

**DEPARTMENT OF SOCIAL SERVICES**

744 P Street, Sacramento, California 95814



December 21, 2006

ALL-COUNTY LETTER (ACL) NO. 06-60

TO: ALL COUNTY WELFARE DIRECTORS  
 ALL COUNTY REFUGEE COORDINATORS  
 ALL COUNTY FOOD STAMP COORDINATORS  
 ALL COUNTY WELFARE-TO-WORK COORDINATORS  
 ALL COUNTY CONSORTIUM PROJECT MANAGERS  
 ALL COUNTY CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO KIDS  
 (CalWORKs) PROGRAM SPECIALISTS  
 ALL COUNTY CASH ASSISTANCE PROGRAM FOR IMMIGRANTS (CAPI)  
 PROGRAM MANAGERS  
 ALL COUNTY IN-HOME SUPPORTIVE SERVICES (IHSS) PROGRAM MANAGERS  
 ALL COUNTY WELFARE FISCAL OFFICERS  
 ALL COUNTY CIVIL RIGHTS COORDINATORS

**REASON FOR THIS TRANSMITTAL**

- State Law Change  
 Federal Law or Regulation  
 Change  
 Court Order  
 Clarification Requested by  
 One or More Counties  
 Initiated by CDSS

SUBJECT: ELIGIBILITY FOR AID AND SERVICES FOR NONCITIZEN VICTIMS OF  
 HUMAN TRAFFICKING, DOMESTIC VIOLENCE, AND OTHER SERIOUS  
 CRIMES

REFERENCE: Senate Bill (SB) 1569, Chapter 672, Statutes of 2006; Welfare and Institutions  
 (W&I) Code Sections 14005.2, 13282, and 18945; ACL No. 01-58, 02-28,  
 04-38, and 05-08; All-County Information Notice I-24-02

This letter provides county welfare departments (CWDs) with information and instructions necessary to implement SB 1569 (Chapter 672, Statutes of 2006), which extends eligibility for social services and benefits to noncitizen victims of human trafficking, domestic violence, and other serious crimes. This bill amends the W&I Code to include certain individuals currently ineligible for federal programs and, as such, requires the implementation of a state-only program. The recipient population statewide resulting from the new law is expected to be small.

These provisions are effective on January 1, 2007. While the California Department of Social Services (CDSS) is required to adopt emergency regulations no later than July 1, 2008, the new requirements will first be implemented and administered via this and subsequent ACLs. CDSS is working with County Welfare Directors Association (CWDA) representatives to identify operational questions and concerns and develop necessary direction.

## **BACKGROUND – Existing Federal Law**

Prior to 2000, a comprehensive federal law did not exist to protect victims of human trafficking or noncitizen victims of domestic violence and other serious crimes. In October 2000, the federal Trafficking Victims Protection Act of 2000 created two new nonimmigrant visas, the “T” Visa, for victims of a severe form of trafficking in persons, and the “U” Visa, for victims of criminal activity as defined in federal statute, to allow these individuals to remain in the United States (U.S.).

### **T Visa for Trafficking Victims**

Human trafficking is a form of modern-day slavery. Federal law defines “severe forms of trafficking in persons” to mean:

- Sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or
- The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

The U.S. Department of Health and Human Services, Office of Refugee Resettlement (ORR), after consultation with the U.S. Attorney General, may certify a victim of a severe form of trafficking who is willing to assist in every reasonable way with the investigation and prosecution of human traffickers; and

- Has made a bona fide application to the Bureau of United States Citizenship and Immigration Services (USCIS) for a T Visa and the application has not been denied; or
- Is a person for whom “continued presence” in the U.S. has been requested by law enforcement because s/he is assisting or willing to assist the U.S. Attorney General and/or other law enforcement agency in the prosecution of traffickers in persons.

Trafficking victims apply to USCIS for a T Visa by submitting a Form I-914, “Application for T Nonimmigrant Status” (Attachment A). “Continued presence” in the U.S. is requested by law enforcement on behalf of a victim to assist with an investigation and/or prosecution. Continued presence, when granted, confers temporary status that delays/prevents deportation.

Once the adult trafficking victim has been certified by ORR, he or she is eligible for federal benefits and services to the same extent as refugees. For minor trafficking victims, the ORR issues an eligibility letter, which makes the minors eligible for federal benefits and services. For purposes of this ACL, reference to “certified trafficking victims” also includes minors for whom an eligibility letter has been issued.

### U Visa For Victims of Serious Crime

Federal law defines noncitizen victims of serious crimes as aliens who:

- Have suffered substantial physical or mental abuse as a result of having been victims of criminal activity involving, or similar to, the following violations: rape; torture; trafficking; incest; domestic violence; sexual assault; abusive sexual contact; prostitution; sexual exploitation; female genital mutilation; being held hostage; peonage; involuntary servitude; slave trade; kidnapping; abduction; unlawful criminal restraint; false imprisonment; blackmail; extortion; manslaughter; murder; felonious assault; witness tampering; obstruction of justice; perjury or attempt; conspiracy or solicitation to commit any of the above mentioned crimes; and,
- Possess information concerning criminal activity (or in the case of an alien child under the age of 16, the parent, guardian, or adult representing the child); and
- Have been helpful, are being helpful, or are likely to be helpful to a federal, state, or local law enforcement official, prosecutor, or judge or to other federal, state, or local authorities investigating or prosecuting criminal activities described above (or in the case of an alien child under the age of 16, the parent, guardian, or adult representative of the alien is helpful).

The Department of Homeland Security has not yet published regulations governing U Visas, so it is not possible to apply for one. However, USCIS may grant temporary legal status, called "U Visa Interim Relief", and work authorization to those who are eligible, which means the noncitizen may remain in the U.S. and may be permitted to work. While there is no official application form for requesting U Visa Interim Relief, each request should contain certain documentation. Unlike certified trafficking victims, noncitizens allowed to remain in the U.S. under U Visa Interim Relief are not eligible for most federal benefits and services.

### **SB 1569 – New State-Only Program**

SB 1569 was enacted to provide assistance to trafficking victims prior to federal ORR certification by creating a new, state-supported program to provide critical services to these victims as they await, or prepare to request approval for, federally-funded benefits. SB 1569 also recognizes that applicants for U Visa Interim Relief who are willing to cooperate with law enforcement officials need support and services.

SB 1569 provides eligible, noncitizen trafficking victims and victims of serious crimes benefits and social services equivalent to those available to refugees, including (but not limited to): Refugee Cash Assistance (RCA), California Food Assistance Program (CFAP), CalWORKs, CAPI, IHSS, and Employment Social Services. Please note that this new population may also

be eligible for medical services (e.g., Refugee Medical Assistance, Medi-Cal, and the Healthy Families Program). These programs will be administered separately by the California Department of Health Services.

### **ELIGIBILITY FOR SERVICES AND BENEFITS UNDER SB 1569**

- Trafficking Victims

In determining eligibility under SB 1569 for victims of a severe form of trafficking, the CWD must first determine the applicant's trafficking status, based on all relevant information.

A sworn statement by a victim (or a representative if the victim is not able to competently make a sworn statement) similar to the process currently used in self-certification for other programs is sufficient if at least one item of additional evidence is provided, including, but not limited to:

- 1) Police, government agency, or court records or files
- 2) News articles
- 3) Documentation from a social services, trafficking, or domestic violence program, or a legal, clinical, medical, or other professional from whom the applicant or recipient has sought assistance in dealing with the crime
- 4) A statement from any other individual with knowledge of the circumstances that provided the basis for the claim
- 5) Physical evidence
- 6) A copy of a completed visa application
- 7) Written notice from USCIS of receipt of the T Visa application

If the victim cannot provide additional evidence, the sworn statement shall be sufficient if the county makes a determination documented in the case file that the applicant is credible, based upon current county criteria/policy.

The sworn statement must contain the victim's declaration that s/he is a victim of human trafficking (see "Background – T Visa for Trafficking Victims" above). A sample statement is provided with this letter as Attachment B.

Once it has been determined, based on one of the enumerated documents above, that the applicant meets the definition of a trafficking victim, the CWD must then determine if s/he:

- Has filed an application for a T Visa with USCIS; or
- Is preparing to file an application for a T Visa; or
- Is otherwise taking steps to meet the eligibility conditions for federal benefits.

The following documentation can be used in determining whether an applicant has filed, or is preparing to file, for a T Visa:

- A confirmation receipt or letter from USCIS verifying an application for a T Visa has been filed; or
- A copy of the application for a T Visa (I-914); or
- Statements from persons in official capacities (e.g., law enforcement officials or victims advocates) who have assisted or are assisting the victim with the T Visa application; or
- If no documentation is available, the applicant's statement that s/he has filed or intends to apply for a T Visa, or is taking steps to become federally eligible (e.g., is working with a community-based agency to prepare to qualify for federal benefits), will be acceptable.

Eligibility for state-funded services will be terminated if:

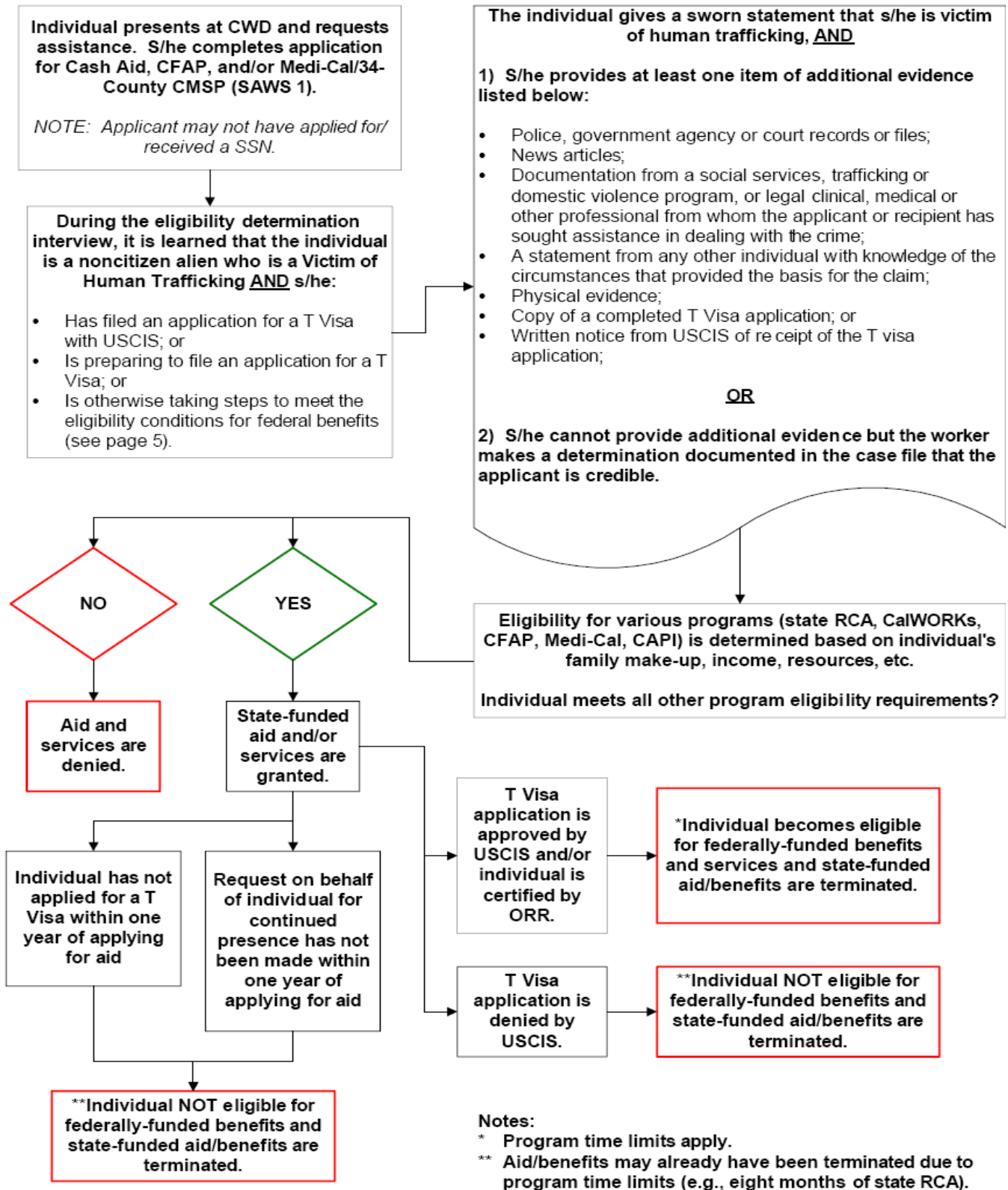
- The recipient's application for a visa has been finally administratively denied; or
- The recipient has not applied for a T Visa within one year of applying for state benefits; or
- A request by law enforcement officers on behalf of the recipient for federal continued presence status has not been made within one year; or
- The recipient is certified by ORR, resulting in federal eligibility. Claiming for the case shall be switched from state-only to federal effective the date of certification, without a break in service, and federal program rules shall apply. A new eight month period of federal RCA may commence.

Note: State-only RCA is time-limited to no more than eight months from date of application.

SEE FLOW CHART ON FOLLOWING PAGE –

*Trafficking Victim Eligibility Determination Process*

### TRAFFICKING VICTIM ELIGIBILITY DETERMINATION PROCESS



Notes:  
\* Program time limits apply.  
\*\* Aid/benefits may already have been terminated due to program time limits (e.g., eight months of state RCA).

- Domestic Violence and Other Serious Crime Victims

SB 1569 provides state-funded services for noncitizen victims of domestic violence or other serious crime, if otherwise eligible, only when a request with USCIS for U Visa Interim Relief or a U Visa (once U Visa applications become available) has been filed or if U Visa Interim Relief or a U Visa has been granted. In determining potential eligibility for these applicants, the CWD must verify that a request for U Visa Interim Relief or application for a U Visa has been filed. Examples of documentation could include (but are not limited to):

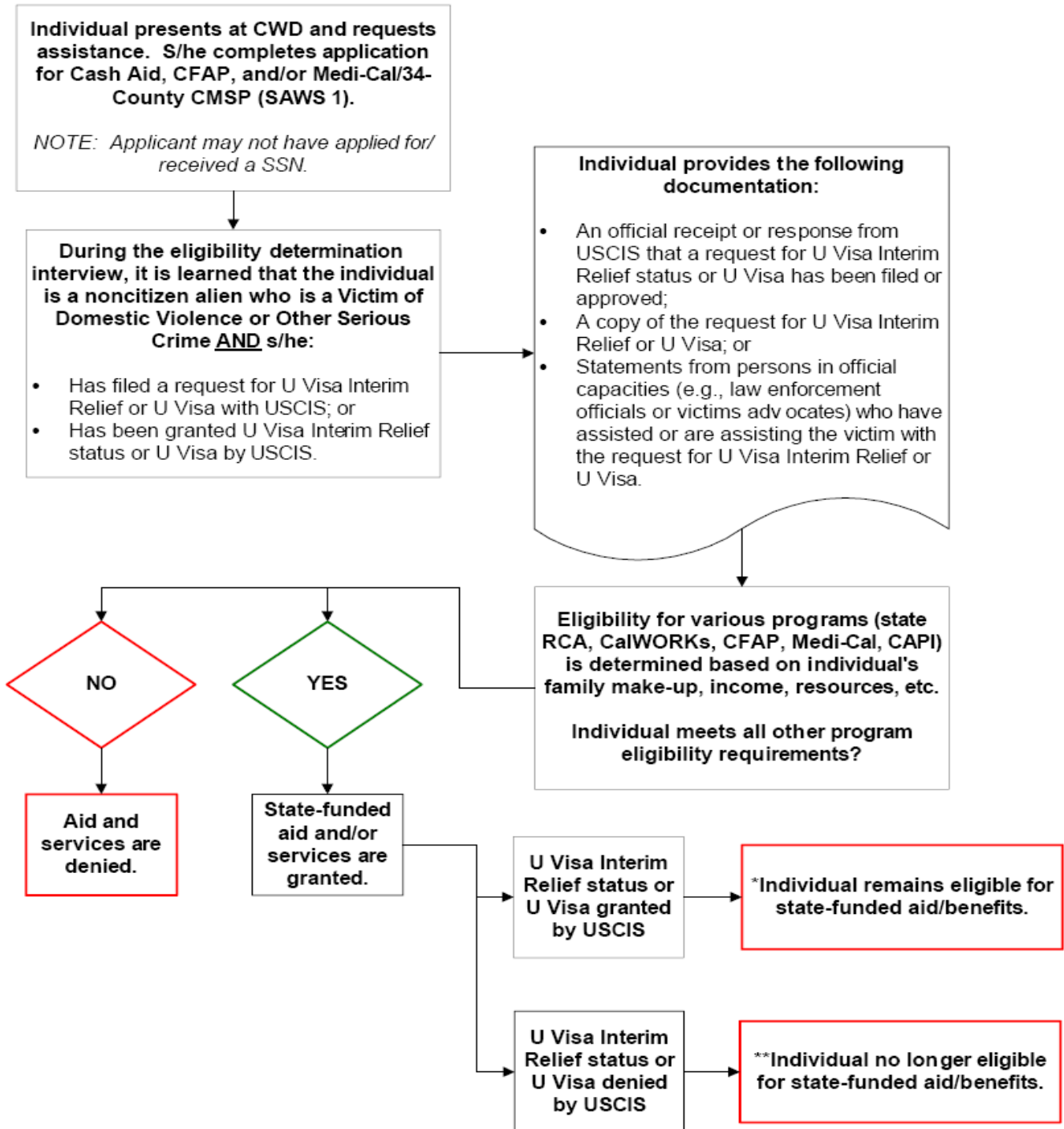
- Statements from persons in official capacities (e.g., law enforcement officials or victims advocates) who have assisted or are assisting the victim with the application for U Visa Interim Relief (see Attachment C-1); or
- A copy of the request for a U Visa Interim Relief application (as there is no standard request form, each “application” will look slightly different -- see Attachment C-2); or
- A Notice of Action approving U Visa Interim Relief (form I-797, Attachment D); or
- A form I-797 which serves as a fee receipt for an employment authorization request based on a U Visa Interim Relief application (Attachment E); or
- A confirmation receipt or letter from USCIS verifying that a request for U Visa Interim Relief (or a U Visa) has been filed. The example provided at Attachment F confirms receipt of an “application” (this particular confirmation letter also requests additional documents).

Eligibility for state-funded services will continue until and unless the recipient’s request for U Visa Interim Relief or application for a U Visa has been finally administratively denied. Again, specific program time limits apply.

SEE FLOW CHART ON FOLLOWING PAGE –

*Victim of Domestic Violence or Other Serious Crime Eligibility Determination Process*

### VICTIM OF DOMESTIC VIOLENCE/OTHER SERIOUS CRIME VICTIMS ELIGIBILITY DETERMINATION PROCESS



**Notes:**

\* Program time limits apply.

\*\* Aid/benefits may already have been terminated due to program time limits (e.g., eight months of state RCA).



## **PROGRAM-SPECIFIC GUIDELINES**

This ACL implements the provisions of SB 1569 extending eligibility for state-funded benefits and services to noncitizen trafficking victims (who meet the criteria on Pages 4 and 5 of this letter) and victims of domestic violence and other serious crimes (who meet the criteria on Page 7 of this letter), and CDSS regulations will be revised to reflect these changes. In the meantime, once an individual's eligibility under SB 1569 is established, the CDSS Manual of Policies and Procedures (MPP) and Departmental policies, guidelines, and instructions will be used in determining eligibility for benefits and programs to the same extent as refugees, and, generally, program rules will apply (e.g., beginning date of aid, grant computation, etc.) However, there may be barriers which will have to be considered. For example, this population may not possess social security numbers. In CWDs where automation requires a social security number and the system allows for it, "pseudo" numbers may have to be entered. Also, as these individuals are awaiting action on their visa applications (or have not applied yet), they may not be authorized to work, in which case certain employment services would not be appropriate (e.g., job search). However, there are employment preparation activities which may be appropriate in anticipation of visa approval (e.g., vocational English language training or other employment preparation related activities).

Until specific Notices of Action (NOA) are developed for this population, generic NOAs with an explanation of the action are to be used. Please refer to the following sections for program-specific instructions.

## **REFUGEE CASH ASSISTANCE/SOCIAL SERVICES**

Noncitizens determined eligible under the provisions of SB 1569, if otherwise eligible, will receive state-funded benefits and services equivalent to RCA pursuant to MPP Division 69. Pursuant to MPP 69-202.41 and .411, the determination of time eligibility for RCA is currently limited to eight months. The time eligibility period for state-only RCA will also be eight months. If a recipient of state-only RCA becomes federally eligible (ORR certified), another eight-month eligibility period will commence (federally funded), effective the date of ORR certification. MPP 69-205.241 limits RCA to the number of months required in MPP Section 69-202.41 following the refugee's date of entry in the U.S. The eligibility period for state-only RCA will be for the number of months specified beginning from the date of application for public social services.

