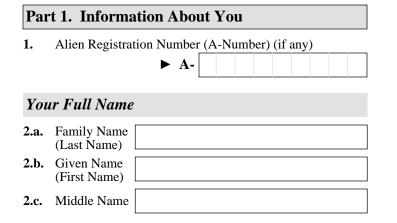


### **Application for Permission to Reapply for Admission Into the United States After Deportation or Removal**

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

	For DHS Use Only					
Alien Registration Number A- Initial Receipt Transferred In		Fee Stamp		Action Block		
Аррг	roved	Relocated Returned	1 Remarks			
<ul> <li>□ INA 212(a)(9)(A) for Advance Approval</li> <li>□ INA 212(a)(9)(A)</li> <li>□ INA 212(a)(9)(C)</li> <li>□ Denied</li> </ul>		Transferred Out	_	DHS Office Name/Location		
To be completed Attorney or Acc Representative	redited (if any).		Attorney State Bar Number (if applicable)	Attorney or Accredited Representative USCIS Online Account Number (if any)		

► START HERE - Type or print in black ink.



#### **Other Names Used**

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 9**. **Additional Information**.

3.a.	Family Name (Last Name)	
3.b.	Given Name (First Name)	
3.c.	Middle Name	

4.a.	Family Name (Last Name)	
4.b.	Given Name (First Name)	
<b>4.c.</b>	Middle Name	

### Mailing Address USPS ZIP Code Lookup

**NOTE:** If you are outside the United States, provide a U.S. mailing address, if available. **If a U.S. mailing address is not available, provide your mailing address abroad.** 

_			
5.a.	In Care	Of Name	(if anv)

5.b.	Street Number and Name
5.c.	Apt. Ste. Flr.
5.d.	City or Town
5.e.	State 5.f. ZIP Code
5.g.	Province
5.h.	Postal Code
5.i.	Country

Par	t 1. Information About You (continued)	If you seek an immigrant or nonimmigrant visa and you are or will file your application for consent to reapply with your
6.	Is your mailing address the same address where you currently live (physical address)?	immigrant or nonimmigrant visa application, provide the information requested in <b>Item Numbers 16 17.b.</b>
	If you answered "No" to <b>Item Number 6.</b> , provide your current physical address in <b>Item Numbers 7.a 7.f.</b>	16. The Department of State (DOS) Consular Case Number (if available)
Phy	vsical Address	The Location of the U.S. Embassy or U.S. Consulate Where
7.a.	Street Number and Name	Your Application for an Immigrant Visa is Being or Will Be Made
7.b.	Apt. Ste. Flr.	17.a. City or Town
7.c.	City or Town	<b>17.b.</b> Country
7.d.	State 7.e. ZIP Code	
7.f.	Province	If you are seeking consent to reapply in connection with your
7.g.	Postal Code	application to adjust your status to that of a lawful permanent resident, provide information in <b>Item Numbers 18.a 18.c.</b>
7.h.	Country	<b>18.a.</b> USCIS Receipt Number (if any)
Oth	er Information About You	<b>18.b.</b> Where did you file your application (for example, USCIS Office Name" or "Lockbox")?
8.	U.S. Social Security Number (if any)	
0		<b>18.c.</b> Date Filed (mm/dd/yyyy)
9.	U.S. Online Account Number (if any)	<b>19.</b> Are you submitting Form I-601, Application for Waiver of Grounds of Inadmissibility, along with this application?
10.	Gender Male Female	Yes No
11.	Date of Birth (mm/dd/yyyy)	If you answered "No," provide the information requested in <b>Item Numbers 20.a 20.c.</b> about <b>previously</b> filed
12.	City or Town of Birth	Forms I-601 (if any):
		<b>20.a.</b> USCIS Receipt Number for Form I-601 (if any)
13.	State or Province of Birth (if applicable)	<b>20.b.</b> Where did you file your application (for example, "USCIS Office Name" or "Lockbox")?
14.	Country of Birth	
15.	Country of Citizenship or Nationality	20.c. Date Filed (mm/dd/yyyy)

## 212(a)(9)(A)(i))

1.a. I have been removed as an arriving alien in expedited removal proceedings under INA section 235(b)(1) or I was removed at the end of proceedings under INA section 240 as an arriving alien.

Part 2. Reasons You Are Filing Form I-212

**Removal as an Arriving Alien (INA Section** 

provided in Part 9. Additional Information.

