

VOICES Information

The Voices of Immigrant Communities Empowering Act, also known as the VOICES Act, allows “victims of qualifying criminal activity” to request a “certification form” or a law enforcement certification form or statement required by federal immigration law certifying that a person is a victim of qualifying criminal activity for use in applying for a T or U Visa under the United States Code.

A "victim of qualifying criminal activity" means a person described in Section 1101(a)(15)(U)(i)(I) of Title 8 of the United States Code, in the definition of "victim of a severe form of trafficking" in Section 7102(14) of Title 22 of the United States Code, or in any implementing federal regulations, supplementary information, guidance, and instructions.

A "qualifying criminal activity" means any activity, regardless of the stage of detection, investigation, or prosecution, designated in Section 1101(a)(15)(U)(iii) of Title 8 of the United States Code, any implementing federal regulations, supplementary information, guidance, and instructions.

To request a certification, complete the appropriate form attached. Once completed, provide the form to:

Jeff Hamer
Interim Chief of Police
Macomb Police Department
120 S. McArthur St.
Macomb, Illinois
Ph.: 309-833-4505
Fax: 309-836-2765
jhamer@macombpolice.com

Interim Chief Jeff Hamer is the designated official to receive, review and response to requests for completion of the certification form. If you have any questions concerning this process or your request, please contact Chief Hamer.

**PETITION FOR U NONIMMIGRANT STATUS
FORM I-918**



Petition for U Nonimmigrant Status

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

USCIS
Form I-918
OMB No. 1615-0104
Expires 06/30/2023

For USCIS Use Only	Remarks		Receipt		Action Block	
	U.S. Embassy Consulate	Validity Dates (mm/dd/yyyy)		Wait Listed		
		From: / /				
To: / /		Stamp Number	Date (mm/dd/yyyy)			

To be completed by an attorney or accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney State Bar Number (if applicable) <input type="text"/>	Attorney or Accredited Representative USCIS Online Account Number (if any) <input type="text"/>
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► **START HERE - Type or print in black or blue ink.**

Part 1. Information About You (Person filing this petition as a victim)

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

Other Names Used (Include maiden name, nicknames, and aliases, if applicable)

2.a. Family Name (Last Name)

2.b. Given Name (First Name)

2.c. Middle Name

Home Address

3.a. Street Number and Name

3.b. Apt. Ste. Flr.

3.c. City or Town

3.d. State

3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

Safe Mailing Address (if other than Home Address)

4.a. In Care Of Name

4.b. Street Number and Name

4.c. Apt. Ste. Flr.

4.d. City or Town

4.e. State

4.f. ZIP Code

4.g. Province

4.h. Postal Code

4.i. Country

Other Information

5. Alien Registration Number (A-Number) (if any)
► A-

6. U.S. Social Security Number (if any)
►

7. USCIS Online Account Number (if any)
►

8. Marital Status
 Single Married Divorced Widowed

Part 1. Information About You (continued)

- 9. Gender Male Female
- 10. Date of Birth (mm/dd/yyyy)
- 11. Country of Birth
- 12. Country of Citizenship or Nationality
- 13. Form I-94 Arrival-Departure Record Number
- 14. Passport Number
- 15. Travel Document Number
- 16. Country of Issuance for Passport or Travel Document
- 17. Date of Issuance for Passport or Travel Document (mm/dd/yyyy)
- 18. Expiration Date for Passport or Travel Document (mm/dd/yyyy)

Place and Date of Last Entry into the United States and Date Authorized Stay Expired

- 19.a. City or Town
- 19.b. State
- 20. Date of Last Entry into the United States (mm/dd/yyyy)
- 21. Date Authorized Stay Expired (mm/dd/yyyy)
- 22. Current Immigration Status

Part 2. Additional Information About You

Answering "Yes" to the following questions below requires explanations and supporting documentation. Attach relevant documents in support of your claims that you are a victim of criminal activity listed in the Immigration and Nationality Act (INA) section 101(a)(15)(U)(iii). You must also attach a personal narrative statement describing the criminal activity of which you are a victim. If you are only petitioning for U derivative status for qualifying family members subsequent to your (the principal petitioner) initial filing, you are not required to submit evidence supporting the original petition with the new Form I-918.

