# **Department of Homeland Security**

U.S. Citizenship and Immigration Services

# **U.S. Department of Justice**

Executive Office for Immigration Review

I-589, Application for Asylum and for Withholding of Removal

OMB No. 1615-0067; Expires 06/30/2026

Applicant: Shun Lae Thu

Submission Date: 2024-04-01T05:06:27UTC

Do you also want to apply for withholding of removal under the Convention Against Torture?: Yes

#### Part A.I. Information About You

- 1. Alien Registration Number(s) (A-Number) (if any):
- 2. U.S. Social Security Number (if any):
- 3. USCIS Online Account Number (if any):
- 4. Complete Last Name: Thu5. First Name: Shun Lae
- 6. Middle Name:
- 7. What other names have you used (include maiden name and aliases)?

# 8. Residence in the U.S. (where you physically reside)

Street Number and Name: 3517 62ND ST

Apt. Number: City: WOODSIDE

State: NY

**ZIP Code:** 11377-2135

**Telephone Number: 929-682-8477** 

#### 9. Mailing Address in the U.S. (if different than the address in Item Number 8)

In Care of (if applicable): Telephone Number:

Street Number and Name: 3517 62ND ST

Apt. Number:
City: WOODSIDE
State: NY

**ZIP Code:** 11377-2135

10. Gender (Male, Female): Female

- 11. Marital Status (Single, Married, Divorced, Widowed): single
- 12. Date of Birth (mm/dd/yyyy): 01/23/2004
- 13. City and Country of Birth:

City: Depayin
Country: MMR

- 14. Present Nationality (Citizenship): MMR
- 15. Nationality at Birth: MMR
- 16. Race, Ethnic, or Tribal Group: Burmese
- 17. Religion: Buddhism
- 18.a. I have never been in Immigration Court proceedings.: Yes
- 18.b. I am now in Immigration Court proceedings:
- 18.c. I am not now in Immigration Court proceedings, but I have been in the past:

19.a. When did you last leave your country? (mm/dd/yyyy): 08/03/2023

**Last Left Your Country Other:** 

19.b. What is your current I-94 Number, if any?: 476955683A3

19.c. List each entry into the U.S. beginning with your most recent entry. List date (mm/dd/yyyy), place, and your status for each entry. (Attach additional sheets as needed.)

Most Recent Entry Record: Date of Entry: 08/04/2023

Place of Entry: NYC
Other Place of Entry:

Status: F1

Date Status Expires: 07/11/2024

#### **Previous Entry Record(s):**

- 20. What country issued your last passport or travel document?: MMR
- **21. Passport/Travel Document Number:** MF364696
- **22. Expiration Date (mm/dd/yyyy):** 09/30/2026
- 23. What is your native language (include dialect, if applicable)?: BUR
- 24. Are you fluent in English?: Yes
- 25. What other languages do you speak fluently?

# Part A.II. Information About Your Spouse and Children

#### Your spouse

- 1. Alien Registration Number (A-Number) (if any):
- 2. Passport/ID Card Number (if any):
- 3. Date of Birth (mm/dd/yyyy):
- 4. U.S. Social Security Number (if any):
- 5. Complete Last Name:
- 6. First Name:
- 7. Middle Name:
- 8. Other names used (include maiden name and aliases)
- 9. Date of Marriage (mm/dd/yyyy):
- 10. Place of Marriage:
- 11. City and Country of Birth:

City:

Country:

- 12. Nationality (Citizenship):
- 13. Race, Ethnic, or Tribal Group:
- 14. Gender (Male, Female):
- 15. Is this person in the U.S.? "Yes " (Complete Blocks 16 to 24). "No" (Specify location):

Spouse Location:

16. Place of last entry into the U.S.:

Other Place of Last Entry:

- 17. Date of last entry into the U.S. (mm/dd/yyyy):
- 18. I-94 Number (if any):
- 19. Status when last admitted (Visa type, if any):
- 20. What is your spouse's current status?:
- 21. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy):

- 22. Is your spouse in Immigration Court proceedings?:
- 23. If previously in the U.S., date of previous arrival (mm/dd/yyyy):
- 24. If in the U.S., is your spouse to be included in this application?:

Your Children. List all of your children, regardless of age, location, or marital status.