If you are inadmissible to the United States for the following reason, select "Yes" and then select the appropriate boxes. If you need extra space to complete this section, use the space

- **1.b.** I have only been removed once, and my last removal was less than five years ago.
- **1.c.** I have been removed at least two or more times, and my last removal was less than 20 years ago.
- **1.d.** I have been convicted of an aggravated felony in the United States or abroad, before or after my removal from the United States. Provide information on your aggravated felony convictions in **Part 9. Additional Information** and include the required evidence.
- 2. Date You Were Removed From the United States (mm/dd/yyyy)

Location From Where You Were Removed

3. City or Town
4. State

# *Removal as a Deportable Alien (INA Section* 212(a)(9)(A)(ii))

- 5.a. I have been removed as a deportable alien under INA section 240 or any other provision of the law, or I departed the United States while an order of removal was outstanding.
- **5.b.** I have only been removed once and my removal was less than 10 years ago.
- **5.c.** I have been removed two or more times, and my last removal was less than 20 years ago.
- 5.d. I have been convicted of an aggravated felony in the United States or abroad, before or after my removal from the United States. Provide information on your aggravated felony convictions in Part 9. Additional Information and include the required evidence.
- 6. Date You Were Excluded, Deported, or Removed From the United States (mm/dd/yyyy)

#### Location From Where You Were Removed

7.a. <u>City or Town</u>

7.b. State

## Entry After Unlawful Presence in the Aggregate of 1 Year (INA Section 212(a)(9)(C)(i)(I))

8. I entered or attempted to enter the United States without being admitted or paroled, after having been unlawfully present in the United States on or after April 1, 1997, for a period of more than one year, in the aggregate.



**NOTE:** If you answered "Yes" to **Item Number 8.**, list all the time periods during which you were unlawfully present in the United States (including any periods in which you overstayed your lawful status). Begin with your most recent period of unlawful presence. Also attach evidence demonstrating that you have *remained outside the United States for 10 years* since your last departure.

#### **Periods of Unlawful Presence**

- **9.a.** From (mm/dd/yyyy)
- **9.b.** To (mm/dd/yyyy)



**10.** Date You Departed the United States After Your Period of Unlawful Presence (mm/dd/yyyy)

Location Where You Departed the United States After Your Period of Unlawful Presence

**11.a.** City or Town

**11.b.** State

Location Where You Reentered or Attempted to Reenter the United States

**12.a.** City or Town

**12.b.** State

**13.** Date You Attempted to Unlawfully Enter or Reenter the United States After Period of Unlawful Presence (mm/dd/yyyy)

## **Part 2. Reasons You Are Filing Form I-212** (continued)

# Entry After Removal (INA Section 212(a)(9)(C)(i)(II))

**NOTE:** If you answered "Yes" to **Item Number 14.**, list all the dates when you were excluded, deported, or removed from the United States. If you need extra space to complete this section, use the space provided in **Part 9.** Additional Information.

**15.** Date You Were Excluded, Deported, or Removed From the United States (mm/dd/yyyy)

Location Where You Reentered or Attempted to Reenter the United States After Your Exclusion, Deportation, or Removal

#### 16.a. City or Town

**16.b.** State

17. Date You Entered or Attempted to Reenter the United States After Exclusion, Deportation, or Removal (mm/dd/yyyy)

#### Part 3. Reasons For Your Request For Permission to Reapply

If the Department of Homeland Security (DHS) permits you to reenter the United States, what immigration status will you seek?

- **1.a.** Permanent Resident
- **1.b.** Visitor
- **1.c.** Student
- **1.d.** Other (Explain)
- 2. Explain Why You Would Like to Reenter the United States

**NOTE:** If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

#### U.S. Citizen or Lawful Permanent Resident Family Members (if any)

**NOTE:** If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

3.a.	Family Name     (Last Name)	
3.b.	Given Name (First Name)	
3.c.	Middle Name	
3.d.	Relationship	

My relative is (Select one):

- **4.a.** A lawful permanent resident.
- **4.b.** A U.S. citizen.