If you need extra space to complete **Part 2.**, use the space provided in **Part 8. Additional Information.**

Select "Yes" or "No," as appropriate, for each of the following questions.

- 1. I am a victim of criminal activity listed in the INA at section 101(a)(15)(U)(iii). Yes No
- 2. I have suffered substantial physical or mental abuse as a result of having been a victim of this criminal activity. Yes No
- 3. I possess information concerning the criminal activity of which I was a victim. Yes No
- 4. I am submitting Form I-918, Supplement B, U Nonimmigrant Status Certification, from a certifying official. Yes No
- 5. The crime of which I am a victim occurred in the United States (including Indian country and military installations) or violated the laws of the United States. Yes No
- 6. I am under 16 years of age. Yes No
- 7.a. I was or am in immigration proceedings. Yes No

If you answered "Yes," select the type of proceedings. If you were in proceedings in the past and are no longer in proceedings, provide the date of action. If you are currently in proceedings, type or print "Current" in the appropriate date field. Select **all applicable** boxes. Use the space provided in **Part 8. Additional Information** to provide an explanation.

- 7.b. Removal Proceedings
Removal Date (mm/dd/yyyy)
- 7.c. Exclusion Proceedings
Exclusion Date (mm/dd/yyyy)
- 7.d. Deportation Proceedings
Deportation Date (mm/dd/yyyy)
- 7.e. Rescission Proceedings
Rescission Date (mm/dd/yyyy)
- 7.f. Judicial Proceedings
Judicial Date (mm/dd/yyyy)

Part 2. Additional Information About You
(continued)

Provide the date of entry, place of entry, and status under which you entered the United States for each entry during the five years preceding the filing of this petition.

8.a. Date of Entry (mm/dd/yyyy)

Place of Entry into the United States

8.b. City or Town

8.c. State

8.d. Status at the Time of Entry (for example, F-1 student, B-2 tourist, entered without inspection)

9.a. Date of Entry (mm/dd/yyyy)

Place of Entry into the United States

9.b. City or Town

9.c. State

9.d. Status at the Time of Entry (for example, F-1 student, B-2 tourist, entered without inspection)

10.a. Date of Entry (mm/dd/yyyy)

Place of Entry into the United States

10.b. City or Town

10.c. State

10.d. Status at the Time of Entry (for example, F-1 student, B-2 tourist, entered without inspection)

If you are outside of the United States, provide the U.S. Consulate or inspection facility or a safe foreign mailing address you want notified if this petition is approved.

11.a. Type of Office (Select **only one** box):
 U.S. Consulate Pre-Flight Inspection
 Port-of-Entry

11.b. City or Town

11.c. State

11.d. Country

Safe Foreign Address Where You Want Notification Sent
(if other than U.S. Consulate, Pre-Flight Inspection, or Port-of-Entry)

12.a. Street Number and Name

12.b. Apt. Ste. Flr.

12.c. City or Town

12.d. Province

12.e. Postal Code

12.f. Country

Part 3. Processing Information

Answer the following questions about yourself. For the purposes of this petition, you must answer "Yes" to the following questions, if applicable, even if your records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record.

NOTE: If you answer "Yes" to **ANY** question in **Part 3.**, provide an explanation in the space provided in **Part 8. Additional Information.**

NOTE: Answering "Yes" does not necessarily mean that U.S. Citizenship and Immigration Services (USCIS) will deny your Petition for U Nonimmigrant Status.

Have you **EVER**:

- 1.a. Committed a crime or offense for which you have not been arrested? Yes No
- 1.b. Been arrested, cited, or detained by any law enforcement officer (including Department of Homeland Security (DHS), former Immigration and Naturalization Service (INS), and military officers) for any reason? Yes No
- 1.c. Been charged with committing any crime or offense? Yes No
- 1.d. Been convicted of a crime or offense (even if the violation was subsequently expunged or pardoned)? Yes No
- 1.e. Been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)? Yes No

Part 3. Processing Information (continued)

- 1.f. Received a suspended sentence, been placed on probation, or been paroled? Yes No
- 1.g. Been in jail or prison? Yes No
- 1.h. Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action? Yes No
- 1.i. Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? Yes No

Information About Arrests, Citations, Detentions, or Charges

If you answered "Yes" to any of the above questions, respond to the questions below to provide additional details. If you need extra space, use the space provided in **Part 8. Additional Information**.