I have children: No
Total number of children:

## Part A.III. Information About Your Background

1. List your last address where you lived before coming to the United States. If this is not the country where you fear persecution, also list the last address in the country where you fear persecution. (List Address, City/Town, Department, Province, or State and Country.)

Number and Street, Line 1 (Provide if Available): 1179 A Kar Boe Street 45 Ward

Number and Street, Line 2 (Provide if Available): North Dagon Township

City/Town: Yangon

**Department, Province, or State:** 

State: Zip Code:

Postal Code: 11421 Country: MMR

Dates: From (Month): 02 Dates: From (Year): 2021 Dates: To (Month): 08 Dates: To (Year): 2023

2. Provide the following information about your residences during the past 5 years. List your present address first.

Number and Street, Line 1: 3517 62nd Street

Number and Street, Line 2: City/Town: Woodside Department or Province:

State: NY
Postal Code:
ZIP Code: 11377
Country: USA

Dates:From(Month): 08
Dates:From(Year): 2023
Dates:To(Month):
Dates:To(Year):

Number and Street, Line 1: 1179 A Kar Boe Street, 45 Ward

Number and Street, Line 2: North Dagon Township

City/Town: Yangon
Department or Province:

State:

Postal Code: 11421

ZIP Code: Country: MMR

Dates:From(Month): 02
Dates:From(Year): 2021

Dates:To(Month): 08
Dates:To(Year): 2023

Number and Street, Line 1: 65 Street

Number and Street, Line 2: City/Town: Mandalay Department or Province:

State:

Postal Code: 05041

ZIP Code: Country: MMR

Dates:From(Month): 02 Dates:From(Year): 2018 Dates:To(Month): 01 Dates:To(Year): 2021

#### 3. Provide the following information about your education, beginning with the most recent school that you attended.

Name of School: Auston University

Type of School: University

Location (Address):

Street Name and Number: 17-18 Junction Square

Apt. No.: Kamaryut Township

City: Yangon
State:
ZIP Code:

Province:
Postal Code: 11041

Country: MMR
Dates:From(Month): 11
Dates:From(Year): 2021
Dates:To(Month): 04
Dates:To(Year): 2023

Name of School: Victory Education Center

Type of School: Private School

Location (Address):

Street Name and Number: 65 St and Cherry St

Apt. No.:

City: Mandalay

State: ZIP Code: Province:

Postal Code: 05041 Country: MMR ates:From(Month): 0

Dates:From(Month): 05 Dates:From(Year): 2018 Dates:To(Month): 03 Dates:To(Year): 2020 Name of School: Basic Education High School

Type of School: High School

Location (Address):

Street Name and Number: Saing Pyin, Depayin Town

Apt. No.:
City: Sagaing
State:

ZIP Code: Province:

Postal Code: 02251 Country: MMR

Dates:From(Month): 05 Dates:From(Year): 2009 Dates:To(Month): 02 Dates:To(Year): 2017

### 4. Provide the following information about your employment during the past 5 years. List your present employment first.

## 5. Provide the following information about your parents and siblings (brothers and sisters). Check the box if the person is deceased.

Relationship (Mother, Father, Sibling): Father

First Name: Zin Min Last Name: Htun Middle Name:

City/Town of Birth: Depayin, Sagaing

Country of Birth: MMR

Current Location: North Dagon Township, Yangon, Burma

Deceased:

Relationship (Mother, Father, Sibling): Mother

First Name: Khin Ma Ma

Last Name: Myo Middle Name:

City/Town of Birth: Depayin, Sagaing

Country of Birth: MMR

Current Location: North Dagon Township, Yangon, Burma

Deceased:

Relationship (Mother, Father, Sibling): Sibling

First Name: Yar Zar Min

Last Name: Htin Middle Name:

City/Town of Birth: Depayin, Sagaing

Country of Birth: MMR

Current Location: Tokyo, Japan

Deceased:

Relationship (Mother, Father, Sibling): Sibling

First Name: Bala Min Last Name: Htin Middle Name: City/Town of Birth: Depayin, Sagaing

Country of Birth: MMR

Current Location: Manchester, United Kingdom

Deceased:

## Part B. Information About Your Application

When answering the following questions about your asylum or other protection claim (withholding of removal under 241(b)(3) of the INA or withholding of removal under the Convention Against Torture), you must provide a detailed and specific account of the basis of your claim to asylum or other protection. To the best of your ability, provide specific dates, places, and descriptions about each event or action described. You must attach documents evidencing the general conditions in the country from which you are seeking asylum or other protection and the specific facts on which you are relying to support your claim. If this documentation is unavailable or you are not providing this documentation with your application, explain why in your responses to the following questions.

