime or offense.		
<ul><li>5.</li><li>6.</li></ul>	Have you <b>EVER</b> been offered any immigration status by another country that you did not accept?  Yes No  If you answered "Yes" to <b>Item Number 5.</b> , please	<b>NOTE:</b> If you are not able to provide the documentation requested above, provide a signed statement as to why you cannot provide such documentation. USCIS usually needs supporting documentation, however, we do recognize that country conditions in certain TPS-designated countries may not allow an applicant to obtain the documents. Each statement		
0.	describe the country or countries, the nature of the immigration status you were offered, and the dates when	will be carefully reviewed by USCIS, and we may need to as you for additional information.		
	it was offered.	Please carefully read <b>Item 6.</b> in the <b>General Requirements</b> section of the Instructions for additional information that you must provide if official documents regarding your criminal history are not available to you.		
7.	If you answered "Yes" to <b>Item Number 5.</b> , please	Human Rights Violations		
	describe why you chose not to accept the immigration status offered to you by the other country or countries.	If you have ever engaged in, ordered, incited, assisted, or otherwise participated in any human rights violations, you must provide information about the events, including the place and date, and a description of the event regardless of the country where the events occurred.		
		Have you <b>EVER</b> been convicted of:		
		<b>8.a.</b> Any felony committed in the United States?  Yes No		
		<b>8.b.</b> Any misdemeanor committed in the United States?		

Par	t 7. Eligibility Standards (continued)	nued)	any financial or other benefit from the unlawful activi	
8.c.	Any particularly serious crime committed outside the United States?	ed either in or Yes No	of your spouse (including former spouses) or parents, you knew, or reasonably should have known, that the financial or other benefit was the product of such illic	and
9.a.	Have you <b>EVER</b> ordered, incited, assis participated in the persecution of any perfect of race, religion, nationality, membersh social group, or political opinion?	erson on account	activity? Yes Yes Have you <b>EVER</b> engaged, or do you plan to engage, solely principally, or incidentally, in any of the following:	No ,
9.b.	Have you <b>EVER</b> committed serious no outside of the United States prior to you United States?		<ul><li>13.a. Any activity to violate any law of the United States relating to espionage or sabotage? Yes 13.b. Any activity to violate or evade any law prohibiting the states are relating to explain the states of the united States are relating to espionage.</li></ul>	No he
9.c.	Have you <b>EVER</b> or are you <b>NOW</b> engathat could be reasonable grounds for coare a danger to the security of the Unite	aged in activities ncluding that you	export from the United States of goods, technology, o sensitive information?	
		Yes No	<b>13.c.</b> Any other unlawful activity in the United States?  Yes	No
	you <b>EVER</b> been convicted of or have y nitted acts which constitute the essential		<b>13.d.</b> Any activity in which a purpose is to oppose, control, overthrow the Government of the United States by for	
	A crime (other than a purely political or	Yes No	violence, or other unlawful means, including but not limited to participating in such activities, giving supp- to others involved in such activities, or being a memb	ort
10.b.	A violation of any law relating to a con as defined in section 102 of the Control Act?		representative of a terrorist organization?	No
10.c.	A conspiracy to violate any law relating substance as defined in section 102 of t	g to a controlled	14.a. Have you EVER or are you NOW engaged in terroris activities?	st No
11.	Substances Act?  Have you <b>EVER</b> been convicted of two offenses (other than purely political offenses)	enses) for which	14.b. Have you EVER or are you NOW engaged in or plan engage in activities in the United States that would hat potentially serious adverse foreign policy consequence for the United States?	ave
	you received sentences to confinement combined, total five years or more?	that, when Yes No	<b>14.c.</b> Have you <b>EVER</b> been or are you <b>NOW</b> a member of Communist or other totalitarian party, except when	the
12.a.	Have you <b>EVER</b> trafficked in or are you trafficking in any controlled substance?		membership was involuntary?	No
101	NOW 1 PVED 1	Yes No	<b>14.d.</b> Have you <b>EVER</b> participated in Nazi persecution or genocide?	No
12.b.	Are you <b>NOW</b> or have you <b>EVER</b> kno abetted, conspired, or colluded with oth trafficking of any controlled substance?	ers in the unlawful	Have you EVER, whether in the United States or any otl country been:	her
4.5		Yes No	<b>15.a.</b> Arrested, for breaking or violating any law or ordinan excluding minor traffic violations?	
12.c.	Are you the spouse or child of an alien trafficked in any controlled substance?	who unlawfully	15.b. Cited, charged, or indicted, for breaking or violating a law or ordinance, excluding minor traffic violations?	No any
12.d.	Are you the spouse or child of an alien	who assisted,	Yes	No
	abetted, conspired, or colluded with oth trafficking of any controlled substance?	ers in the unlawful	15.c. Been convicted, fined, imprisoned, placed on probation received a suspended sentence or deferral of adjudicate for breaking or violating any law or ordinance, excluding minor traffic violations?	tion

