

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 02/28/2021

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В	attorney or Form BIA-accredited attack		Attorney State Ba	ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)				
	TART HERE - Type or print								
Part	t 1. Information About Y	ou	You	ır U.S. M	ailing Address (USPS ZIP Code Lookup)				
	de the following information ab	•	7.a.	In Care Of	Name				
1.	Alien Registration Number (A-	Number) (if any)							
_	► A-		7.b.	Street Num and Name					
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				
			7.e.	State	7.f. ZIP Code				
You	r Full Name		8.	Is your current physical address the same as your maili address? Yes No					
	Family Name				wered "No" to Item Number 8. , provide your				
	(Last Name) Given Name			•	ddress in Item Numbers 9.a 9.e.				
	(First Name)		Voi	ır IIS Ph	ysical Address				
4.c.	Middle Name		9.a.	Street Num					
Othe	er Names Used (if any)		J.a.	and Name					
5.a.	Family Name (Last Name)		9.b.	Apt.	Ste. Flr.				
	Given Name		9.c.	City or To	wn				
	(First Name)		9.d.	State	9.e. ZIP Code				
5.c.	Middle Name				·				
6.a.	Family Name		Oth	er Inform	nation				
	(Last Name)		10.	Gender	Male Female				
	Given Name (First Name)		11.	Date of Bi	rth (mm/dd/yyyy)				
6.c.	Middle Name								

City or Town of Birth Country of Birth		o. State
		. From (On or about mm/dd/yyyy)
Country of Citizenship or Nationality	24.b. 25.	Immigration Status (At the time of entry)
Mother's Family Name (Last Name)		
Mother's Given Name (First Name)	26.	Are there other previous entries? Yes No If you answered "Yes" to Item Number 26. , include the place of entry, dates, and your immigration status at the time of entry for any other prior entries in the space
Father's Family Name (Last Name)		provided in Part 9. Additional Information .
Father's Given Name (First Name)	You	ur Immigration or Criminal History
r Last Entry Into the United States	27.	Are you currently in removal, exclusion, or deportation proceedings in which there is no final order issued by the immigration judge, the Board of Immigration Appeals, a DHS officer, or a Federal court yet? (This includes proceedings under INA section 239, an exclusion or
Date of Entry (On or about mm/dd/yyyy) Place or Port-of-Entry (Actual or approximate city or town)		deportation proceeding initiated before April 1,1997, a Visa Waiver Program removal proceeding under INA section 217, expedited removal under INA 235, and a request for a judicial removal order under INA section 238(c))? Yes No
State Immigration Status (At the time of entry)		If you answered "No" to Item Number 27. , go to Item Number 29.a. If you answered "Yes" to Item Number 27. , select the statement below (either Item Number 28.a. or 28.b.) that most accurately describes your curren situation.
r Previous Entries Into the United States	28.a.	
Place or Port-of-Entry (Actual or approximate city or town)		proceedings that are administratively closed and, at the time of filing my Form I-601A, have not been placed back on EOIR's calendar to continue my removal, exclusion, or deportation proceedings.
State From (On or about mm/dd/yyyy) To (On or about mm/dd/yyyy) Immigration Status (At the time of entry)		NOTE: You may be eligible for a provisional unlawful presence waiver. Provide a copy of the administrative closure order. Also, if U.S. Citizenship and Immigration Services (USCIS) approves your provisional unlawful presence waiver, you should seek termination or dismissal o your removal, exclusion, or deportation proceeding before you depart the United States for your
	Father's Family Name (Last Name) Father's Given Name (First Name) Father	Father's Family Name (Last Name) Father's Given Name (First Name) 7. **Last Entry Into the United States** Date of Entry (On or about mm/dd/yyyy) Place or Port-of-Entry (Actual or approximate city or town) State Immigration Status (At the time of entry) **Previous Entries Into the United States* vere previously in the United States as follows: Place or Port-of-Entry (Actual or approximate city or town) State From (On or about mm/dd/yyyy) To (On or about mm/dd/yyyy)