- 2.a. Why were you arrested, cited, detained, or charged?
- 2.b. Date of arrest, citation, detention, or charge (mm/dd/yyyy)

Where were you arrested, cited, detained, or charged?

- 2.c. City or Town
- 2.d. State
- 2.e. Country
- 2.f. Outcome or disposition (for example, no charges filed, charges dismissed, jail, probation)

- 3.a. Why were you arrested, cited, detained, or charged?
- 3.b. Date of arrest, citation, detention, or charge (mm/dd/yyyy)

Where were you arrested, cited, detained, or charged?

- 3.c. City or Town
- 3.d. State
- 3.e. Country
- 3.f. Outcome or disposition (for example, no charges filed, charges dismissed, jail, probation)

Have you **EVER**:

- 4.a. Engaged in, or do you intend to engage in, prostitution or procurement of prostitution? Yes No
- 4.b. Engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling? Yes No
- 4.c. Knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States illegally? Yes No
- 4.d. Illicitly trafficked in any controlled substance or knowingly assisted, abetted, or colluded in the illicit trafficking of any controlled substance? Yes No

Have you **EVER** committed, planned or prepared, participated in, threatened to, attempted to, conspired to commit, gathered information for, or solicited funds for any of the following:

- 5.a. Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? Yes No
- 5.b. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? Yes No
- 5.c. Assassination? Yes No
- 5.d. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No
- 5.e. The use of any biological agent, chemical agent, nuclear weapon or device, explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No

Have you **EVER** been a member of, solicited money or members for, provided support for, attended military training (as defined in section 2339D(c)(1) of Title 18, United States Code) by or on behalf of, or been associated with any other group of two or more individuals, whether organized or not, which has been designated as, or has engaged in or has a subgroup which has been designated as, or has engaged in:

- 6.a. A terrorist organization under section 219 of the INA? Yes No
- 6.b. Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? Yes No

Part 3. Processing Information (continued)

- 6.c. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? Yes No
- 6.d. Assassination? Yes No
- 6.e. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No
- 6.f. The use of any biological agent, chemical agent, nuclear weapon or device, explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No
- 6.g. Soliciting money or members or otherwise providing material support to a terrorist organization? Yes No

Do you intend to engage in the United States in:

- 7.a. Espionage? Yes No
- 7.b. Any unlawful activity, or any activity the purpose of which is in opposition to, or the control, or overthrow of the government of the United States? Yes No
- 7.c. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information? Yes No
- 8. Have you **EVER** been or do you continue to be a member of the Communist or other totalitarian party, except when membership was involuntary? Yes No
- 9. Have you **EVER**, during the period of 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, ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group, or political opinion? Yes No

Have you **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

- 10.a. Acts involving torture or genocide? Yes No
- 10.b. Killing any person? Yes No
- 10.c. Intentionally and severely injuring any person? Yes No
- 10.d. Engaging in any kind of sexual conduct or relations with any person who was being forced or threatened? Yes No
- 10.e. Limiting or denying any person's ability to exercise religious beliefs? Yes No
- 10.f. The persecution of any person because of race, religion, national origin, membership in a particular social group, or political opinion? Yes No
- 10.g. Displacing or moving any person from their residence by force, threat of force, compulsion, or duress? Yes No

NOTE: If you answered "Yes" to any question in **Item Numbers 10.a. - 10.g.**, please describe the circumstances in **Part 8. Additional Information.**

- 11. Have you **EVER** advocated that another person commit any of the acts described in the preceding question, urged, or encouraged another person, to commit such acts? Yes No

Have you **EVER** been present or nearby when any person was:

- 12.a. Intentionally killed, tortured, beaten, or injured? Yes No
- 12.b. Displaced or moved from his or her residence by force, compulsion, or duress? Yes No
- 12.c. In any way compelled or forced to engage in any kind of sexual contact or relations? Yes No

Have you **EVER**:

- 13.a. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, or other insurgent organization? Yes No

Part 3. Processing Information (continued)

13.b. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No

13.c. Served in, been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons transported, possessed, or used any type of weapon? Yes No

NOTE: If you answered "Yes" to any question in **Item Numbers 13.a. - 13.c.**, please describe the circumstances in **Part 8. Additional Information.**

Have you **EVER**:

14.a. Received any type of military, paramilitary, or weapons training? Yes No

14.b. Been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? Yes No

14.c. Assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person? Yes No

NOTE: If you answered "Yes" to any question in **Item Numbers 14.a. - 14.c.**, please describe the circumstances in **Part 8. Additional Information.**

Have you **EVER**:

15.a. Recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group? Yes No

15.b. Used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat? Yes No

16. Are you **NOW** in removal, exclusion, rescission, or deportation proceedings? Yes No

17. Have you **EVER** had removal, exclusion, rescission, or deportation proceedings initiated against you? Yes No

18. Have you **EVER** been removed, excluded, or deported from the United States? Yes No

19. Have you **EVER** been ordered to be removed, excluded, or deported from the United States? Yes No

20. Have you **EVER** been denied a visa or denied admission to the United States? Yes No

21. Have you **EVER** been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time? Yes No

22. Are you **NOW** under a final order or civil penalty for violating section 274C of the INA (producing and/or using false documentation to unlawfully satisfy a requirement of the INA)? Yes No

23. Have you **EVER**, by fraud or willful misrepresentation of a material fact, sought to procure or procured a visa or other documentation, for entry into the United States or any immigration benefit? Yes No

24. Have you **EVER** left the United States to avoid being drafted into the U.S. Armed Forces or U.S. Coast Guard? Yes No

25. Have you **EVER** been a J nonimmigrant exchange visitor who was subject to the 2-year foreign residence requirement and not yet complied with that requirement or obtained a waiver of such? Yes No

26. Have you **EVER** detained, retained, or withheld the custody of a child, having a lawful claim to United States citizenship, outside the United States from a United States citizen granted custody? Yes No

27. Do you plan to practice polygamy in the United States? Yes No

28. Have you **EVER** entered the United States as a stowaway? Yes No

29.a. Do you **NOW** have a communicable disease of public health significance? Yes No

29.b. Do you **NOW** have or have you **EVER** had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or welfare of yourself or others? Yes No

29.c. Are you **NOW** or have you **EVER** been a drug abuser or drug addict? Yes No

Part 4. Information About Your Spouse and/or Children

If you need extra space to complete **Part 4.**, use the space provided in **Part 8. Additional Information.**

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

2. Date of Birth (mm/dd/yyyy)

3. Country of Birth

4. Relationship

5. Current Location

6.a. Family Name (Last Name)

6.b. Given Name (First Name)

6.c. Middle Name

7. Date of Birth (mm/dd/yyyy)

8. Country of Birth

9. Relationship

10. Current Location

11.a. Family Name (Last Name)

11.b. Given Name (First Name)

11.c. Middle Name

12. Date of Birth (mm/dd/yyyy)

13. Country of Birth

14. Relationship

15. Current Location

16.a. Family Name (Last Name)

16.b. Given Name (First Name)

16.c. Middle Name

17. Date of Birth (mm/dd/yyyy)

18. Country of Birth

19. Relationship

20. Current Location

21.a. Family Name (Last Name)

21.b. Given Name (First Name)

21.c. Middle Name

22. Date of Birth (mm/dd/yyyy)

23. Country of Birth

24. Relationship

25. Current Location

Filing On Behalf of Family Members

26. I am petitioning for one or more qualifying family members. Yes No

NOTE: If you answered “Yes” to **26.**, you must complete and include Supplement A for each family member for whom you are petitioning.