1. Why are you applying for asylum or withholding of removal under section 241(b)(3) of the INA, or for withholding of removal under the Convention Against Torture? I am seeking asylum or withholding of removal based on:

Race: Yes
Religion: Yes
Nationality: Yes
Political Opinion: Yes

Membership in a particular social group: Yes

**Torture Convention:** Yes

A. Have you, your family, or close friends or colleagues ever experienced harm or mistreatment or threats in the past by anyone?:

Yes

If "Yes," explain in detail: 1. What happened; 2. When the harm or mistreatment or threats occurred; 3. Who caused the harm or mistreatment or threats; and 4. Why you believe the harm or mistreatment or threats occurred.: The harm and threats I experienced were directly related to my involvement in pro-democracy activities, specifically my support for the Civil Disobedience Movement (CDM) in Myanmar. On October 11, 2022, police raided my home, arrested, and physically abused me and my family, citing my financial contributions to the CDM as their motive. These actions were carried out by the police under the military government's orders, aiming to suppress dissent and punish me for my political beliefs and activities.

B. Do you fear harm or mistreatment if you return to your home country?: Yes

If "Yes," explain in detail: 1. What harm or mistreatment you fear; 2. Who you believe would harm or mistreat you; and 3. Why you believe you would or could be harmed or mistreated.: I, Shun Lae Thu, fear further arrest, torture, and persecution due to my political activism against the military government, specifically for my support of the Civil Disobedience Movement (CDM). The police and military forces, acting under the government's directives, would likely target me again to suppress dissent and punish me for my pro-democracy activities.

2. Have you or your family members ever been accused, charged, arrested, detained, interrogated, convicted and sentenced, or imprisoned in any country other than the United States (including for an immigration law violation)?: No

If "Yes," explain the circumstances and reasons for the action:

3.A. Have you or your family members ever belonged to or been associated with any organizations or groups in your home country, such as, but not limited to, a political party, student group, labor union, religious organization, military or paramilitary group, civil patrol, guerrilla organization, ethnic group, human rights group, or the press or media?: No

If "Yes," describe for each person the level of participation, any leadership or other positions held, and the length of time you or your family members were involved in each organization or activity.:

3.B. Do you or your family members continue to participate in any way in these organizations or groups?:

If "Yes," describe for each person your or your family members' current level of participation, any leadership or other positions currently held, and the length of time you or your family members have been involved in each organization or group.:

4. Are you afraid of being subjected to torture in your home country or any other country to which you may be returned?: Yes

If "Yes," explain why you are afraid and describe the nature of torture you fear, by whom, and why it would be inflicted.: I, Shun Lae Thu, am afraid of being subjected to torture if returned to my home country, Myanmar. The nature of the torture I fear includes physical abuse, beatings, and inhumane detention conditions, similar to what I experienced during my arrest in October 2022. This torture would likely be inflicted by the police or military personnel, acting under the authority of the military-controlled government. The reason for this torture would be to punish and suppress my involvement in pro-democracy activities and my support for the Civil Disobedience Movement (CDM), as well as to intimidate others who might oppose the military regime.

# Part C. Additional Information About Your Application

1. Have you, your spouse, your child(ren), your parents or your siblings ever applied to the U.S. Government for refugee status, asylum, or withholding of removal?: No

If "Yes," explain the decision and what happened to any status you, your spouse, your child(ren), your parents, or your siblings received as a result of that decision. Indicate whether or not you were included in a parent or spouse's application. If so, include your parent or spouse's A-number in your response. If you were previously denied asylum by USCIS, an immigration judge, or the Board of Immigration Appeals, describe any change(s) in conditions in your country or your own personal circumstances since the date of the denial that may affect your eligibility for asylum.:

2.A. After leaving the country from which you are claiming asylum, did you or your spouse or child(ren) who are now in the United States travel through or reside in any other country before entering the United States?: No

