



Application for Temporary Protected Status

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

USCIS
Form I-821

OMB No. 1615-0043
Expires 02/28/2027

For USCIS Use Only

Receipt	Action Block	Case ID: A-Number: Returned: Resubmitted: Relocated: Received: Sent:	
Remarks			
To be completed by an Attorney or Accredited Representative (if any).	<input checked="" type="checkbox"/> Select this box if Form G-28 or G-28I is attached.	Attorney State Bar Number (if applicable) A123456789	Attorney or Accredited Representative USCIS Online Account Number (if any) 9 8 7 6 5 4 3 2 1

► START HERE - Type or print in black ink.

Part 1. Type of Application (select one)

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.
- 1.b. This is my re-registration application for TPS. I currently have TPS, and am applying to re-register.

NOTE: If you have previously applied or have a pending application for TPS, but do not currently have TPS, select **Item Number 1.a.** and describe each time that you previously applied, including the receipt number (if available) and the outcome (if any) of each application. If you currently have a pending TPS application, please also describe when you filed it and the application receipt number (if available) in **Part 11. Additional Information.** If you do not recall or have incomplete information on your prior TPS applications, please provide the information you can, even if incomplete.

2. If you selected **Item Number 1.b.**, please indicate who granted you TPS.

- USCIS
 Immigration Judge/Board of Immigration Appeals

Are you also filing a request for employment authorization?

- 3.a. Yes, I am requesting an Employment Authorization Document (EAD), and I am filing Form I-765, Application for Employment Authorization, together with my Form I-821.

- 3.b. No, I am not currently requesting an EAD.

4. Name of designated TPS country under which you are applying.

CountryName

Part 2. Information About You

Your Full Name

- 1.a. Family Name (Last Name) Applicant Last Name
- 1.b. Given Name (First Name) Applicant First Name
- 1.c. Middle Name Middle Name



Part 2. Information About You (continued)

Other Names Used

Provide all other names you have used since birth, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 11. Additional Information.**

Additional Information.

2.a.	Family Name (Last Name)	Doe
2.b.	Given Name (First Name)	Jane
2.c.	Middle Name	A
3.a.	Family Name (Last Name)	Doe
3.b.	Given Name (First Name)	John
3.c.	Middle Name	M

U.S. Mailing Address

[\(USPS ZIP Code Lookup\)](#)

4.a.	In Care Of Name Guardian Name	
4.b.	Street Number and Name	123 Main St
4.c.	<input checked="" type="checkbox"/> Apt. <input checked="" type="checkbox"/> Ste. <input checked="" type="checkbox"/> Flr.	1
4.d.	City or Town	Anytown
4.e.	State	NY
4.f.	ZIP Code	12345
5.	Is your current mailing address the same as your physical address (where you live)?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No

If you answered "No" to **Item Number 5.**, please provide your physical address below.

U.S. Physical Address

6.a.	Street Number and Name	456 Another St
6.b.	<input checked="" type="checkbox"/> Apt. <input checked="" type="checkbox"/> Ste. <input checked="" type="checkbox"/> Flr.	2
6.c.	City or Town	Othertown
6.d.	State	CA
6.e.	ZIP Code	67890

Other Information

7.	Alien Registration Number (A-Number) (if any)										
	► A- <table border="1"><tr><td>A</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr></table>	A	1	2	3	4	5	6	7	8	
A	1	2	3	4	5	6	7	8			
8.	USCIS Online Account Number (if any)										
	► <table border="1"><tr><td>A</td><td>B</td><td>C</td><td>1</td><td>2</td><td>3</td><td></td><td></td><td></td><td></td></tr></table>	A	B	C	1	2	3				
A	B	C	1	2	3						
9.	U.S. Social Security Number (if any)										
	► <table border="1"><tr><td>1</td><td>2</td><td>3</td><td>-</td><td>4</td><td>5</td><td>-</td><td>6</td><td>7</td></tr></table>	1	2	3	-	4	5	-	6	7	
1	2	3	-	4	5	-	6	7			
10.	Date of Birth (mm/dd/yyyy)	01/01/1990									

Other Dates of Birth Used (if any)

Provide all other dates of birth you have ever used. If you need extra space to complete this section, use the space provided in **Part 11. Additional Information.**

11.a.	Other Date of Birth (mm/dd/yyyy)	01/02/1990
11.b.	Other Date of Birth (mm/dd/yyyy)	01/01/1990
12.	Gender	<input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female
13.	City/Town/Village of Birth	Birth City
14.	Country of Birth	Birth Country
Countries of Residence (Before entering the U.S.)		
15.a.	Other Info 1	
15.b.	Other Info 2	
15.c.	Other Info 3	
15.d.	Other Info 4	

Country or Countries of Citizenship or Nationality (if any)
(List all countries that apply.)