Part 5. Petitioner's Statement, Contact Information, Declaration, and Signature

NOTE: Read the **Penalties** section of the Form I-918 Instructions before completing this part.

Petitioner's Statement

NOTE: Select the box for either **1.a.** or **1.b.** If applicable, select the box for **2.**

1.a. I can read and understand English, and I have read and understand every question and instruction on this petition and my answer to every question.

1.b. The interpreter named in **Part 6.** read to me every question and instruction on this petition and my answer to every question in

,
a language in which I am fluent, and I understood everything.

2. At my request, the preparer named in **Part 7.**,
,
prepared this petition for me based only upon information I provided or authorized.

Petitioner's Contact Information

3. Petitioner's Daytime Telephone Number

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

5. Petitioner's Email Address (if any)

Petitioner's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I further authorize release of information contained in this petition, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I provided or authorized all of the information contained in, and submitted with, my petition;
- 2) I reviewed and understood all of the information in, and submitted with, my petition; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my petition and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my petition, and that all of this information is complete, true, and correct.

Petitioner's Signature

6.a. Petitioner's Signature
➡

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

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

NOTE: A parent or legal guardian may sign for a person who is less than 14 years of age. A legal guardian may sign for a mentally incompetent person.

Part 6. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

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

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

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

Part 6. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Mailing Address

3.a. Street Number and Name

3.b. Apt. Ste. Flr.

3.c. City or Town

3.d. State 3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

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

6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:
I am fluent in English and ,
which is the same language specified in **Part 5., 1.b.**, and I have read to this petitioner in the identified language every question and instruction on this petition and his or her answer to every question. The petitioner informed me that he or she understands every instruction, question, and answer on the petition, including the **Petitioner's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature (sign in ink)

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

Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner

Provide the following information about the preparer.

Preparer's Full Name

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

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

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

Preparer's Mailing Address

3.a. Street Number and Name

3.b. Apt. Ste. Flr.

3.c. City or Town

3.d. State 3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

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

6. Preparer's Email Address (if any)

Preparer's Statement

- 7.a. I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent.
- 7.b. I am an attorney or accredited representative and my representation of the petitioner in this case
 extends does not extend beyond the preparation of this petition.

NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this petition, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this petition.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this petition at the request of the petitioner. The petitioner then reviewed this completed petition and informed me that he or she understands all of the information contained in, and submitted with, his or her petition, including the **Petitioner's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this petition based only on information that the petitioner provided to me or authorized me to obtain or use.

Preparer's Signature

- 8.a. Preparer's Signature (sign in ink)

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

Part 8. Additional Information

If you need extra space to provide any additional information within this petition, 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 petition or attach a separate sheet of paper. Include your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number (if any) ▶ A-

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3.a. Page Number **3.b.** Part Number **3.c.** Item Number

3.d.

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

4.d.

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

5.d.

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

6.d.

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

7.d.

**APPLICATION FOR T NONIMMIGRANT STATUS
FORM I-914**



Application for T Nonimmigrant Status

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

USCIS
Form I-914
OMB No. 1615-0099
Expires 12/31/2023

START HERE - Type or print in ink.

Part 1. Purpose for Filing This Application

Select **all applicable** boxes.

1. **A.** I am filing for T-1 nonimmigrant status and have not previously filed for such status.
- B.** I am filing for T-1 nonimmigrant status and have previously filed for such status. (Provide receipt number below.)
- (1) Receipt Number EAC

Part 2. General Information About You (Person filing this application as a victim)

1. Your Full Legal Name
- Family Name (Last Name) Given Name (First Name) Middle Name (if any)
-

2. Other Names Used
- Provide any other names you have used since birth, including aliases, maiden names, and nicknames. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information.**
- Family Name (Last Name) Given Name (First Name) Middle Name (if any)
-

3. Physical Address *(USPS ZIP Code Lookup)*
- Street Number and Name Apt. Ste. Flr. Number
-
- City or Town State ZIP Code
-

4. Safe Mailing Address
- If you do not want U.S. Citizenship and Immigration Services (USCIS) to send notices about this application to your home address, you may provide an alternate safe mailing address.
- In Care Of Name
-
- Street Number and Name Apt. Ste. Flr. Number
-
- City or Town State ZIP Code
-

For USCIS Use Only

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	

Validity Dates

From: _____

To: _____

Remarks

Conditional Approval

Stamp # _____ Date _____

Action Block

To be fully completed by an attorney or accredited representative, if any.