#### Part 4. Biographic Information

- **1.** Ethnicity (Select **only one** box)
  - Hispanic or Latino
  - Not Hispanic or Latino
- 2. Race (Select all applicable boxes)
  - White
  - Asian

Sandy

- Black or African American
- American Indian or Alaska Native
- Native Hawaiian or Other Pacific Islander

3.	Height	Feet	Inches
4.	Weight		Pounds
5.	Eye Color (Sele	ct <b>only one</b> box)	
	Black	Blue	Brown
	Gray	Green	Hazel
	Maroon	Dink	Unknown/Other

6.	Hair Color (Select only one box)			
	Bald (No hair)	Black	Blond	
	Brown	Gray	Red	

White

## Part 5. Additional Information if Filing with CBP

If you are filing this application with Customs and Border Protection (CBP), provide the information requested in **Item Numbers 1.a. - 40.c.** 

#### Address History

Provide physical addresses for everywhere you have lived during the last ten years, whether inside or outside the United States. Provide your current address first. If you are unsure of the exact date, provide the closest approximate date to the best of your knowledge. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

Physical Address 1 (current address)

Thysical Address T (current address)	5. Name of Employer or Company
1.a. Street Number and Name	
<b>1.b.</b> Apt. Ste. Flr.	Address of Employer or Company
<b>1.c.</b> City or Town	6.a. Street Number and Name
1.d. State   1.e. ZIP Code	<b>6.b.</b> Apt. Ste. Flr.
1.f. Province	6.c. City or Town
1.g. Postal Code	6.d. State 6.e. ZIP Code
1.h. Country	6.f. Province
	6.g. Postal Code
Dates of Residence	<b>6.h.</b> Country
<b>2.a.</b> From (mm/dd/yyyy)	
<b>2.b.</b> To (mm/dd/yyyy)	7. Your Occupation
Physical Address 2	
<b>3.a.</b> Street Number	Dates of Employment
and Name	8.a. From (mm/dd/yyyy)
<b>3.b.</b> Apt. Ste. Flr.	
3.c. City or Town	<b>8.b.</b> To (mm/dd/yyyy)
3.d. State   3.e. ZIP Code	
3.f. Province	
3.g. Postal Code	
<b>3.h.</b> Country	

Dates of Residence

**4.a.** From (mm/dd/yyyy)

**4.b.** To (mm/dd/yyyy)

**Employment History** 

Employer 1 (current or most recent)

Information.

Provide your employment history for the last five years,

recent employment first. If you are unsure of the exact

whether inside or outside the United States. Provide the most

employment date, provide the closest approximate date to the

best of your knowledge. If you need extra space to complete

this section, use the space provided in Part 9. Additional



Part 5. Additional Information if Filing with	<b>17.</b> Country of Birth
CBP (continued)	
Employer 2	18. <u>Current City or Town of Residence (if living)</u>
9. Name of Employer or Company	
	<b>19.</b> Current Country of Residence (if living)
Address of Employer or Company	
<b>10.a.</b> Street Number	Information About Your Father
and Name	J Father's Legal Name
<b>10.b.</b> Apt. Ste. Flr.	20.a. Family Name
10.c. City or Town	(Last Name)       20.b. Given Name       (First Name)
10.d. State   10.e. ZIP Code	20.c. Middle Name
10.f. Province	Father's Name at Birth (if different than above)
<b>10.g.</b> Postal Code	21.a. Family Name
10.h. Country	(Last Name)
	21.b. Given Name (First Name)
11. Your Occupation	<b>21.c.</b> Middle Name
	<b>22.</b> Date of Birth (mm/dd/yyyy)
Dates of Employment	23. City or Town of Birth
<b>12.a.</b> From (mm/dd/yyyy)	]
	24. Country of Birth
<b>12.b.</b> To (mm/dd/yyyy)	
Information About Your Parents	<b>25.</b> Current City or Town of Residence (if living)
Information About Your Mother	26 Comment Country of Devidence (if living)
Mother's Legal Name	26. Current Country of Residence (if living)
<b>13.a.</b> Family Name	
(Last Name) <b>13.b.</b> Given Name	Information About Your Marital History
(First Name)	<b>27.</b> What is your current marital status?
13.c. Middle Name	Single, Never Married Legally Separated
Mother's Name at Birth (if different than above)	Married Marriage Annulled
I4.a. Family Name (Last Name)	Divorced Other
<b>4.b.</b> Given Name	
(First Name)	<b>28.</b> How many times have you been married (including
	annulled marriages and marriages to the same person)?
15. Date of Birth (mm/dd/yyyy)	
16. City or Town of Birth	1

Part 5.	Additional	Information	if	Filing	with
CBP (co	ontinued)				

## *Information About Your Current Marriage* (including if you are legally separated)

If you are currently married, provide the following information about your current spouse.