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Par	t 1. Information About You (continued)	31.	Are you currently subject to a grant of voluntary 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.						
	NOTE: 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 Item Number 31. 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 Item						
29.a.	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		Numbers 27 28.b. or Item Number 29.a. 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))? Yes No	ques prov of di 38. , 1	wer Item Numbers 32 38. If you answer "Yes" to any stion in Item Numbers 32 38. , your application for a visional unlawful presence waiver may be denied as a matter iscretion. For each "Yes" response for Item Numbers 32 provide the location and date of the event and a brief						
	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	Num crim- from show you	ription in Part 9. Additional Information . For Item alber 34., 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 Item Number 35. , 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 Item Number 29.b. If you answered "No" to Item Number 31.	32.	Have you EVER 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 EVER 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 EVER 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						
30.a.	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	35.	violations?						
30.b	under INA section 241(a)(5)?		imprisoned, or jailed in the United States, your home country, and/or any other country for any crime or offense? Yes No						
			Have you EVER trafficked in or are you NOW trafficking in any controlled substance? Yes No						

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Part 1. Information About You (continued)			Have you EVER assisted or participated in selling or providing weapons to any person who to your knowledge				
37.	Are you NOW or have you EVER knowingly assisted, abetted, conspired, or colluded with others in the unlawful trafficking of any controlled substance? Yes No	43.	used them against another person, or in transporting weapons to any person who to your knowledge used them against another person? Yes No Have you EVER received any type of military,				
38.	Are you NOW or have you EVER been engaged in prostitution? Yes No	44.	paramilitary, or weapons training? Yes No Have you EVER recruited, enlisted, conscripted, or used				
quest provi matte Num	wer Item Numbers 39.a 45. If you answer "Yes" to any tion in Item Numbers 39.a 45., your application for a sisional 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 9. Additional Information.	45.	any person under 15 years of age to serve in or help an armed force or group? Yes No Have you EVER used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat? Yes No				
			Yes No				
	you EVER ordered, incited, called for, committed, assisted, d with, or otherwise participated in any of the following:	-					
39.a.	Acts involving torture or genocide? Yes No	Par	rt 2. Biographic Information				
	Killing any person?	1.	Ethnicity (Select only one box) Hispanic or Latino				
	Intentionally and severely injuring any person?		Not Hispanic or Latino				
57.0.	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	2.	☐ White ☐ Asian				
39.e.	Limiting or denying any person's ability to exercise religious beliefs? Yes No		 □ Black or African American □ American Indian or Alaska Native □ Native Hawaiian or Other Pacific Islander 				
Have	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,	4.	Weight Pounds Pounds				
	militia, or insurgent organization? Yes No	5.	Eye Color (Select only one 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 EVER 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 only one box) Bald (No hair) Black Brown 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: 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 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) LPR Spouse 5.c. **3.d.** Given Name **5.d.** LPR Parent (First Name) 3.e. Middle Name

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Company or Organization Name

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, Declaration, Certification, and Signature

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

Applicant's	Statement
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	ΓE: Select the box for either Item Number 1.a. or 1.b. If icable, 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 Part 7. 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.
2.	At my request, the preparer named in Part 8. ,
	,
	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)
	L

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 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 laws.

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Part 6. Applicant's Statement, Contact Information, Declaration, 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 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.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.

Interpreter'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)

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:
I am	fluent in English and ,
	h is the same language specified in Part 6. , Item Number
	and I have read to this applicant in the identified language
	y question and instruction on this application and his or her
	rer to every question. The applicant informed me that he or
	anderstands every instruction, question, and answer on the cation, including the Applicant's Declaration and
	ification, and has verified the accuracy of every answer.
Inte	erpreter's Signature
7.a.	Interpreter's Signature
, .ct.	morprover o organical
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

- **7.a.** I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- **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.

NOTE: If you are an attorney or accredited representative, you may need 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 Declaration and 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 Signature

8.a. Preparer's Signature

8.b.	Date of Signature (mm/dd/yyyy)		

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Part 9. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the Page Number , Part Number , and Item Number to which your answer refers; and sign and date each sheet.	5.d.					
Last Name (Last Name)						
(First Name)						
I.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.					
4.a. Page Number 4.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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