If "Yes,", provide for each person the following: the name of each country and the length of stay, the person's status while there, the reasons for leaving, whether or not the person is entitled to return for lawful residence purposes, and whether the person applied for refugee status or for asylum while there, and if not, why he or she did not do so:

2.B. Have you, your spouse, your child(ren), or other family members, such as your parents or siblings, ever applied for or received any lawful status in any country other than the one from which you are now claiming asylum?: No

If "Yes,", provide for each person the following: the name of each country and the length of stay, the person's status while there, the reasons for leaving, whether or not the person is entitled to return for lawful residence purposes, and whether the person applied for refugee status or for asylum while there, and if not, why he or she did not do so:

3. Have you, your spouse or your child(ren) ever ordered, incited, assisted or otherwise participated in causing harm or suffering to any person because of his or her race, religion, nationality, membership in a particular social group or belief in a particular political opinion?: No

If "Yes," describe in detail each such incident and your own, your spouse's, or your child(ren)'s involvement.:

- 4. After you left the country where you were harmed or fear harm, did you return to that country?: No

  If "Yes," describe in detail the circumstances of your visit(s) (for example, the date(s) of the trip(s), the purpose(s) of the trip(s),
  - and the length of time you remained in that country for the visit(s).):
- 5. Are you filing this application more than 1 year after your last arrival in the United States?: No
  - If "Yes," explain why you did not file within the first year after you arrived. You must be prepared to explain at your interview or hearing why you did not file your asylum application within the first year after you arrived. For guidance in answering this question, see Instructions, Part 1: Filing Instructions, Section V. "Completing the Form," Part C.:
- 6. Have you or any member of your family included in the application ever committed any crime and/or been arrested, charged, convicted, or sentenced for any crimes in the United States (including for an immigration law violation)?: No

If "Yes," for each instance, specify in your response: what occurred and the circumstances, dates, length of sentence received, location, the duration of the detention or imprisonment, reason(s) for the detention or conviction, any formal charges that were lodged against you or your relatives included in your application, and the reason(s) for release. If you have been arrested in the United States, you must submit a certified copy of all arrest reports, court dispositions, sentencing documents, and any other relevant documents.:

### Part D. Your Signature

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it are all true and correct. Title 18, United States Code, Section 1546(a), provides in part: Whoever knowingly makes under oath, or as permitted under penalty of perjury under Section 1746 of Title 28, United States Code, knowingly subscribes as true, any false statement with respect to a material fact in any application, affidavit, or other document required by the immigration laws or regulations prescribed thereunder, or knowingly presents any such application, affidavit, or other document containing any such false statement or which fails to contain any reasonable basis in law or fact - shall be fined in accordance with this title or imprisoned for up to 25 years. I authorize the release of any information from my immigration record that U.S. Citizenship and Immigration Services (USCIS) needs to determine eligibility for the benefit I am seeking.

WARNING: Applicants who are in the United States unlawfully are subject to removal if their asylum or withholding claims are not granted by an asylum officer or an immigration judge. Any information provided in completing this application may be used as a basis for the institution of, or as evidence in, removal proceedings even if the application is later withdrawn. Applicants determined to have knowingly made a frivolous application for asylum will be permanently ineligible for any benefits under the Immigration and Nationality Act. You may not avoid a frivolous finding simply because someone advised you to provide false information in your asylum application. If filing with USCIS, unexcused failure to appear for an appointment to provide biometrics (such as fingerprints) and your biographical information within the time allowed may result in an asylum officer dismissing your asylum application or referring it to an immigration judge. Failure without good cause to provide DHS with biometrics or other biographical information while in removal proceedings may result in your application being found abandoned by the immigration judge. See sections 208(d)(5) (A) and 208(d)(6) of the INA and 8 CFR sections 208.10, 1208.10, 208.20, 1003.47(d) and 1208.20.

**Print your complete name:** Shun Lae Thu Write your name in your native alphabet:

Did your spouse, parent, or child(ren) assist you in completing this application?: No

If "Yes," list the name and relationship.