16.a.	Other Info 5
16.b.	Other Info 6
16.c.	Other Info 7
16.d.	Other Info 8

Your Marital Information

17.	Current Marital Status (Select only one box)	
	<input checked="" type="checkbox"/> Single, Never Married <input checked="" type="checkbox"/> Married	
	<input checked="" type="checkbox"/> Divorced <input checked="" type="checkbox"/> Widowed	
	<input checked="" type="checkbox"/> Separated <input checked="" type="checkbox"/> Marriage Annulled	
	<input checked="" type="checkbox"/> Other <table border="1"><tr><td>Other Status</td></tr></table>	Other Status
Other Status		



Part 2. Information About You (continued)

18. Date of Current Marriage (if currently married)
(mm/dd/yyyy) 01/01/1990

U.S. Entry Information

19. Date of Last Entry into the United States
(mm/dd/yyyy) 12/12/2024

20. Immigration Status (or Lack of Status) When You Last Entered the United States (for example, visitor, student, no status)
Status 1

Place of Last Entry into the United States

21. U.S. Port of Entry (if any)
Port

22.a. City or Town
Entry City

22.b. State

23. Form I-94 Arrival-Departure Record Number (if any)
► I 9 4 N u m b e r

24. Date Your Authorized Period of Stay in the United States 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)) Authorized Period

25. Passport Number (most recent passport) (if any) (If you have other expired or valid passports, please list all of them and provide all information requested below about each passport.)
Passport Number

26. Travel Document Number (if any)
Second Passport Number

27. Additional Passport or Travel Document Number
Additional Passport 1

28. Additional Passport or Travel Document Number
Additional Passport 2

29. Country of Issuance for most recent Passport or Travel Document
Country of Issuance

30. Expiration Date for most recent Passport or Travel Document (mm/dd/yyyy) Passport Expiratio

Your Current Immigration Status

31. Current Immigration Status or Lack of Status
Current Status

32. Are you now or were you EVER in immigration proceedings? Yes No

If you answered "Yes" to Item Number 32., provide the following information.

Type of Proceedings (Select all boxes that apply):

33.a. Immigration Court (before an Immigration Judge)

33.b. Board of Immigration Appeals (BIA)

33.c. I am no longer in Department of Justice (DOJ) or Department of Homeland Security (DHS) immigration proceedings, but I am or was in Federal court proceedings regarding immigration issues.

34. Locations Where Your DOJ and/or DHS Proceedings were Held (or are currently being held) (if applicable)
Location DOJ

35. Locations Where Your Federal Court Proceedings Regarding Immigration Issues were Held (or are currently being held) (if applicable)
Location Federal Court

Dates for Your Proceedings

NOTE: If your proceedings are ongoing, leave the "To" date blank. If you have been in more than one type of proceedings, or in Federal Court, list dates for each time period.

36.a. From (mm/dd/yyyy) Date From

36.b. To (mm/dd/yyyy) Date To

36.c. Present

Part 3. Biographic Information

1. Ethnicity (Select **only one** box)

Hispanic or Latino

Not Hispanic or Latino

2. Race (Select **all applicable** boxes)

White

Asian

Black or African American

American Indian or Alaska Native

Native Hawaiian or Other Pacific Islander



Part 3. Biographic Information (continued)

3. Height Feet **5** Inches **11**

4. Weight Pounds **11** **11** **11**

5. Eye Color (Select **only one** box)

Black Blue Brown
 Gray Green Hazel
 Maroon Pink
 Unknown/Other

6. Hair Color (Select **only one** box)

Bald (No hair) Black Blond
 Brown Gray Red
 Sandy White
 Unknown/Other

Mailing Address of Spouse

4.a. Street Number **123 Main St**
and Name

4.b. Apt. Ste. Flr. **1**

4.c. City or Town **Anytown**

4.d. State **NY** 4.e. ZIP Code **12345**

4.f. Province **Province**

4.g. Postal Code **Postal Code**

4.h. Country
Country

Other Information About Your Current Spouse

5. Your Spouse's Date of Birth
(mm/dd/yyyy) **01/01/1990**

6. Date of Marriage to Your Current Spouse
(mm/dd/yyyy) **01/01/2010**

7. Place of Marriage to Your Current Spouse
Place of Marriage

8.a. City or Town **City**

8.b. State

8.c. Province (if any) **Province**

8.d. Country
Country

9. If you know, has your current spouse **EVER** had TPS?
 Yes No

If yes, what dates did he or she have TPS?