Refugee Social Services (RSS) are available to aided or nonaided eligible noncitizens for 60 months from the date of application for assistance. RSS shall be provided in accordance with the County Refugee Program Guidelines at the Refugee Programs Bureau's website at:

<http://www.dss.cahwnet.gov/refugeeprogram/>

### **CaWORKs**

Noncitizens determined eligible under the provisions of SB 1569 will, if otherwise eligible, receive state-funded CalWORKs benefits and services and be subject to all other program requirements and exemptions, including welfare to work participation, reporting, time limits, etc.

### **CAPI**

Noncitizens determined eligible under the provisions of SB 1569 will, if all other eligibility criteria specified in MPP 49-001 et seq. are met, be eligible for benefits under CAPI. Other CAPI eligibility criteria include, but are not limited to, being aged, blind, or disabled (under the federal definition of blindness and disability used for the Supplemental Security Income Program), and meeting income and resource limits.

### **IHSS**

Noncitizens determined eligible under the provisions of SB 1569 will, if all other eligibility criteria specified in MPP Sections 30-700 et seq. are met, be eligible for benefits under the IHSS programs; these include the Personal Care Services Program (PCSP), IHSS Plus Waiver (IPW) Program and the IHSS Residual Program. The IHSS program provides assistance to those eligible aged, blind, and disabled individuals who are unable to remain safely in their own homes without this assistance.

The PCSP provides personal care services to eligible Medi-Cal beneficiaries pursuant to Welfare and Institutions Code (WIC) Section 14132.95 and Title 22, California Code of Regulations, Division 3 and is subject to all other provisions of Medi-Cal statutes and regulations.

The IPW program provides IPW services to eligible Medi-Cal beneficiaries, subject to Medi-Cal provisions, statutes and regulations, pursuant to WIC Section 14132.951 and Title 22, California Code of Regulations, Division 3.

### **CFAP**

Noncitizens determined eligible for state-funded benefits under the provisions of SB 1569, who would be ineligible for federal Food Stamp (FS) benefits solely based on their noncitizen status, shall be eligible for FS benefits under CFAP outlined in MPP 63-403.

**FISCAL CLAIMING and DATA REPORTING REQUIREMENTS**

Fiscal claiming instructions will be issued via a County Fiscal Letter at a later date, and data reporting requirements will be addressed in a subsequent ACL. Until specific instructions and aid codes are available, CWDs should flag these cases so they can be identified for claiming when instructions are issued.

**RESOURCES**

In addition to the Departmental contacts listed below, the Bureau of Justice Assistance (BJA) within the U.S. Department of Justice may have helpful information and resources. The BJA has recently launched a comprehensive training initiative aimed at combating human trafficking that includes collaborative networking efforts with municipal, county, state, and tribal law enforcement agencies, and U.S. Attorney’s Offices. Further information regarding these BJA task force efforts is available online at:

[www.ojp.usdoj.gov/BJA/grant/HumanTraffic.html](http://www.ojp.usdoj.gov/BJA/grant/HumanTraffic.html)

**FURTHER INFORMATION/CONTACTS**

Subsequent informational letters will be developed as soon as possible. Please contact the following staff persons in your program area with any policy questions or issues you may have, as well as case-specific questions as they occur.

**BUREAU/UNIT**  
**CONTACT NAME**

**PHONE NUMBER**   **E-MAIL ADDRESS**

Refugee Programs

Lynne Reich	(916) 653-8980	<a href="mailto:Lynne.Reich@dss.ca.gov">Lynne.Reich@dss.ca.gov</a>
Brad Elftmann	(916) 654-2387	<a href="mailto:Brad.Elftmann@dss.ca.gov">Brad.Elftmann@dss.ca.gov</a>

CalWORKs

Please call your CalWORKs county consultant

CFAP

Jaime Aguirre	(916) 657-3418	<a href="mailto:Jaime.Aguirre@dss.ca.gov">Jaime.Aguirre@dss.ca.gov</a>
Mike Papin	(916) 654-1880	<a href="mailto:Mike.Papin@dss.ca.gov">Mike.Papin@dss.ca.gov</a>

CAPI and IHSS

Marshall Browne	(916) 229-4043	<a href="mailto:mbrowne@dss.ca.gov">mbrowne@dss.ca.gov</a>
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Sincerely,

*Original document signed by:*

CHARR LEE METSKER  
Deputy Director  
Welfare to Work Division

Attachment

c: CWDA

**I-914, Application for T Nonimmigrant Status****(Filing Instructions for Application for T Nonimmigrant Status (Form I-914); Application for Immediate Family Member of T-1 Recipient (Form I-914, Supplement A); and Declaration of Law Enforcement Officer for Victim of Trafficking in Persons (Form I-914, Supplement B).****Index**

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Eligibility for employment authorization will last for the length of the duration of the T nonimmigrant status (three years maximum). If employment authorization is approved, the T-2, T-3, or T-4 alien will be given an eligibility classification of C25 in accordance with section 274a.12(c)(25).

The validity period of the initial EAD will be for 12 months. Extensions may be granted in 12-month increments, up to the expiration date of the T nonimmigrant status (three years maximum).

**NOTE:** An Employment Authorization Document (EAD) cannot be issued to an alien (derivative family member) that is presently residing outside the United States. The principal alien will be notified of this fact.

**Part 1. Purpose of This Form.****Form I-914, Application for T Nonimmigrant.**

The purpose of the Form I-914 is to provide temporary immigration benefits to aliens who are victims of severe forms of trafficking in persons (principals), and to their immediate family members (derivatives), as appropriate. Form I-914 shall be filed with the U.S. Citizenship and Immigration Services (USCIS), initially by the victims themselves. The victims may also include eligible family members on their application at that time. The form may also be filed at a later date to petition for eligible family members whom the victim did not include in the original application, but for whom the victim subsequently wishes to file.

**NOTE:** USCIS is comprised of the former Immigration and Naturalization Service (INS).

**Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient.**

The purpose of the Form I-914, Supplement A, is to allow principal T nonimmigrant status holders and applicants to apply for derivative benefits for their immediate family members. The principal applicant shall complete and file one Form I-914, Supplement A, for each family member for whom the principal applicant is now seeking derivative status.

An alien granted T-2, T-3, or T-4 nonimmigrant status may apply for employment authorization by filing an Application for Employment Authorization (Form I-765), with the appropriate fee or an application for fee waiver.

The Form I-765 may be filed concurrently with the filing of the application for T-2, T-3, or T-4 status, or at any time thereafter.

**Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons.**

The Form I-914, Supplement B, is used by Federal Law Enforcement Officers to certify that the applicant is a victim of a severe form of trafficking in persons.

**Part 2. General Filing Instructions.****Safe Mailing Address.**

As a result of situations leading to your filing of this application, you may not feel secure receiving correspondence regarding this application at the address where you live. The **Safe Mailing Address** may, but need not be, the mailing address for the place where you live. It may be a post office box, the address of a friend, a community based organization that is helping you, your attorney, or any other address at which you can receive correspondence safely and punctually.

**How to File.****Form I-914.**

In addition to the Form I-914 application and the requisite evidence in support of the applicant's claim, as described in **Part 3** below, a complete application package shall include the filing fee and three passport-style identical photographs in color of the applicant.

The photographs must have been taken within six months of filing the application, and be unmounted and unretouched. The photographs shall show a full frontal facial position of the applicant. The photographs shall be 2 x 2 inches in size and have a white background. The photos should be glossy and not retouched or mounted. The dimension of the facial image should be about 1 inch to 1 3/8 inches from the chin to the top of the hair. The applicant's name and Alien Registration Number (A#), if known, shall be lightly printed on the back of each photograph with a pencil.

## Waiver of Grounds of Inadmissibility.

A principal or derivative applicant who is or becomes inadmissible under section 212(a) of the Immigration and Nationality Act (the Act) will not be eligible for T nonimmigrant status unless the ground of inadmissibility is waived. If the ground of inadmissibility is one that can be waived, the alien should apply for a waiver of the grounds of inadmissibility on Form I-192, Application for Advance Permission to Enter as Nonimmigrant (Pursuant to Section 212(d)(3) of the Immigration and Nationality Act). Section 212(d)(3)(B) provides general authority for waiving many grounds of inadmissibility for nonimmigrants. These waivers are not automatic, but may be granted in the exercise of discretion. Form I-192 should be filed at the time of filing Form I-914.

### Form I-914, Supplement A.

If, in addition to the Form I-914, the applicant also files one or more Forms I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, each must be accompanied by all of the appropriate documentation and evidence, the appropriate fees, and three photographs of the derivative applicant. The photographs of the derivative must comply with the same requirements as the photographs of the principal applicant, described above. If you are requesting employment authorization for the derivative applicant, a Form I-765, Application for Employment Authorization, must also accompany the Form I-914, Supplement A.

A Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, may be filed concurrently with the initial application of the principal applicant, or at any time thereafter. Any Form I-914, Supplement A, submitted subsequent to the principal applicant's initial filing, however, must be accompanied by a new Form I-914 with the appropriate boxes checked in Part A, and **original signature**, with the appropriate fee. Evidence supporting the original application, however, is not required to be resubmitted with the new Form I-914. No Form I-914, Supplement A, will be accepted without a copy of the original Form I-914.

## Biometric Services and Interview Appointments.

All applicants between the ages of 14 and 79 years (inclusive) must be fingerprinted, as part of the USCIS biometric services requirements, to facilitate a criminal background check. If necessary, USCIS may also take applicant's photograph and signature.

In addition, USCIS may require the applicant to appear for a personal interview. The applicant will be notified of the proper time and location to appear for fingerprinting and for an interview, if required.

Failure to appear for a scheduled interview without prior authorization, or failure to comply with biometric services (fingerprint processing), may result in a denial of the application.

## Part 3. Required Documentation for Application.

### Evidence.

#### Form I-914.

An application must be filed with evidence sufficient to demonstrate that each of the eligibility requirements is satisfied.