Par	t 7. Eligibility Standards (cont	inued)	23.a.	Do you <b>NOW</b> have a communicable health significance?		
16.	Have you <b>EVER</b> been the beneficiary amnesty, rehabilitation decree, other a similar action?		23.b	Do you <b>NOW</b> have or have you <b>EVE</b> mental disorder and behavior (or a his is likely to recur) associated with the	story of bel	havior that
17.	Have you <b>EVER</b> committed a serious the United States and asserted immuniprosecution?		22	posed or may pose a threat to the propulation welfare of yourself or others?	erty, safet	y, or
18.a.	Have you <b>EVER</b> , within the past 10 y <b>NOW</b> engaged in prostitution or process.	•	23.c.	Are you <b>NOW</b> or have you <b>EVER</b> be drug addict?	een a drug a	No
	prostitution?	Yes No	24.	Have you <b>EVER</b> entered the United Stowaway?	States as a Yes	□No
	Have you <b>EVER</b> , within the past 10 y or indirectly) procured or attempted to prostitutes or persons for the purpose	o procure or import of prostitution?  Yes No	25.	Did the former Immigration and Natu (INS) <b>EVER</b> impose, or has DHS <b>EV</b> monetary penalties on you for produc documentation to obtain an immigration	ER imposing or usin	ed, civil g false
18.c.	Have you <b>EVER</b> , within the past 10 y whole or in part, the proceeds of prost	· ·			Yes	No
		Yes No	26.	Are you <b>NOW</b> subject to a final order section 274C (producing and/or using	false	
19.	Have you <b>EVER</b> been or do you interany other commercial vice?	d to be involved in Yes No		documentation to unlawfully satisfy a Immigration and Nationality Act)?	requireme	ent of the
20.a.	Have you <b>EVER</b> been ordered removed deported from the United States?	ed, and been  Yes No	27.	Do you <b>NOW</b> practice polygamy?	Yes	□No
	Have you <b>EVER</b> voluntarily departed under an order of removal?  If you answered "Yes" to either <b>Item</b>	the United States  Yes No	28.	Are you <b>NOW</b> the guardian of, and an accompanying, another individual who be inadmissible and who has been cer examiner to be helpless due to sickness mental disability, or infancy?	tified by a	medical l or
	<b>20.b.</b> above, have you re-entered the Uunlawfully at any time after you were voluntarily departed?	Jnited States deported or you Yes No	29.	Have you <b>EVER</b> detained, retained, of custody of a child having a lawful cla citizenship, outside the United States,	im to U.S.	
20.d.	If you answered "Yes" to <b>Item Numb</b> DHS reinstated your prior order of rer			granted custody?	Yes	☐ No
20.e.	Yes No  Have you <b>EVER</b> failed to attend or re	I Do Not Know	assis	e you <b>EVER</b> ordered, incited, called for ted, helped with, or otherwise participa wing:	-	-
	at any immigration proceedings to det admissibility or deportability?	ermine your	30.a.	. Acts involving torture or genocide?	Yes	□No
21.	Have you <b>EVER</b> , by fraud or willfully		30.b	. Killing any person?	Yes	No
	material fact, sought to obtain a visa of documentation, admission to the Unite other immigration benefit?		30.c.	Intentionally and severely injuring an	y person?	□No
22.	Have you <b>EVER</b> assisted any other pounited States in violation of the law?	erson to enter the	30.d	Engaging in any kind of sexual contact any person who was being forced or t		
			30.e.	Limiting or denying any person's abil religious beliefs?	ity to exerc	cise