10.a. From (mm/dd/yyyy) **01/01/2000**

10.b. To (mm/dd/yyyy) **01/01/2010**

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.

Names of All Your Former Spouses (if any)

First 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 any and if known)

► A-

4. Date of Birth of Former Spouse (mm/dd/yyyy)

5. Date of Death if Former Spouse Deceased (mm/dd/yyyy)

Dates of Marriage to Former Spouse

6.a. From (mm/dd/yyyy)

6.b. To (mm/dd/yyyy)

7. How Marriage Ended (for example, divorce, widowed, annulled)

8. Did or does this former spouse have TPS (if known)?

Yes No I Do Not Know

If yes, what dates did he or she have TPS (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 applying for or re-registering for TPS (if known)?

Yes No I Do Not Know

Second Marriage

11.a. Family Name (Last Name)

11.b. Given Name (First Name)

11.c. Middle Name

12. Nationalities of Former Spouse

13. A-Number of Former Spouse (if any and if known)

A-

14. Date of Birth of Former Spouse (mm/dd/yyyy)

15. Date of Death if Former Spouse Deceased (mm/dd/yyyy)

Dates of Marriage to Former Spouse

16.a. From (mm/dd/yyyy)

16.b. To (mm/dd/yyyy)

17. How Marriage Ended (for example, divorce, widowed, annulled)

18. Did or does this former spouse have TPS (if known)?

Yes No I Do Not Know

If yes, what dates did he or she have TPS (if known)?

19.a. From (mm/dd/yyyy)

19.b. To (mm/dd/yyyy)

19.c. Present

19.d. I do not know the dates

20. Is this former spouse currently applying for or re-registering for TPS (if known)?

Yes No I Do Not Know



Part 6. Information About Your Children

(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.

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.**

Child 1

- 1.a. Family Name (Last Name) Doe
- 1.b. Given Name (First Name) Junior
- 1.c. Middle Name J
2. USCIS Online Account Number (if any and if known)
► A 1 2 3 4 5 6 7 8 9
3. Alien Registration Number (A-Number) (if any and if known)
► A- A 5 6 7 8 9 0 1 2
4. Date of Birth (mm/dd/yyyy) 04/04/2004

Mailing Address

- 5.a. Street Number and Name 789 New St
- 5.b. Apt. Ste. Flr. 3
- 5.c. City or Town Sometown
- 5.d. State TX 5.e. ZIP Code 45678
- 5.f. Province Province
- 5.g. Postal Code Postal Code
- 5.h. Country Country

If this child has or had TPS, please provide the dates of his or her TPS (if known).

- 6.a. From (mm/dd/yyyy) Yes
- 6.b. To (mm/dd/yyyy) No
7. If you know, is this child currently applying for or re-registering for TPS (if known)? Yes No

Child 2

- 8.a. Family Name (Last Name) Doe
- 8.b. Given Name (First Name) Junior Jr.
- 8.c. Middle Name JJ
9. USCIS Online Account Number (if any and if known)
► A 1 2 3 4 5 6 7 8 9
10. Alien Registration Number (A-Number) (if any and if known)
► A- A 0 9 8 7 6 5 4 3

11. Date of Birth (mm/dd/yyyy) 04/04/2004

Mailing Address

- 12.a. Street Number and Name 789 New St
- 12.b. Apt. Ste. Flr. 3
- 12.c. City or Town Sometown
- 12.d. State TX 12.e. ZIP Code 45678
- 12.f. Province Province
- 12.g. Postal Code Postal Code
- 12.h. Country Country

If this child has or had TPS, please provide the dates of his or her TPS (if known).