### Principal Applicant for T Nonimmigrant (T-1) Status.

To qualify for T-1 nonimmigrant status, an applicant must demonstrate that he or she:

- Is physically present in the United States, American Samoa or the Commonwealth of the Northern Mariana Islands as a result of trafficking;
- Is or has been a victim of a severe form of trafficking in persons;
- Would suffer extreme hardship involving unusual and severe harm upon removal; and
- Has complied with any reasonable request for assistance in the investigation and prosecution of acts of trafficking in persons, unless the applicant is less than 18 years old.

To establish that he or she is a victim of a severe form of trafficking in persons, the applicant must demonstrate that he or she was brought to the United States either:

- For the purpose of a commercial sex act, which act was either induced by force, fraud or coercion, or occurred when the applicant had not reached 18 years of age, or
- For the purpose of labor or services induced by force, fraud, or coercion for the purpose of subjecting the applicant to involuntary servitude, peonage, debt bondage, or slavery.

An applicant is encouraged to raise all arguments and to document all elements of his or her claim, including allegations of extreme hardship, in his or her initial application.

#### Form I-914, Supplement A.

The Form I-914, Supplement A, must be filed with evidence sufficient to demonstrate that each of the eligibility requirements is satisfied.

### Qualifications for T Derivative Applicants for Nonimmigrant Status.

An applicant for T derivative status must be:

- The spouse or child of the T nonimmigrant principal applicant or the T nonimmigrant status holder, if the principal applicant or status holder is over the age of 21;

- The spouse, child or parent, if the principal applicant or status holder is under the age of 21 years.

Applicants for derivative status, as family members of an applicant for T-1 nonimmigrant status, or of a person granted T-1 nonimmigrant status, must submit credible documentary evidence of the relationship of the derivative applicant to the principal applicant. Documents that will be considered for this purpose are described below. If the principal applicant is over the age of 21, the derivative applicant must be the spouse or child of the principal applicant. If the principal applicant is under the age of 21, the derivative applicant may be the spouse, child, or parent of the principal applicant. If the derivative applicant is applying as the child of the principal applicant, the evidence must also establish that the derivative applicant is under the age of 21.

In addition, applicants for derivative status must submit evidence to demonstrate that either the principal or the derivative applicant will suffer extreme hardship if the derivative applicant is not permitted to join the principal applicant. An applicant is encouraged to raise all arguments and to document all elements of his or her claim, including allegations of extreme hardship, in his or her initial application.

**Form I-914, Supplement B (Declaration of Law Enforcement Officer for Victim of Trafficking in Persons).**

The primary evidence of an applicant's claim to be a victim of trafficking shall be a Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons. That declaration is appended to this form. An applicant for T-1 nonimmigrant status need not necessarily file a Form I-914, Supplement B, to prove the claim. However, the endorsement of a Federal Law Enforcement Officer on the Form I-914, Supplement B, constitutes primary evidence that the applicant is a victim and has complied with any reasonable request for assistance in the investigation and prosecution. These elements of the applicant's claim may be difficult to establish otherwise, and submission of the Form I-914, Supplement B, is strongly advised. Instructions pertinent to the Form I-914, Supplement B, follow.

If you do not provide a completed Form I-914, Supplement B, however, you must submit an explanation, describing your attempts to obtain the certification and why it does not exist or is unavailable. If you did not attempt to obtain the certification, you must explain why you did not.

**Secondary Evidence.**

If you do not provide a completed Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons, in addition to the explanation described above, you must also submit credible secondary evidence to establish that you are or have been a victim of a severe form of

trafficking in persons and that you complied with any reasonable request from law enforcement. Such evidence may include, but is not limited to: police reports, newspaper articles, witness affidavits, or any other form of evidence. Even if you do provide a Form I-914, Supplement B, you may submit additional evidence.

Whether or not you provide a Form I-914, Supplement B, you must provide a personal narrative statement. That statement should describe the trafficking crime of which you were a victim, including:

- What were the circumstances of your entry into the United States;
- The purpose for which you were brought to the United States;
- How you were recruited or otherwise became involved in the trafficking situation;
- When these events took place;
- Who was responsible;
- How long you were detained by the traffickers;
- How and when you escaped, were rescued, or otherwise became separated from the traffickers;
- What you have been doing since you were separated from the traffickers;
- Why you were unable to leave the United States after you were separated from the traffickers;
- What harm or mistreatment you fear if you are removed from the United States; and
- Why you fear you would be harmed or mistreated.

Attach documents to support your claim. The evidence submitted in support of the application must credibly establish each element of your claim. If you have in your possession, or have access to, a document showing how you entered the United States, you must submit a copy of that document with your application.

**Part 4. Completing Each Application.**

**Form I-914.**

Provide the specific information requested about you and your family. Answer ALL of the questions asked. If any question does not apply to you or you do not know the answer, reply "none," "N/A" (for not applicable), or "unknown," as appropriate. Provide detailed information. Answer the questions as completely as possible. You are strongly encouraged to answer all questions and to attach additional written statements and documents that support your claim.

## Part A. Purpose for Filing the Application.

As was explained above, this form shall be used both for the initial application of a victim of trafficking in persons, and to file subsequently for eligible family members. In this section, you are asked to describe, by checking one or more boxes, your purpose in filing this form.

## Part B. General Information About the Applicant.

Provide the requested information about yourself.

## Part C. Details Related to Nonimmigrant Status.

The applicant must answer each question. The principal applicant must provide evidence to document that he or she:

- Is a victim of a severe form of trafficking in persons;
- Is present in the United States, American Samoa, or the Commonwealth of the Northern Mariana Islands, or at a port-of-entry thereto, on account of such trafficking;
- Has complied with any reasonable request for assistance in the investigation or prosecution of acts of trafficking (or is not yet 15 years old); and
- Would suffer extreme hardship involving unusual and severe harm upon removal.

The applicant must explain each of those elements of the claim in detail, and provide evidence of each of those elements of the claim. The evidence must be attached to the application when it is submitted. Failure to demonstrate eligibility credibly will result in denial of the application.

## Part D. Processing Information.

Answer each of the questions. If you answer "Yes" to any of the questions, you must explain your answer on a separate piece of paper. Label that sheet Form I-914, Part D, reference the number of the question which requires explanation, and attach that sheet to your application. Answering "Yes" does not necessarily mean that your application will be denied.

## Part E. Information About Your Family Members.

Provide the requested information about each of your family members for whom you now wish to seek immigration benefits. You may also file for a family member at a later date, rather than on your initial application. You must file one Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, with this application for each family member for whom you are now applying.

## Part F. Attestation and Release.

By signing this form, you declare, under penalty of perjury, that the statements made on the application, and the evidence submitted with it, are true and correct.

By signing this form, you also agree that USCIS may release information from the record in order to investigate your claim, to determine your eligibility to investigate fraudulent claims, and to assist in the investigation of trafficking in persons and related crimes. USCIS requires that you sign the attestation and release so that USCIS may investigate your claim to eligibility.

## Part G. Preparer and/or Translator Certification.

If anyone assisted you in preparing this form, translated the questions to you, or translated your responses to the questions, they must sign this certification, declaring, under penalty of perjury, that they assisted you, and that, to the best of their knowledge, the information on the form is truthful.

### Form I-914, Supplement A.

Provide the specific information requested about you and your family. Answer all of the questions asked. If any question does not apply to you or you do not know the answer, reply "none," "N/A" (for not applicable), or "unknown," as appropriate. Provide detailed information. Answer the questions as completely as possible. You are strongly encouraged to attach additional written statements and documents that support your claim.

## Part A. Relationship.

State the relationship of the Derivative Applicant family member to you. You must also include documentation of the claimed relationship. Documents acceptable for this purpose are listed below.

If you are filing for your:

- **Husband or wife:** Submit a copy of your marriage certificate.
- **Child, and you are the mother:** Submit the child's birth certificate showing your name and the name of your child.
- **Child, and you are the father or stepparent:** Submit the child's birth certificate, showing both parents' names, and your marriage certificate. If the child was born out of wedlock and you are the father, provide proof that a parent/child relationship exists or existed. For example, the child's birth certificate showing your name and evidence that you have financially supported the child. (A blood test may be necessary.)



- **Mother:** Submit your birth certificate showing your name and the name of your mother.
- **Father:** Submit your birth certificate showing the names of both parents, and your parents' marriage certificate.
- **Stepparent:** Submit your birth certificate showing the names of both natural parents, and the marriage certificate of your parent to your stepparent.
- **Adoptive parent or adopted child:** Submit a certified copy of the adoption decree, legal custody decree if you obtained custody before adoption, and a statement showing the dates and places you have lived together with the adopted parent or child.

In addition, in any case in which a marriage license is required, if either the husband or wife was married before, you must submit documents to show that all previous marriages were legally ended (for example, a divorce decree or death certificate). In cases where the names shown on the supporting documents have changed, provide legal documents to show how the name change occurred (for example, a marriage certificate, adoption decree, court order, etc.).

If a required document is unavailable, you may provide the following secondary evidence. (USCIS may require a statement from the appropriate civil authority certifying that the necessary document is unavailable.)

- **Church record:** A certificate under the seal of the church where the baptism, dedication or comparable rite occurred within two months after birth, showing the date and place of the child's birth, date of the religious ceremony and the names of the child's parents.
- **School record:** A letter from the authorities of the school attended (preferably the first school), showing the date of admission to the school, child's date and place of birth, and the names and birthplaces of both parents, if shown in the school records.
- **Census record:** State or Federal census record showing the names, place of birth and date of birth or age of the person listed.
- **Affidavits:** Written statements sworn to or affirmed by two persons who were living at the time and who have personal knowledge of the event you are trying to prove; for example, the date and place of birth, marriage, divorce or death. The persons making the affidavits need not be citizens of the United States. Each affidavit should contain the following information: (1) the relationship, if any, of the affiant to you; (2) full information concerning the event; and (3) complete details concerning how the person acquired knowledge of the event.

## Part B. Information About Primary Applicant.

Provide the requested information about yourself.

## Part C. Information About Derivative Applicant.

Provide the requested information about the family member for whom you are applying. Answer each question fully. If necessary, attach additional sheets to completely address the question. Label those sheets "Form I-914, Supplement A, Part C" and reference the questions that require additional explanation.

## Part D. Processing Information.

Answer each question. If you answer "Yes" to any question, you must explain your answer on a separate sheet of paper. Label that sheet Form I-914, Supplement A, Part D, reference the number of the question that requires additional explanation, and attach the sheet to the application. Answering "Yes" does not necessarily mean that benefits will be denied.