Did someone other than your spouse, parent, or child(ren) prepare this application? (If "Yes," complete Part E.): Yes

Asylum applicants may be represented by counsel. Have you been provided with a list of persons who may be available to assist you, at little or no cost, with your asylum claim?: No

Signature Email Address: shunlaethu.usird@outlook.com

Signature Date: 04/01/2024

**Electronic Filing Record** 

## Part E. Declaration of Person Preparing Form, if Other Than Applicant, Spouse, Parent, or Child

I declare that I have prepared this application at the request of the person named in Part D, that the responses provided are based on all information of which I have knowledge, or which was provided to me by the applicant, and that the completed application was read to the applicant in his or her native language or a language he or she understands for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information on the Form I-589 may also subject me to civil penalties under 8 U.S.C. 1324c and/or criminal penalties under 18 U.S.C. 1546(a).

#### **Signature Of Preparer:**

Date:

Complete Name of Preparer:

First Name: Ye Yint Myint

Last Name: Mo

**Daytime Telephone Number:** 646-698-2775

**Address of Preparer** 

Street Number and Name: 6034 Booth Street

Apt. Number: City: Elmhurst State: NY

**ZIP Code: 11377** 

Province:
Postal Code:
Country:

Attorney State Bar Number (if applicable):

Attorney or Accredited Representative USCIS Online Account Number (if any):

**Evidence** 

Original File Name: Cover Letter - Shun Lae Thu.pdf

Category: Cover Letter

Original File Name: Statement - Shun Lae Thu.pdf

**Category:** Written Statements

Original File Name: 1962 Military Coup News Article.pdf

Category: News Article

Original File Name: 1988 Military Coup News Article.pdf

Category: News Article

Original File Name: 2021 Civil Disobedience Movement.pdf

Category: News Article

Original File Name: 2021 Military Coup News Article.pdf

Category: News Article

Original File Name: 2021 Protest Civil Movement.pdf

Category: News Article

Original File Name: BURMA Act 2021 Congress Paper.pdf

Category: News Article

Original File Name: Rakhine individual shot dead in Yangon Narinjara News.pdf

Category: News Article

Original File Name: Section 505 A News Article.pdf

Category: News Article

Original File Name: 120 - Shun Lae Thu.pdf

Category: I-20

Original File Name: Visa - Shun Lae Thu.pdf

Category: Visa

Original File Name: 194 - Shun Lae Thu.pdf

Category: I-94

Original File Name: Passport - Shun Lae Thu.pdf

Category: Passport

Original File Name: NRC Original - Shun Lae Thu.pdf

**Category:** Foreign Identification Documents

Original File Name: Matriculation Certificate Notary - Shun Lae Thu.pdf

**Category:** Other Education Documents

Original File Name: Matriculation Certificate Original - Shun Lae Thu.pdf

**Category:** Other Education Documents

Original File Name: Matriculation Certificate Transcript - Shun Lae Thu.pdf

**Category:** Other Education Documents

Original File Name: NRC Notary - Shun Lae Thu.pdf

Category: Foreign Identification Documents

Original File Name: Matriculation Transcript Notary - Shun Lae Thu.pdf

**Category:** Other Education Documents

Original File Name: Family Member List Original - Shun Lae Thu.pdf

**Category:** Foreign Identification Documents

Original File Name: Birth Certificate Notary - Shun Lae Thu.pdf

Category: Birth Records

Original File Name: Birth Certificate Original - Shun Lae Thu.pdf

**Category:** Birth Records

Original File Name: Family Member List Notary - Shun Lae Thu.pdf

**Category:** Foreign Identification Documents

Original File Name: 1962 Military Coup News Article.pdf

Category: News Article

Original File Name: 1988 Military Coup News Article.pdf

Category: News Article

Original File Name: 2021 Civil Disobedience Movement.pdf

Category: News Article

Original File Name: 2021 Military Coup News Article.pdf

Category: News Article

Original File Name: 2021 Protest Civil Movement.pdf

**Category:** News Article

Original File Name: BURMA Act 2021 Congress Paper.pdf

Category: News Article

Original File Name: Rakhine individual shot dead in Yangon \_ Narinjara News.pdf

Category: News Article

Original File Name: Section 505 A News Article.pdf

Category: News Article

Original File Name: Preparer Signed Document.pdf

**Category:** Preparer Signature

## Supplement B, Form I-589

# Additional Information About Your Claim to Asylum