- 13.a. From (mm/dd/yyyy) Yes
- 13.b. To (mm/dd/yyyy) No
14. If you know, is this child currently applying for or re-registering for TPS (if known)? Yes No

Part 7. Eligibility Standards

Basis for Eligibility

Provide the following information:

- 1.a. I am a national of (or a person having no nationality who last habitually resided in the country of):
Country



Part 7. Eligibility Standards) (continued)

- 1.b. I entered the United States on the following date, and have resided in the United States since that time.

(mm/dd/yyyy)

Yes

- 1.c. Have you **EVER** traveled to and entered another country, other than the one listed in **Item Number 1.a.** before you last entered the United States? Yes No

If you answered "Yes" to **Item Number 1.c.**, provide the information requested in **Item Numbers 2. - 5.** for **EACH** country you traveled to and entered prior to entering the United States. If you need extra space to complete this section, use the space provided in **Part 11. Additional Information.**

2. Name of All the Other Countries to Which You Traveled and Entered Prior to Entering the United States

Country 1

Dates That You Were in the Other Country or Countries

- 3.a. From (mm/dd/yyyy)

Country 2

- 3.b. To (mm/dd/yyyy)

Country 3

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)

Status

5. Have you **EVER** been offered any immigration status by another country that you did not accept?

Yes No

6. If you answered "Yes" to **Item Number 5.**, please describe the country or countries, the nature of the immigration status you were offered, and the dates when it was offered.

Description

7. If you answered "Yes" to **Item Number 5.**, please describe why you chose not to accept the immigration status offered to you by the other country or countries.

Yes

Your Immigration and Criminal History

To be eligible for TPS, you must be **admissible** as an immigrant 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 **Who Is Eligible for TPS** section of the Instructions for additional information on admissibility and available waivers.

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 **Part 11. Additional Information.**

Criminal Offenses

If you were **EVER** 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 certified court dispositions showing the court proceedings' outcome wherever possible. You also must provide copies of arrest reports, statements of charges, indictment information, or any other charging document issued against you. If you were 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.

NOTE: 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 will be carefully reviewed by USCIS, and we may need to ask you for additional information.

Please carefully read **Item 6.** in the **General Requirements** section of the Instructions for additional information that you must provide if official documents regarding your criminal history are not available to you.

Human Rights Violations

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 **EVER** been convicted of:

- 8.a. Any felony committed in the United States?

Yes No

- 8.b. Any misdemeanor committed in the United States?

Yes No



Part 7. Eligibility Standards (continued)

8.c. Any particularly serious crime committed either in or outside the United States? Yes No

9.a. Have you **EVER** ordered, incited, assisted, or otherwise participated in the persecution of any person on account of race, religion, nationality, membership in a particular social group, or political opinion? Yes No

9.b. Have you **EVER** committed serious nonpolitical crimes outside of the United States prior to your arrival in the United States? Yes No

9.c. Have you **EVER** or are you **NOW** engaged in activities that could be reasonable grounds for concluding that you are a danger to the security of the United States?
 Yes No

Have you **EVER** been convicted of or have you **EVER** committed acts which constitute the essential elements of:

10.a. A crime (other than a purely political offense)?
 Yes No

10.b. A violation of any law relating to a controlled substance as defined in section 102 of the Controlled Substances Act?
 Yes No

10.c. A conspiracy to violate any law relating to a controlled substance as defined in section 102 of the Controlled Substances Act?
 Yes No

11. Have you **EVER** been convicted of two or more criminal offenses (other than purely political offenses) for which you received sentences to confinement that, when combined, total five years or more? Yes No

12.a. Have you **EVER** trafficked in or are you **NOW** trafficking in any controlled substance?
 Yes No

12.b. 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

12.c. Are you the spouse or child of an alien who unlawfully trafficked in any controlled substance?
 Yes No

12.d. Are you the spouse or child of an alien who assisted, abetted, conspired, or colluded with others in the unlawful trafficking of any controlled substance?
 Yes No

12.e. Within the previous five years, have you **EVER** obtained any financial or other benefit from the unlawful activity of your spouse (including former spouses) or parents, and you knew, or reasonably should have known, that the financial or other benefit was the product of such illicit activity?
 Yes No

Have you **EVER** engaged, or do you plan to engage, solely, principally, or incidentally, in any of the following:

13.a. Any activity to violate any law of the United States relating to espionage or sabotage? Yes No

13.b. Any activity to violate or evade any law prohibiting the export from the United States of goods, technology, or sensitive information? Yes No

13.c. Any other unlawful activity in the United States?