## Part E. Attestation and Release.

By signing this application, you declare, under penalty of perjury, that the statements made on the application and the evidence submitted with it, are true and correct. The derivative applicant must also sign, under the penalty of perjury, if he or she is in the United States.

By signing this application, you also agree that USCIS may release information from the record in order to investigate your claim, determine your eligibility, assist in the investigation and prosecution of trafficking and related crimes, and investigate and prosecute false claims. USCIS requires that you sign the attestation and release.

## Part F. Preparer and/or Translator Certification.

If anyone assisted you in preparing this application, translated questions to you or translated your responses to the questions, that person must sign this certification, declaring under penalty of perjury that he or she assisted you, and that to the best of his or her knowledge the information on the application is truthful.

## Part G. Application Checklist.

Please verify that you have complied with each item on this checklist. Be sure that you have complied with all USCIS requirements pertinent to this form.

**Acceptance.** Any application that is not signed or is not accompanied by the correct fee, will be rejected with a notice that the application is deficient. You may correct the deficiency and resubmit the application. An application is not considered properly filed until accepted by USCIS.

**Requests for more information or interview.** We may request more information or evidence, or we may request that you appear at a USCIS office for an interview. We may also request that you submit the originals of any copy. We will return these originals when they are no longer required.

In addition, failure to answer any question on the form, or failure to comply with any other USCIS requirement, may result in a processing delay or in denial of the application.

## Part 5. Fee Information.

### Form I-914.

#### What Is the Fee?

You must file your application with the following fees:

- **If you are filing a single application,** the filing fee is \$270.00 plus the \$70.00 biometric services fee, if you are between the ages of 14 and 79 years (inclusive).
- **If you are filing as the principal and are including immediate family members concurrently on the same application,** the filing fee is \$270.00 plus \$120.00 for each additional immediate family member to a maximum amount payable per application of \$540.00. You must also include the biometric services fee for each applicant between the ages of 14 and 79 (inclusive).
- **If you are filing an application for your immediate family members after you have filed a single application,** submit the base filing fee plus a lower fee for each immediate family member to the maximum amount payable per application. You must also include the \$70.00 biometric services fee for applicants who are between the ages of 14 and 79 (inclusive).

Pay the fee in the exact amount. Checks and money orders must be payable in U.S. currency. Make check or money order payable to the **Department of Homeland Security.**

If you live in Guam, make your check or money order payable to the "Treasurer, Guam." If you live in the U.S. Virgin Islands, make your check or money order payable to the "Commissioner of Finance of the Virgin Islands."

A charge of \$30.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. Please do not send cash in the mail.

USCIS recognizes that many applicants for T nonimmigrant status may be unable to pay the full application fee. Applicants who are financially unable to pay the application fee may submit a request for a fee waiver, as outlined in 8 CFR 103.7(c). The granting of a fee waiver will be at the sole discretion of USCIS. The fee for biometric services, however, cannot be waived.

#### How to Check If the Fees Are Correct.

The fees on this form are current as of the edition date appearing in the lower right corner of this page. However, because USCIS fees change periodically, you can verify if the fees are correct by following one of the steps below:

- Visit our website at [www.uscis.gov](http://www.uscis.gov) and scroll down to "Forms and E-Filing" to check the appropriate fees, or
- Review the Fee Schedule included in your form package, if you called us to request the form, or
- Telephone our National Customer Service Center at 1-800-375-5283 and ask for the fee information.

**NOTE:** If your petition or application requires a biometric services fee for USCIS to take your fingerprints, photograph or signature, you can use the same procedure above to confirm the biometrics fee.

## Part 6. Where to File.

An applicant for status as a T nonimmigrant shall submit a complete application package by mail to the:

USCIS Vermont Service Center,  
75 Lower Weldon Street  
St. Albans, VT 05479-0001.

## Part 7. Federal Law Enforcement Declaration (Form I-914, Supplement B).

Form I-914, Supplement B, is to be completed by Federal Law Enforcement Officers for victims under the Victims of Trafficking and Violence Protection Act, Public Law 106-386. The law enforcement officer must complete the form based upon his or her knowledge of the case, including evidence developed by other law enforcement officers investigating the case.

In order to be granted immigration benefits, the applicant must demonstrate that he or she is present in the United States as a result of being a victim of a severe form of trafficking in persons. Unless the applicant is less than 18 years of age, the applicant must also show that he or she is cooperating with law enforcement in the investigation and prosecution of the trafficking crime of which he or she was a victim. These elements may be established without submitting a Form I-914, Supplement B, but submission of the Supplement B, is strongly advised.

The Form I-914 applicant may detach Form I-914, Supplement B, and submit it to a Federal law enforcement officer familiar with the case in which he or she was a victim of a severe form of trafficking in persons. After the officer has completed the form, it should be submitted with your application package.

## Part 8. Other Information.

### Confidentiality.

Information provided in the application package is confidential. It will be used to determine eligibility, to investigate the fraudulent claims, to enforce penalties for false statements, to assist in the investigation and prosecution of trafficking and related crimes, but for no other purpose. The information provided is subject to verification by USCIS. However, USCIS will release the information only as necessary to the stated purposes.

### Penalties for Perjury.

All statements contained in response to questions in this application are declared to be true and correct under penalty of perjury. Title 18, United States Code, Section 1546, provides in part:

... Whoever knowingly makes under oath, or as permitted under penalty of perjury under 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 shall be fined in accordance with this title or imprisoned not more than five years, or both.

Knowingly providing false information on this application may subject you and/or the preparer of this application to criminal penalties under Title 18 of the United States Code. Knowingly providing false information on this application may also subject you and/or the preparer to civil penalties under Section 274C of the Immigration and Nationality Act (INA), 8 U.S.C. 1324c. Under 8 U.S.C. 1324c, a person subject to a final order for civil document fraud is deportable from the United States and may be subject to fines.

### Authority for Collecting This Information.

The authority to require you to file Form I-914, Application for T Nonimmigrant Status, when applying for employment authorization is found in Public Law 106-386, Victims of Trafficking and Violence Protection Act. Information you provide on your Form I-914 is used to investigate the veracity of your claim. The information may form the basis for granting the benefit sought, or may form the basis for an investigation of a fraudulent claim. The information may also be provided to law enforcement agencies or prosecutors investigating or prosecuting crimes of trafficking or related crimes.

Failure to provide all information as requested may result in the denial or rejection of this application. The information you provide may also be disclosed to other federal, state, local and foreign law enforcement and regulatory agencies during the course of USCIS investigations.

### USCIS Forms and Information.

To order USCIS forms, call our toll-free forms line at 1-800-870-3676. You can also obtain USCIS forms and information on immigration laws, regulations and procedures by calling our National Customer Service Center at 1-800-375-5283 or visiting our internet website at [www.uscis.gov](http://www.uscis.gov).

### Use InfoPass for Appointments.

As an alternative to waiting in line for assistance at your local USCIS office, you can now schedule an appointment through our internet-based system, **InfoPass**. To access the system, visit our website at [www.uscis.gov](http://www.uscis.gov). Use the **InfoPass** appointment scheduler and follow the screen prompts to set up your appointment. **InfoPass** generates an electronic appointment notice that appears on the screen. Print the notice and take it with you to your appointment. The notice gives the time and date of your appointment, along with the address of the USCIS office.

### Paperwork Reduction Act.

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

USCIS tries to create forms and instructions that are accurate and easily understood. Often this is difficult because immigration law can be very complex.

The public reporting burden for this form is estimated to average three (3) hours and twenty-five (25) minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and completing and reviewing the collection of information.

USCIS welcomes your comments regarding this burden estimate or any other aspect of this form, including suggestions for reducing this burden to the U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., Washington, DC 20529; OMB No. 1653-0027. **Do not mail your completed application to this address.**

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

**I-914, Application for T Nonimmigrant Status**

**START HERE - Please type or print. Use black ink. See Instructions for information about eligibility and how to complete and file this application.**

**For USCIS Use Only**

**PART A. Purpose for Filing the Application.**

Check all that apply:

- I am filing an application for T-1 nonimmigrant status, and have not previously filed for such status.
- I have a T-1 application pending. EAC # \_\_\_\_\_
- I have received T-1 status.
- I am applying to bring family member(s) to the United States.

**PART B. General Information About Applicant.**

Family Name	Given Name	Middle Name
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Other Names Used (If any)? (Include maiden name and aliases)

Residence in the U.S. (Street Number and Name)	Apt. No.	Home Phone
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City	State	Zip Code
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SAFE Mailing Address in the U.S., if other than above.	Apt. No.	Daytime Phone
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City	State	Zip Code
------	-------	----------

Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed
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A# (If any)	U.S Social Security # (If any)	Date of Birth (mm/dd/yyyy)
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Country of Birth	Country of Citizenship
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Passport #	Issue Date (mm/dd/yyyy)	Place of Issuance
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I-94 #	Date of Last Entry into U.S.
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Place of Last Entry into U.S.	Current Immigration Status
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**PART C. Details Related to T Nonimmigrant Status.**

When answering the following questions about your claim you should explain relevant information. You should attach documents in support of your claim that you are a victim of a severe form of trafficking in persons and the specific facts on which you are relying to support your claim. If only applying for T derivative status subsequent to the Principal Applicant's initial filing, evidence supporting the original application is not required to be resubmitted with the Form I-914. (Attach additional sheets of paper as needed, labeling them as Part C and the question number. Refer to Instructions for further information.) Check either Yes or No, as appropriate.

1. I am or have been a victim of a severe form of trafficking in persons. (Attach evidence to support your claim.)  Yes  No
2. I am submitting a Law Enforcement Agency (LEA) declaration on Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons. (If No, explain why you are not submitting the LEA Certification.)  Yes  No
3. I am physically present in the United States, American Samoa, or the Commonwealth of the Northern Mariana Islands, or at a port of entry, on account of trafficking. (If Yes, explain in detail and attach evidence and documents supporting this claim.)  Yes  No
4. I fear that I will suffer extreme hardship involving unusual and severe harm upon removal. (If Yes, explain in detail and attach evidence and documents supporting this claim.)  Yes  No

**PART C. T Nonimmigrant Status. (Continued)**

5. I have reported the crime of which I am claiming to be a victim. (If Yes, indicate to which law enforcement agency and office you have made the report, the address and phone number of that office, and the case number assigned, if any. If No, please explain the circumstances.)  Yes  No

Law Enforcement Agency and Office	Address	Phone No.
		Case No.