Current Spouse's Legal Name

	Family Name (Last Name)	35.a. Family Name (Last Name)					
29.b.	Given Name (First Name)	35.b. Given Name (First Name)					
29.c.	Middle Name	<b>35.c.</b> Middle Name					
30.	A-Number (if any) ► A-	<b>36.</b> Prior Spouse's Date of Birth (mm/dd/yyyy)					
31.	Current Spouse's Date of Birth (mm/dd/yyyy)	<b>37.</b> Date of Marriage to Prior Spouse (mm/dd/yyyy)					
32.	Date of Marriage to Current Spouse (mm/dd/yyyy)	Place of Marriage to Prior Spouse					
Curro	nt Spouse's Place of Birth	<b>38.a.</b> City or Town					
	City or Town						
55.a.		<b>38.b.</b> State or Province					
33.b.	State or Province	38.c. Country					
33.c.	Country	<ul> <li>39. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)</li> </ul>					
Place	of Marriage to Current Spouse						
34.a.	City or Town	Place Where Marriage with Prior Spouse Legally Ended 40.a. City or Town					
34.b.	State or Province	40.b. State or Province					
34.c.	Country	40.c. Country					

marriage)

### Information About Prior Marriages (if any)

Prior Spouse's Legal Name (provide family name before

If you have been married before, whether in the United States or in any other country, provide the following information about your prior spouse. If you have had more than one previous marriage, use the space provided in **Part 9. Additional Information** to provide the information below.

#### Part 6. Applicant's Contact Information, Certification, and Signature

#### **Applicant's Contact Information**

Provide your daytime telephone number, mobile telephone number (if any), and email address (if any).

1.	Applicant's Daytime Telephone Number					
2.	Applicant's Mobile Telephone Number (if any)					
3.	Applicant's Email Address (if any)					
5.						

#### Applicant's Certification and Signature

I certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and submitted with my application, I read and understand or, if interpreted to me in a language in which I am fluent by the interpreter listed in **Part 7.**, understood, all of the responses and information contained in, and submitted with, my application, and that all of the responses and the information are complete, true, and correct. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

4. Applicant's Signature

Date of Signature (mm/dd/yyyy)

**NOTE TO ALL APPLICANTS:** If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

### **Part 7. Interpreter's Contact Information, Certification, and Signature**

#### Interpreter's Full Name

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

Interpreter's Given Name (First Name)

2. Interpreter's Business or Organization Name

#### Interpreter's Contact Information

- 3. Interpreter's Daytime Telephone Number
- 4. Interpreter's Mobile Telephone Number (if any)
- 5. Interpreter's Email Address (if any)

#### Interpreter's Certification and Signature

I certify, under penalty of perjury, that I am fluent in English

and

and I have interpreted every question on the application and Instructions and interpreted the applicant's answers to the questions in that language, and the applicant informed me that they understood every instruction, question, and answer on the application.

6. Interpreter's Signature

Date of Signature (mm/dd/yyyy)

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

#### **Preparer's Full Name**

1. Preparer's Family Name (Last Name)

Preparer's Given Name (First Name)

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

#### **Preparer's Contact Information**

- 3. Preparer's Daytime Telephone Number
- 4. Preparer's Mobile Telephone Number (if any)
- 5. Preparer's Email Address (if any)

**Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant** (continued)

### **Preparer's Certification and Signature**

I certify, under penalty of perjury, that I prepared this application for the applicant at their request and with express consent and that all of the responses and information contained in and submitted with the application are complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that they understand the responses and information in or submitted with the application.

6. Preparer's Signature

Date of Signature (mm/dd/yyyy)	

### Part 9. Additional Information

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

	<b>ber</b> , and <b>Item</b> I and date each sh		er to which you	ir answ	er refers; and						
1.a.	Family Name (Last Name)										
1.b.	Given Name (First Name)										
1.c.	Middle Name										
2.	A-Number (if	any) 🕨	• A-								
<b>3.</b> a.	Page Number	3.b.	Part Number	3.c.	Item Number	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
3.d.						6.d.					
4.a. 4.d.	Page Number	4.b.	Part Number	4.c.	Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number

**5.a.** Page Number

5.d.

5.b. Part Number

5.c. Item Number