Yes No

13.d. Any activity in which a purpose is to oppose, control, or overthrow the Government of the United States by force, violence, or other unlawful means, including but not limited to participating in such activities, giving support to others involved in such activities, or being a member or representative of a terrorist organization?

Yes No

14.a. Have you **EVER** or are you **NOW** engaged in terrorist activities? Yes No

14.b. Have you **EVER** or are you **NOW** engaged in or plan to engage in activities in the United States that would have potentially serious adverse foreign policy consequences for the United States? Yes No

14.c. Have you **EVER** been or are you **NOW** a member of the Communist or other totalitarian party, except when membership was involuntary? Yes No

14.d. Have you **EVER** participated in Nazi persecution or genocide? Yes No

Have you **EVER**, whether in the United States or any other country been:

15.a. Arrested, for breaking or violating any law or ordinance, excluding minor traffic violations? Yes No

15.b. Cited, charged, or indicted, for breaking or violating any law or ordinance, excluding minor traffic violations?

Yes No

15.c. Been convicted, fined, imprisoned, placed on probation, received a suspended sentence or deferral of adjudication for breaking or violating any law or ordinance, excluding minor traffic violations? Yes No



Part 7. Eligibility Standards (continued)

16. Have you **EVER** been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action? Yes No
17. Have you **EVER** committed a serious criminal offense in the United States and asserted immunity from prosecution? Yes No
- 18.a. Have you **EVER**, within the past 10 years, or are you **NOW** engaged in prostitution or procurement of prostitution? Yes No
- 18.b. Have you **EVER**, within the past 10 years (either directly or indirectly) procured or attempted to procure or import prostitutes or persons for the purpose of prostitution? Yes No
- 18.c. Have you **EVER**, within the past 10 years, received, in whole or in part, the proceeds of prostitution? Yes No
19. Have you **EVER** been or do you intend to be involved in any other commercial vice? Yes No
- 20.a. Have you **EVER** been ordered removed, and been deported from the United States? Yes No
- 20.b. Have you **EVER** voluntarily departed the United States under an order of removal? Yes No
- 20.c. If you answered "Yes" to either **Item Number 20.a.** or **20.b.** above, have you re-entered the United States unlawfully at any time after you were deported or you voluntarily departed? Yes No
- 20.d. If you answered "Yes" to **Item Number 20.c.** above, has DHS reinstated your prior order of removal? Yes No I Do Not Know
- 20.e. Have you **EVER** failed to attend or remain in attendance at any immigration proceedings to determine your admissibility or deportability? Yes No
21. Have you **EVER**, by fraud or willfully misrepresenting a material fact, sought to obtain a visa or other documentation, admission to the United States, or any other immigration benefit? Yes No
22. Have you **EVER** assisted any other person to enter the United States in violation of the law? Yes No

- 23.a. Do you **NOW** have a communicable disease of public health significance? Yes No
- 23.b. Do you **NOW** have or have you **EVER** had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or welfare of yourself or others? Yes No
- 23.c. Are you **NOW** or have you **EVER** been a drug abuser or drug addict? Yes No
24. Have you **EVER** entered the United States as a stowaway? Yes No
25. Did the former Immigration and Naturalization Service (INS) **EVER** impose, or has DHS **EVER** imposed, civil monetary penalties on you for producing or using false documentation to obtain an immigration benefit? Yes No
26. Are you **NOW** subject to a final order for violation of section 274C (producing and/or using false documentation to unlawfully satisfy a requirement of the Immigration and Nationality Act)? Yes No
27. Do you **NOW** practice polygamy? Yes No
28. Are you **NOW** the guardian of, and are you accompanying, another individual who has been found to be inadmissible and who has been certified by a medical examiner to be helpless due to sickness, physical or mental disability, or infancy? Yes No
29. Have you **EVER** detained, retained, or withheld the custody of a child having a lawful claim to U.S. citizenship, outside the United States, from a U.S. citizen granted custody? Yes No
- Have you **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:
- 30.a. Acts involving torture or genocide? Yes No
- 30.b. Killing any person? Yes No
- 30.c. Intentionally and severely injuring any person? Yes No
- 30.d. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened? Yes No
- 30.e. Limiting or denying any person's ability to exercise religious beliefs? Yes No



Part 7. Eligibility Standards (continued)

Have you **EVER**:

- 31.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, guerrilla group, militia, or insurgent organization? Yes No
- 31.b.** Served or worked in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No
- 32.** 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
- 33.** Have you **EVER** 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
- 34.** Have you **EVER** received any type of military, paramilitary, or weapons training? Yes No
- 35.** Have you **EVER** unlawfully voted in a United States Federal, state, or local election? Yes No
- 36.** Have you **EVER** claimed to be a U. S. citizen (in writing or in any other way)? Yes No
- 37.a.** Have you **EVER** recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group? Yes No
- 37.b.** 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
- 38.a.** Have you **EVER** 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? Yes No
- 38.b.** Have you **EVER** knowingly aided, abetted, assisted, conspired, or colluded with a human trafficker? Yes No
- 38.c.** Are you **NOW** the spouse or child of an alien who committed or conspired to commit human trafficking offenses? Yes No

- 38.d.** Are you **NOW** the spouse or child of, or are you yourself, an alien who knowingly aided, abetted, assisted, conspired, or colluded with a human trafficker? Yes No

- 38.e.** Within the previous five years, have you **EVER** obtained any financial or other benefit from the human trafficking activity of your spouse (including former spouses) or parents, **and you** knew, or reasonably should have known, that the financial or other benefit that you received resulted from such human trafficking?

Yes No

- 39.a.** Are you **NOW** or have you **EVER** engaged in money laundering as described in section 1956 or 1957 of Title 18, United States Code? Yes No

- 39.b.** Are you **NOW** or have you **EVER** been a knowing aider, abettor, assister, conspirator, or colluder with others in money laundering? Yes No

- 40.** Have you **EVER** been responsible for or directly carried out particularly severe violations of religious freedom, as defined in section 3 of the International Religious Freedom Act of 1998 (22 U.S.C. section 6402) while serving as a foreign government official?

Yes No

- 41.** Has an immigration judge or the Board of Immigration Appeals **EVER** determined that you filed a frivolous asylum application in the past? Yes No

Part 8. Applicant's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-821 Instructions before completing this part. You must file Form I-821 while in the United States.

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, 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 9.** read to me every question and instruction on this application and my answer to every question in **Language** a language in which I am fluent, and I understood everything.
- 2.** At my request, the preparer named in **Part 10.,** **Preparer Name** 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

3. Applicant's Daytime Telephone Number

123-456-7890

4. Applicant's Mobile Telephone Number (if any)

098-765-4321

5. Applicant's Email Address (if any)

applicant@example.com

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

→ Preparer Signature

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

05/05/2024

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.

Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)

Preparer Last Name

1.b. Interpreter's Given Name (First Name)

Preparer First Name

2. Interpreter's Business or Organization Name (if any)

Organization Name

Interpreter's Mailing Address

3.a. Street Number and Name

123 Org St

3.b. Apt. Ste. Flr.

5

3.c. City or Town

Org City

3.d. State

45678

3.e. ZIP Code

3.f. Province

Province

3.g. Postal Code

Postal Code

3.h. Country

Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

123-456-7890

5. Interpreter's Mobile Telephone Number (if any)

098-765-4321

6. Interpreter's Email Address (if any)

preparer@example.com

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and

Province

, 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.



Part 9. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Signature

7.a. Interpreter's Signature

Applicant Signature

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

05/05/2024

Part 10. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name)

Applicant Last Name

1.b. Preparer's Given Name (First Name)

Applicant First Name

2. Preparer's Business or Organization Name (if any)

Organization Name

Preparer's Mailing Address

3.a. Street Number and Name
123 Org St

3.b. Apt. Ste. Flr. 5

3.c. City or Town
Org City

3.d. State
[]

3.e. ZIP Code
45678

3.f. Province
Province

3.g. Postal Code
Postal Code

3.h. Country
Country

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

123-456-7890

5. Preparer's Mobile Telephone Number (if any)

098-765-4321

6. Preparer's Email Address (if any)

preparer@example.com

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 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.

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 Signature

8.a. Preparer's Signature

Preparer Signature

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

05/05/2024



Part 11. Additional Information

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.

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

3.d. Additional Info

5.a. Page Number 5.b. Part Number 5.c. Item Number

5.d. Additional Info

6.a. Page Number 6.b. Part Number 6.c. Item Number

6.d. Additional Info

4.a. Page Number 4.b. Part Number 4.c. Item Number

4.d. Additional Info

7.a. Page Number 7.b. Part Number 7.c. Item Number

7.d. Additional Info