6. I am under the age of 18 years. (If Yes, proceed to Question 8.)  Yes  No
7. I have complied with requests from U.S. government authorities for assistance in the investigation or prosecution of acts of trafficking. (If No, explain the circumstances. You may add additional pages if necessary, marking them Form I-914, Part C.7.)  Yes  No
8. This is the first time I have entered the United States. (If No, list each date, place of entry and under which status you entered the United States for the past five years, and explain the circumstances of your most recent arrival.)  Yes  No

Date of Entry	Place of Entry	Status

9. My most recent entry was on account of the trafficking that forms the basis for my claim. (Explain the circumstances of your most recent arrival.)  Yes  No
10. I want an Employment Authorization Document.  Yes  No
11. I am now applying for one or more eligible family members. (If Yes, complete and include a Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, for each family member for whom you are now applying. You may also apply to bring eligible family members to the United States at a later date.)  Yes  No

**PART D. Processing Information.**

Please answer the following questions. (If your answer is "Yes" to any one of these questions, explain on a separate piece of paper. Additionally, if any of the acts or circumstances below are related to your having been a victim of a severe form of trafficking, please explain. Answering "Yes" does not necessarily mean that you are not entitled to adjust your status or register for permanent residence.)

1. Have you ever, in or outside the United States:
- knowingly committed any crime of moral turpitude or a drug-related offense for which you have not been arrested?  Yes  No
  - been arrested, cited, charged, indicted, fined or imprisoned for breaking or violating any law or ordinance, excluding traffic violations?  Yes  No
  - been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action?  Yes  No
  - exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States.?  Yes  No
2. Have you ever received public assistance in the United States from any source, including the United States government or any state, country, city or municipality (other than emergency medical treatment), or are you likely to receive public assistance in the future?  Yes  No
3. Have you ever:
- within the past ten years been a prostitute or procured anyone for prostitution, or intend to engage in any such activities in the future?  Yes  No
  - engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling?  Yes  No
  - knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the United States illegally?  Yes  No
  - illicitly trafficked in any controlled substance, firearms, or persons, or knowingly assisted, abetted or colluded in illegal trafficking?  Yes  No

**PART D. Processing Information. (Continued)**

- 4. Have you ever engaged in, conspired to engage in, or do you intend to engage in, sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity?  Yes  No
- 5. Have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to, any person or organization that has engaged or conspired to engage in sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity?  Yes  No
- 6. Do you intend to engage in the United States in:
  - a. espionage?  Yes  No
  - b. any activity a purpose of which is opposition to, or the control or overthrow of, the government of the United States, by force, violence or other unlawful means?  Yes  No
  - c. any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information?  Yes  No
- 7. Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?  Yes  No
- 8. Did you, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion?  Yes  No
- 9. Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin or political opinion?  Yes  No
- 10. Have you ever been deported from the United States, or removed from the United States at government expense, excluded within the past year, or are you now in exclusion or deportation proceedings?  Yes  No
- 11. Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States or any immigration benefit?  Yes  No
- 12. Have you ever left the United States to avoid being drafted into the U.S. Armed Forces?  Yes  No
- 13. Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver?  Yes  No
- 14. Are you now withholding custody of a U.S. citizen child outside the United States from a person granted custody of the child?  Yes  No
- 15. Do you plan to practice polygamy in the United States?  Yes  No

**PART E. Information about Your Family Members.**

Provide the following information about your spouse and all of your sons and daughters. If you need more space, use a separate sheet of paper.

Full Name	Family Relationship	Date of Birth (mm/dd/yyyy)	"A"- Number (if applicable)	Country of Birth	Current Address (Street, City, State and Country)

Complete Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, for each family member listed above for whom you are now applying to have join you in the United States, and attach it to this application.

**PART F. Attestation and Release.**

*After reading the information regarding penalties in the instructions, complete and sign below. If someone helped you prepare this application, he or she must complete Part G.*

I have read, or had read to me, this form, the information provided on it and the evidence provided with it, and I certify, under penalty of perjury under the laws of the United States of America, that all of the information in this entire application package, including the documentary evidence submitted with it, is true and correct.

I authorize the release of any information from my record that the U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking, to investigate my claim and to investigate fraudulent claims. I further authorize the U.S. Citizenship and Immigration Services to release information to law enforcement agencies and prosecutors investigating or prosecuting crimes of trafficking or related crimes.

Signature of Applicant *(the Person in Part A.)*

[ \_\_\_\_\_ ]  
(Sign your name within the brackets)

\_\_\_\_\_ Date ((mm/dd/yyyy))

**PART G. Preparer and/or Translator Certification.**

*To be completed and signed if form is prepared by a person other than the applicant.*

I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

\_\_\_\_\_  
(Preparer's/Translator's Printed Name)

\_\_\_\_\_  
(Preparer's/Translator's Signature)

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Date (mm/dd/yyyy) \_\_\_\_\_

Relationship to the Applicant \_\_\_\_\_

**WARNING: Applicants who are in the United States illegally are subject to removal if their claims are not granted. 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.**

OMB No. 1615-0032; Expires 10/31/05  
 You may continue to use this form after expiration date.

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

## I-914, Supplement A-Application for Immediate Family Member of T-1 Recipient

**START HERE - Please type or print. Use black ink. See Instructions for information about eligibility and how to complete and file this application. The recipient of the T nonimmigrant classification is referred to as the principal applicant. His or her family members are referred to as derivative applicants. The Form I-914, Supplement A, is to be completed by the principal applicant.**

**PART A. Relationship.**

The derivative applicant is my: (Check one)  Husband/Wife  Child  Parent

**PART B. Information About Principal Applicant.**

Family Name	Given Name	Middle Name
Date of Birth (mm/dd/yyyy)		A# (If any)
Principal applicant's application has been previously: (Check One)		
<input type="checkbox"/> Submitted	<input type="checkbox"/> Granted Conditional Approval	
<input type="checkbox"/> Found Bona Fide	<input type="checkbox"/> Approved for T Nonimmigrant Status	

**PART C. Information About Derivative Applicant.**

Family Name	Given Name	Middle Name	
A # (If any)		U. S. Social Security # (If any)	
Other Names Used (If any)? (Include maiden name and aliases)			
Intended Residence in U.S. (Street Number and Name)		Apt. No.	City
State	ZIP Code	Home Phone	Daytime Phone
SAFE Mailing Address in the U.S., if other than above.		Apt. No.	City
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		Date of Birth (mm/dd/yyyy)
Names of Prior Husband/Wives (if any), Dates Marriages Ended and Current Immigration Status (if any)			

Country of Birth	Country of Citizenship	Passport #	Issue Date (mm/dd/yyyy)	Place of Issuance
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Is the derivative applicant currently in the United States?  
 Yes (If Yes, complete the following.) He or she last arrived as a (visitor, student, stowaway, without inspection, other, please specify.) His or her status is \_\_\_\_\_  
 No (If No, please list the United States consulate by city and country, where the derivative applicant will apply for a visa. (Designation of a consulate outside of the country of your relative's last residence does not guarantee acceptance for processing by that consulate. Acceptance is at the discretion of the designated consulate.)

Has the derivative applicant previously entered the United States?  Yes  No (If Yes, list each previous entry during the past five years. Attach additional sheets, if necessary.)

Date of Entry	Place of Entry	Status

Arrival/Departure Record (I-94) Number, date arrived, and date authorized stay expired, or will expire. (As shown on Form I-94 or I-95)



**PART C. Information About Derivative Applicant. (Continued)**

Has family member for whom you are applying ever been under immigration proceedings?

Yes  No If Yes, answer the following: Where: \_\_\_\_\_ When (mm/dd/yyyy): \_\_\_\_\_  
 Exclusion  Deportation  Recission  Judicial Proceeding

List your family member's spouse and children. (Attach additional sheets of paper, if necessary. If family member is your spouse, list only his or her children.)

Name	Relationship	Date of Birth (mm/dd/yyyy)	Country of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you applying for employment authorization for your family member?  Yes  No (If Yes, submit a Form I-765, Application for Employment Authorization, for the family member.)

**PART D. Processing Information.**

Please answer the following questions. (If your answer is "Yes" to any one of these questions, explain on a separate piece of paper. Answering "Yes" does not necessarily mean that your family member will be denied T nonimmigrant status.)

1. Has the family member for whom you are applying ever:
  - a. knowingly committed any crime of moral turpitude or a drug-related offense for which he or she have not been arrested?  Yes  No
  - b. been arrested, cited, charged, indicted, fined or imprisoned for breaking or violating any law or ordinance, excluding traffic violations?  Yes  No
  - c. been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action?  Yes  No
  - d. exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States?  Yes  No
2. Has the family member for whom you are applying ever received public assistance in the United States from any source, including the U.S. government or any state, country, city or municipality (other than emergency medical treatment), or is he or she likely to receive public assistance in the future?  Yes  No
3. Has the family member for whom you are applying:
  - a. within the past ten years been a prostitute or procured anyone for prostitution, or does he or she intend to engage in any such activities in the future?  Yes  No
  - b. engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling?  Yes  No
  - c. knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the United States illegally?  Yes  No
  - d. illicitly trafficked in any controlled substance, firearms, or persons, or knowingly assisted, abetted or colluded in illegal trafficking?  Yes  No
4. Has the family member for whom you are applying ever engaged in, conspired to engage in, or does he or she intend to engage in, sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity?  Yes  No
5. Has the family member for whom you are applying ever solicited membership or funds for, or through any means ever assisted or provided any type of material support to, any person or organization that has engaged or conspired to engage in sabotage, kidnapping, political assassination, hijacking or any other form of terrorist activity?  Yes  No
6. Does the family member for whom you are applying intend to engage in the United States in:
  - a. espionage?  Yes  No
  - b. any activity a purpose of which is opposition to, or the control or overthrow of, the government of the United States, by force, violence or other unlawful means?  Yes  No
  - c. any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information?  Yes  No
7. Has the family member for whom you are applying ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?  Yes  No
8. Did the family member for whom you are applying, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion?  Yes  No

**PART D. Processing Information. (Continued)**

- 9. Has the family member for whom you are applying ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin or political opinion?  Yes  No
- 10. Has the family member for whom you are applying ever been deported from the United States, or removed from the United States at government expense, excluded within the past year, or is he or she now in exclusion or deportation proceedings?  Yes  No
- 11. Is the family member for whom you are applying under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents or has he or she, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States or any immigration benefit?  Yes  No
- 12. Has the family member for whom you are applying ever left the United States to avoid being drafted into the United States Armed Forces?  Yes  No
- 13. Has the family member for whom you are applying ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver?  Yes  No
- 14. Is the family member for whom you are applying now withholding custody of a U.S. citizen child outside the United States. from a person granted custody of the child?  Yes  No
- 15. Does the family member for whom you are applying plan to practice polygamy in the United States?  Yes  No

**PART E. Attestation and Release.**

*The Derivative Applicant, the family member for whom you are applying, must sign below if he or she is presently in the United States. If someone helped you prepare this supplementary application, he or she must complete Part F.*

I have read, or had read to me, this form, the information provided on it, and the evidence provided with it, and certify, under penalty of perjury under the laws of the United States of America, that the information on this supplementary application and the evidence submitted with it are true and correct.