Part 7. Eligibility Standards (continued)			are you <b>NOW</b> the spouse or child of, or are you yourself, n alien who knowingly aided, abetted, assisted,		
Have	you EVER:		conspired, or colluded with a human trafficker?		
	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, guerrilla group, militia, or insurgent organization?  Yes No  Served or worked in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?  Yes No	a a p k	Yes No  Within the previous five years, have you <b>EVER</b> obtained ny financial or other benefit from the human trafficking ctivity of your spouse (including former spouses) or arents, <b>and you</b> knew, or reasonably should have nown, that the financial or other benefit that you eceived resulted from such human trafficking?  Yes No		
32.	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?	la 1	Are you <b>NOW</b> or have you <b>EVER</b> engaged in money aundering as described in section 1956 or 1957 of Title 8, United States Code?  Yes No Now re you <b>NOW</b> or have you <b>EVER</b> been a knowing aider,		
33.	Have you <b>EVER</b> assisted with or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?  Yes No	40. H	bettor, assister, conspirator, or colluder with others in noney laundering?  Yes No  No  Iave you EVER been responsible for or directly carried ut particularly severe violations of religious freedom, as efined in section 3 of the International Religious reedom Act of 1998 (22 U.S.C. section 6402) while		
34.	Have you <b>EVER</b> received any type of military, paramilitary, or weapons training? Yes No		erving as a foreign government official?  Yes No		
<ul><li>35.</li><li>36.</li></ul>	Have you <b>EVER</b> unlawfully voted in a United States Federal, state, or local election?  Yes No  Have you <b>EVER</b> claimed to be a U. S. citizen (in writing or in any other way)?  Yes No	A	Ias an immigration judge or the Board of Immigration appeals <b>EVER</b> determined that you filed a frivolous sylum application in the past?		
37.a.	Have you <b>EVER</b> recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an		8. Applicant's Statement, Contact mation, Certification, and Signature		
37.b.	armed force or group?	Instruct I-821 w	: Read the <b>Penalties</b> section of the Form I-821 tions before completing this part. You must file Form while in the United States.		
38.a.	Have you <b>EVER</b> committed or conspired to commit human trafficking offenses, as defined in the section 103 of the Victims of Trafficking and Violence Protection Act of 2000, in the United States or outside the United States?		: Select the box for either Item Number 1.a. or 1.b. If ble, select the box for Item Number 2.  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.		
	Have you <b>EVER</b> knowingly aided, abetted, assisted, conspired, or colluded with a human trafficker?  Yes No  Are you <b>NOW</b> the spouse or child of an alien who committed or conspired to commit human trafficking offenses?  Yes No	1.b. [ 2. [	The interpreter named in <b>Part 9.</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 everything.  At my request, the preparer named in <b>Part 10.</b> ,  prepared this application for me based only upon information I provided or authorized.		

# Part 8. Applicant's Statement, Contact Information, Certification, and Signature (continued)

#### Applicant's Contact Information

	1.1	
Applicant's Mo	bile Telephone	Number (if any)
Applicant's Em	ail Address (if	anv)

#### Applicant's 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 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.

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, 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.

#### Applicant's Signature

6.a.	Applicant's Signature	
$\Rightarrow$		
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 9. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Inte	erpreter's Full Name					
1.a.	Interpreter's Family Name (Last Name)					
1.b.	Interpreter's Given Name (First Name)					
2.	Interpreter's Business or Organization Name (if any)					
T-1.4	oungstanta Mailina Addusea					
	erpreter's Mailing Address					
3.a.	Street Number and Name 77 W Jackson Blvd					
3.b.	Apt. Ste. Flr.					
3.c.	City or Town Chicago					
3.d.	State IL 3.e. ZIP Code 60604					
3.f.	Province					
3.g.	Postal Code					
3.h.	. Country					
	USA					
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)					

#### Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and

which is the same language specified in **Part 8.**, **Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question and answer on the application, including the **Applicant's Certification**, and has verified the accuracy of every answer.

Par	t 9. Interpreter's Contact Information,	Preparer's Statement				
Cei	rtification, and Signature (continued)	7.a. I am not an attorney or accredited representative but				
Inte	erpreter's Signature	have prepared this application on behalf of the applicant and with the applicant's consent.				
<ul><li>7.a.</li><li>7.b.</li></ul>	Interpreter's Signature  Date of Signature (mm/dd/yyyy)	7.b.   I am an attorney or accredited representative and my representation of the applicant in this case  extends does not extend beyond the preparation of this application.				
Sig:	t 10. Contact Information, Declaration, and nature of the Person Preparing this plication, if Other Than the Applicant ide the following information about the preparer.	<b>NOTE:</b> If you are an attorney or accredited representative whose representation extends beyond preparation of this application, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States with this application.				
Pre	parer's Full Name	Preparer's Certification				
1.a. 1.b.	Preparer's Family Name (Last Name)  Preparer's Given Name (First Name)	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				
2.	Preparer's Business or Organization Name (if any)  contained in, and submitted with, his or her application, including the <b>Applicant's Certification</b> , and that all of the 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.					
Pre	parer's Mailing Address					
3.a.	Street Number and Name 77 W Jackson Blvd	Preparer's Signature  8.a. Preparer's Signature				
3.b.	Apt. Ste. Flr.					
3.c.	City or Town Chicago	<b>8.b.</b> Date of Signature (mm/dd/yyyy)				
3.d.	State IL 3.e. ZIP Code 60604					
3.f.	Province					
3.g.	Postal Code					
3.h.	USA					
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)					

Par	t 11. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
withing spaces to consider the same states the same states at the same same same same same same same sam	u need extra space to provide any additional information in this application, use the space below. If you need more than what is provided, you may make copies of this page implete and file with this application or attach a separate of paper. Type or print your name and A-Number (if any) to top of each sheet; indicate the <b>Page Number</b> , <b>Part</b> and <b>Item Number</b> to which your answer refers; and and date each sheet.	5.d.					
	Family Name (Last Name) Given Name						
1 c	(First Name) 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.					
4.a. 4.d.	Page Number 4.b. Part Number 4.c. Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number