I authorize the release of any information from the record that the U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking for the family member for whom I am applying, to investigate my claim and to investigate fraudulent claims. I further authorize the U.S. Citizenship and Immigration Services to release information to law enforcement agencies and prosecutors investigating or prosecuting crimes of trafficking or related crimes.

[ \_\_\_\_\_ ]  
 Signature of Derivative Applicant (*The family member for whom you are applying.*)

\_\_\_\_\_  
 Date (mm/dd/yyyy)

[ \_\_\_\_\_ ]  
 Signature of Principal (*Sign your name within the brackets*)

\_\_\_\_\_  
 Date (mm/dd/yyyy)

**PART F. Preparer and/or Translator Certification.**

*To be completed and signed if this form is prepared by a person other than the applicant.*

I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

\_\_\_\_\_  
 (Preparer's/Translator's Printed Name)

\_\_\_\_\_  
 (Preparer's/Translator's Signature)

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Date (mm/dd/yyyy) \_\_\_\_\_

Relationship to the Applicant \_\_\_\_\_

**WARNING: Applicants who are in the United States illegally are subject to removal if their claims are not granted. 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.**

**PART G. Checklist.**

- I completely filled out and signed the form.
- I have attached evidence that:
- I am or have been a victim of a severe form of trafficking;
  - I am physically present in the United States on account of trafficking;
  - I am cooperating with the government in the investigation/prosecution of the traffickers (unless under age 18); and
  - I would suffer extreme hardship involving unusual and severe harm upon removal from the United States.
- I have included three photographs of myself.
- I have attached a check or money order for the required fees.

The required fees include:

- The fee for filing this application;
- The biometric services fee for fingerprinting the applicant, if the applicant is between the ages of 14 and 79 years, inclusive, and
- If the applicant is also currently filing for family members, the applicant is responsible for additional charges, as detailed in the instructions to Form I-914, Supplement A.

**If I am applying for one or more family members:**

- I have completed a Form I-914, Supplement A for each member for whom I am now applying and, if he or she is in the United States, each family member has signed that Form I-914, Supplement A.
- I have submitted the required evidence, including evidence of:
- My relationship to the family member for whom I am applying;
  - My age, if I am applying for my parent;
  - My child's age, if I am applying for my child; and
  - The extreme hardship that either I or my family member will suffer, if my family member is not permitted to join me in the United States.

I have included three photographs of each family member for whom I am now applying.

I have included a Form I-765 Application for Employment Authorization, if I am requesting employment authorization for my family member.

I have attached a check or money order for the required fees, or a request for a fee waiver.

The required fees include:

- The fee for filing this supplementary application;
- The biometric services fee for the applicant, if the applicant is between 14 and 79 years, inclusive, and must be fingerprinted, or if the USCIS must also photograph the applicant or take his or her signature; and
- The filing fee for Form I-765, Application for Employment Authorization, if the family member is requesting employment authorization.

OMB No. 1615-0032; Expires 10/31/05  
You may continue to use this form after expiration date.

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

## I-914, Supplement B-Declaration of Law Enforcement Officer for Victim of Trafficking in Persons

**INSTRUCTIONS TO CERTIFYING OFFICER:** This applicant is applying for immigration benefits based upon a claim of having been a victim of a severe form of trafficking in persons. Please complete the form below based upon your knowledge of the case, including evidence developed by other law enforcement officers investigating the case.

In order to be granted immigration benefits, the applicant must demonstrate that he or she is present in the United States as a result of being a victim of a severe form of trafficking in persons. Unless the applicant is less than 18 years old, the applicant must also demonstrate that he or she is cooperating with law enforcement in the investigation and prosecution of the trafficking crime of which he or she was a victim.

To be completed by Federal Law Enforcement Officers for victims under the Victims of Trafficking and Violence Protection Act, Public Law 106-386.

### PART A. General Information.

Name of Government Agency:		<input type="checkbox"/> U.S. Marshal's Service, DOJ	<input type="checkbox"/> U.S. Attorney's Office, DOJ	Date (mm/dd/yyyy)
<input type="checkbox"/> U.S. Citizenship and Immigration Services, DHS	<input type="checkbox"/> Federal Bureau of Investigation, DOJ	<input type="checkbox"/> Diplomatic Security, DOS		
<input type="checkbox"/> Civil Rights Division, DOJ	<input type="checkbox"/> Criminal Division, DOJ	<input type="checkbox"/> Other _____		
Address of Agency/Official				
Name and Title of Certifying Officer or Official				
City	State	ZIP Code	Phone No.	Fax No.
Victim's Name	Other Names Used	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (mm/dd/yyyy)
Date of Crime (mm/dd/yyyy)	Charges			Case No.
Date Initiated (mm/dd/yyyy)	Case Status <input type="checkbox"/> On-going <input type="checkbox"/> Completed <input type="checkbox"/> N/A		Date Completed (mm/dd/yyyy)	FBI Identification No., if any

### PART B. Statement of Claim.

- The applicant is or has been a victim of a severe form of trafficking in persons. Specifically, he or she is a victim of: *(Please check all that apply. Base your analysis on the practices to which the victim was subjected rather than on the specific violations charged, the counts on which convictions were obtained, or whether any prosecution resulted in convictions. Note that the definitions that control this analysis are not the elements of criminal offenses, but are those set forth at 8 CFR 214.11(a).)*
  - Sex trafficking in which a commercial sex act was induced by force, fraud or coercion. Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act.
  - Sex trafficking and the victim is under the age of 18.
  - The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.
  - Not applicable.
  - Other, please specify on attached additional sheets.
- Please describe the victimization upon which the applicant's claim is based and identify the relationship between that victimization and the crime under investigation/prosecution. Attach the results of any name or database inquiry performed in the investigation of the case. Please include relevant dates, etc. Attach additional sheets, if necessary.
- Has the applicant expressed any fear of retaliation or revenge if removed from the United States? If yes, please explain. Attach additional sheets, if necessary.

**PART C. Cooperation of Victim.** *(Attach additional sheets, if necessary.)*

The applicant:

- Has complied with requests for assistance in the investigation/prosecution of the crime of trafficking. *(Explain below.)*
- Has failed to comply with requests to assist in the investigation/prosecution of the crime of trafficking. *(Explain below.)*
- Has not been requested to assist in the investigation/prosecution of any crime of trafficking.
- Has not yet attained the age of 18.
- Other, please specify on attached additional sheets.

**PART D. Family Members.**

- Yes  No Are any of the applicant's relatives believed to have been involved in his or her trafficking to the United States? If Yes, list the relatives and describe that relative's involvement in the applicant's trafficking.

**PART E. Attestation.**

Based upon investigation of the facts, I certify, under penalty of perjury, that the above noted individual is or has been a victim of a severe form of trafficking in persons as defined by the VTVPA. I certify that the above information is true and correct to the best of my knowledge, and that I have made, and will make, no promises regarding the above victim's ability to obtain a visa from the U.S. Citizenship and Immigration Services, based upon this certification.

[ \_\_\_\_\_ ]  
*(Signature of Law Enforcement Officer  
 identified in Box A above)*

\_\_\_\_\_  
*Date (mm/dd/yyyy)*

[ \_\_\_\_\_ ]  
*(Signature of Supervisor of Certifying Officer)*

\_\_\_\_\_  
*(Printed Name of Supervisor)*

\_\_\_\_\_  
*Date (mm/dd/yyyy)*

**DECLARATION UNDER PENALTY OF PERJURY**

CASE NAME	CASE NUMBER
-----------	-------------

I, \_\_\_\_\_ residing at \_\_\_\_\_

\_\_\_\_\_ hereby declare that I was a victim of human trafficking, where I was subjected to one of the following:

- 1) Sex trafficking in which a commercial sex act was induced by force, fraud, or coercion (or I was induced to perform such acts and have not attained 18 years of age); or
- 2) The recruitment, harboring, transportation, provision, or obtaining for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

I declare under penalty of perjury that the foregoing statement is true and correct, and I am aware that if I present any material matter as true which I know to be false, I may be subjected to penalties prescribed for perjury under the Penal Code of the State of California in accordance with Section 11054 of the Welfare and Institutions Code.

Executed at \_\_\_\_\_ California, this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Signature of Applicant's Representative

Title of Applicant's Representative \_\_\_\_\_

**U VISA CERTIFICATION FORM**

I, \_\_\_\_\_, hereby affirm the following:  
(NAME)

1. I am a: (check one)

\_\_\_\_\_ Federal official      \_\_\_\_\_ State official      \_\_\_\_\_ Local official  
(municipal, district, county)

\_\_\_\_\_ INS officer\* (see 2B below)

Specifically, I am a: (check one)

\_\_\_\_\_ Law Enforcement Officer      \_\_\_\_\_ Prosecutor;

\_\_\_\_\_ Judge      \_\_\_\_\_ Other Investigating Authority.

\_\_\_\_\_  
(JOB TITLE)

\_\_\_\_\_  
(NAME OF EMPLOYER)

\_\_\_\_\_  
(STREET ADDRESS/LOCATION)

\_\_\_\_\_  
(CITY, STATE & ZIP CODE)

\_\_\_\_\_  
(TELEPHONE)

2A. I am responsible or the agency for which I work is responsible for investigating (or overseeing the investigation of) criminal activity involving or similar to violations of (some or all of) the following types of offenses under Federal, State or local criminal laws: rape; torture; trafficking; incest; domestic violence; sexual assault; abusive sexual contact; prostitution; sexual exploitation; female genital mutilation; being held hostage; peonage; involuntary servitude; slave trade; kidnapping; abduction; unlawful criminal restraint; false imprisonment; blackmail; extortion; manslaughter; murder; felonious assault; witness tampering; obstruction of justice; perjury; or attempt, conspiracy or solicitation to commit any of these crimes OR

\*2B. I am an INS officer with information not limited to immigration violations related to criminal activity described above or similar criminal activity.

3. The criminal activity at issue in this case may involve (but is not limited to) possible violations of the following criminal laws:

(PROVIDE STATUTE OR CODE CITATION(S) AND OFFENSE NAME(S))

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and based on my expertise and understanding of these laws, I have determined that these laws fall within the list of offenses set forth in Question #2 or is similar activity violating Federal, State or local criminal law.

4. It is suspected that this criminal activity occurred on or about:

(SPECIFY AS MUCH AS POSSIBLE DATE(S) AND LOCATION(S) OF CRIMINAL ACTIVITY)

---

5. I affirm that \_\_\_\_\_ : (CHECK ALL THAT APPLY)

(NAME OF U VISA APPLICANT)\*\*

- has been helpful;
- is being helpful;
- is likely to be helpful

in an/the investigation and/or prosecution of this criminal activity.

6. I affirm that \_\_\_\_\_ possesses relevant information

(NAME OF U VISA APPLICANT)\*\*

relating to this criminal activity. This information includes (but is not limited to) the following: (PROVIDE BRIEF DESCRIPTION OF INFORMATION)

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\*\* If the U visa applicant is under the age of 16, please certify that the applicant's parent, guardian or "next friend" meets these requirements.



LEGAL AID FOUNDATION OF [REDACTED]  
ATTORNEYS AT LAW

[REDACTED]  
[REDACTED]

[REDACTED]

[REDACTED]  
[REDACTED]  
[REDACTED]

[REDACTED]

Our File Number

November 22, 2006

U.S. Citizenship and Immigration Services  
Attn: VAWA Unit, Box 1000  
Vermont Service Center  
75 Lower Welden Street  
St. Albans, VT 05479-0001

VIA CERTIFIED MAIL  
7006 2150 0000 4241 5948

RE: [REDACTED] (principal)  
[REDACTED] (derivative)  
[REDACTED] (derivative)

**Requests for Interim Relief for U Nonimmigrant Status and  
Requests for Deferred Action**

Dear Officer:

I represent Ms. [REDACTED]. A signed form G-28 is enclosed. Ms. [REDACTED] is applying for interim relief for U nonimmigrant status for herself and her children, [REDACTED] and [REDACTED]. Their birth certificates and English translations are included. Ms. [REDACTED] was the victim of spousal abuse. At this time, Ms. [REDACTED] is also requesting deferred action for herself and her children.

Enclosed are the following documents to establish Ms. [REDACTED] *prima facie* eligibility for U nonimmigrant status:

**Substantial physical or mental abuse as a result of having been a victim of certain criminal activity that violated the laws of the United States**

- ♦ [REDACTED] Police Department Report of infliction of corporal injury on spouse committed against [REDACTED]
- ♦ Criminal Protective Order protecting [REDACTED] and restraining [REDACTED]

Possession of information concerning that criminal activity/Assistance to law enforcement

◆U Visa Certification Form completed by Detective [REDACTED] of the [REDACTED] Police Department, stating that the criminal activity at issue in this case is infliction of corporal injury on spouse and that [REDACTED] has been helpful in the investigation and prosecution of the crime.

Your prompt attention to this case is greatly appreciated.

Sincerely,

[REDACTED]

Attorney at Law



Early U Visa application/Interim Relief Request		Notice of Deferred Action	
Initial		Applicant [REDACTED]	A Number A [REDACTED]
Notice Date November 07, 2006	Page 1	Derivative	A Number

[REDACTED]  
C/O [REDACTED] Esq.  
Legal Aid Foundation of Los Angeles  
5228 East Whittier Boulevard  
Los Angeles, CA 90022-4013

A review of your request for interim relief has determined that you may be eligible for U nonimmigrant status under section 101(a)(15)(U) of the Immigration and Nationality Act. Therefore, CIS has decided to place your case in deferred action. This is an administrative choice to give some cases lower priority for removal while implementing regulations are being promulgated. CIS does not anticipate instituting action for removal at this time. Deferred action will remain in effect for a period of one year unless it is terminated earlier for reasonable cause and upon appropriate notice. You may request an extension of deferred action. Such a request may be submitted within 120 days of the expiration date of the deferred action validity period.

**A COPY OF THIS NOTICE MUST ACCOMPANY ANY REQUEST FOR AN EXTENSION OF THIS DETERMINATION.**

**PLEASE NOTE: DEFERRED ACTION DOES NOT CONFER ANY IMMIGRATION STATUS, AND THE DECISION TO ASSESS DEFERRED ACTION DOES NOT MEAN THAT A SUBSEQUENT APPLICATION FOR U NONIMMIGRANT STATUS WILL BE APPROVED.**

\*\*\*\*\*  
DEFERRED ACTION VALIDITY PERIOD: November 07, 2006 to November 06, 2007  
\*\*\*\*\*

Employment Authorization

Pursuant to 8 CFR Sec. 274a.12(c)(14), an alien who is under deferred action is eligible to submit an application for employment authorization if the alien establishes an economic necessity for employment. This application, on Form I-765, should be filed with this office. The alien must provide information regarding his or her assets, income and expenses in accordance with the instructions on the Form I-765.

Extension of Deferred Action

In order to extend Deferred Action, you must do one (1) of the following:

1. File Form I-765 for Employment Authorization, pursuant to 8 CFR Sec 274a.12(c)(14) WITH THIS OFFICE. If you still qualify, Deferred Action will be extended at the time your application for employment is approved.
2. Request in writing for an extension of Deferred Action.

If you are represented by an attorney, all further correspondence should be accompanied by Form G-28.

**THIS FORM DOES NOT CONSTITUTE EMPLOYMENT AUTHORIZATION NOR MAY IT BE USED IN PLACE OF AN EMPLOYMENT AUTHORIZATION DOCUMENT.**

You will be notified separately about any other applications or petitions you filed. Save this notice. Please enclose a copy of it if you write to us about this case, or if you file another application based on this decision. Our address is:

U.S. CITIZENSHIP AND IMMIGRATION SERVICES  
VERMONT SERVICE CENTER  
75 LOWER WELDEN STREET  
ST. ALBANS, VT 05479-0001

THE UNITED STATES OF AMERICA

RECEIPT NUMBER: EAC-xx-xxx-xxxxx		CASE TYPE I765
RECEIVED DATE September 28, 2006	PRIORITY DATE	APPLICATION FOR EMPLOYMENT AUTHORIZATION
NOTICE DATE October 2, 2006	PAGE 1 of 1	APPLICANT LAST, FIRST
<i>Attorney sent 2 Address</i>		Notice Type: Receipt Notice  Amount received: \$ 180.00  Class requested: C14

**Receipt notice** - If any of the above information is incorrect, call customer service immediately.

**Processing time** - Processing times vary by kind of case.

- You can check out current processing time for this kind of case on our website at [uscis.gov](http://uscis.gov).
- On our website you can also sign up to get free e-mail updates as we complete key processing steps on this case.
- Most of the time your case is pending the processing status will not change because we will be working on others filed earlier.
- We will notify you by mail when we make a decision on this case, or if we need something from you.

If you move while this case is pending, call customer service when you move.

- Processing times can change. If you don't get a decision or update from us within our current processing time, check our website or call for an update.

If you have questions, check our website or call customer service. Please save this notice, and have it with you if you contact us about this case.

**Notice to all customers with a pending I-130 petition** - USCIS is now processing Form I-130, Petition for Alien Relative, as a visa number becomes available. Filing and approval of an I-130 relative petition is only the first step in helping a relative immigrate to the United States. Eligible family members must wait until there is a visa number available before they can apply for an immigrant visa or adjustment of status to a lawful permanent resident. This process will allow USCIS to concentrate resources first on cases where visas are actually available. This process should not delay the ability of one's relative to apply for an immigrant visa or adjustment of status. Refer to [www.state.gov/travel](http://www.state.gov/travel) to determine current visa availability dates. For more information, please visit our website at [www.uscis.gov](http://www.uscis.gov) or contact us at 1-800-375-5283.

**If this receipt is for an I-485, or I-698 application**  
USCIS WILL SCHEDULE YOUR BIOMETRICS APPOINTMENT. You will be receiving a biometrics appointment notice with a specific time, date and place where you will have your fingerprints and/or photos taken. You MUST wait for your biometrics appointment notice prior to going to the ASC for biometrics processing. This I-797 receipt notice is NOT your biometrics appointment notice and should not be taken to an ASC for biometrics processing.

**WHAT TO BRING TO YOUR BIOMETRICS APPOINTMENT.**  
Please bring your biometrics appointment letter (with specific time, date and place where you will have your fingerprints and/or photo taken) AND your photo identification to your biometrics appointment.


Acceptable kinds of photo identification are:

- a passport or national photo identification issued by your country,
- a drivers license,
- a military photo identification, or
- a state-issued photo identification card.

Always remember to call customer service if you move while your case is pending. If you have a pending I-130 relative petition, also call customer service if you should decide to withdraw your petition or if you become a U.S. citizen.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

IMMIGRATION & NATURALIZATION SERVICE  
VERMONT SERVICE CENTER  
75 LOWER WELDEN STREET  
SAINT ALBANS VT 05479-0001  
Customer Service Telephone: (800) 375-5283



RECEIVED  
MAY 25 10 26 AM '06



U.S. Citiz  
and Immigration  
Services

May 18, 2006

[REDACTED]  
Community Legal Services  
2117 University Avenue, Ste B  
East Palo Alto, CA 94303

RE: [REDACTED]

Dear Sir/Madam:

This office is in receipt of your preliminary application for U-nionimmigrant status. This office has reviewed your application for the purpose of determining eligibility for interim relief in the form of deferred action. In order to qualify for interim relief, the request must include evidence that addresses the four criteria listed in Section 101(a)(15)(U)(i)(I)-(IV) of the Immigration and Nationality Act. At this time, this office is not able to grant you interim relief for the following reason(s):

There is insufficient evidence that you have suffered substantial physical or mental abuse as a result of being the victim of the claimed criminal activity.

You may submit documentation to overcome these deficiencies. Any documents submitted should be accompanied by a copy of this letter and sent to the following address:

USCIS - Vermont Service Center  
ATTN: VAWA Unit  
75 Lower Welden Street  
St. Albans, VT 05479-0001

Sincerely,

Paul E. Novak, Jr.  
Center Director