Select this box if Form G-28 is attached.

Attorney State License Bar Number

Attorney or Accredited Representative USCIS Online Account Number

Part 2. General Information About You (Person filing this application as a victim) (continued)

5. Alien Registration Number (A-Number) (if any) ▶ A- <input type="text"/>	6. USCIS Online Account Number (if any) ▶ <input type="text"/>
7. U.S. Social Security Number (SSN) (if any) ▶ <input type="text"/>	8. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
9. Marital Status <input type="checkbox"/> Single/Never Married <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	10. Date of Birth (mm/dd/yyyy) <input type="text"/>
11. Place of Birth City or Town <input type="text"/> Country <input type="text"/>	State or Province <input type="text"/>
12. Country of Citizenship or Nationality <input type="text"/>	13. Passport or Travel Document Number (if any) <input type="text"/>
14. Country That Issued Your Passport or Travel Document (if any) <input type="text"/>	15. Issue Date for Passport or Travel Document (if any) (mm/dd/yyyy) <input type="text"/>
16. Expiration Date for Passport or Travel Document (if any) (mm/dd/yyyy) <input type="text"/>	
17. Place of Your Last Entry Into the United States City or Town <input type="text"/>	State <input type="text"/>
18. Date of Your Last Entry Into the United States, On or About (mm/dd/yyyy) <input type="text"/>	19. Form I-94 Arrival-Departure Record Number (if any) ▶ <input type="text"/>
20. Your Current Nonimmigrant Status <input type="text"/>	

Part 3. Additional Information About Your Application

Answers to the following questions about your claim require explanation and supporting documentation. 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. **You must** attach a personal narrative statement addressing the eligibility requirements for T nonimmigrant status as listed in the regulations, including a description of the trafficking you experienced. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

- 1.** I am or have been a victim of a severe form of trafficking in persons. Yes No
(Attach evidence to support your claim.)
- 2. A.** I have cooperated with reasonable requests for assistance from law enforcement. Yes No
- B.** Due to my age or the trauma I have suffered, I am exempt from the requirement to cooperate with reasonable requests for assistance from law enforcement. Yes No

Part 3. Additional Information About Your Application (continued)

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, or have been allowed entry into the United States to participate in investigative or judicial processes associated with an act or perpetrator of trafficking. (If you selected "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 you selected "Yes," explain in detail and attach evidence and documents supporting this claim.) Yes No
5. I have reported the trafficking crime of which I am claiming to be a victim. (If you selected "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 you selected "No," explain the circumstances.) Yes No

Law Enforcement Agency and Office

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Daytime Telephone Number

Case Number

Circumstances

6. I am under 18 years of age. (If you selected "Yes," skip to **Item Number 8.**) Yes No
7. I have complied with reasonable requests from Federal, state, local, or tribal law enforcement authorities for assistance in the investigation or prosecution of acts of trafficking, or am unable to cooperate with such requests due to physical or psychological trauma. (If you selected "No," explain the circumstances.) Yes No
8. This is the first time I have entered the United States. (If you selected "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.) If you need extra space, use the space provided in **Part 9. Additional Information.** Yes No

(1) Date of Entry (mm/dd/yyyy)

(2) Place of Entry

City or Town

State

(3) 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 am requesting an Employment Authorization Document (EAD). Yes No
11. I am now applying for one or more eligible family members. (If you selected "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 4. Processing Information

Answer the following questions about yourself. Responses are intended to cover any activity you have committed under your legal name or any aliases. For purposes of this application, you must answer “Yes” to the following questions, even if your records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. (If your answer is "Yes" to any one of these questions, explain in the space provided in **Part 9. Additional Information**. Additionally, explain if any of the acts or circumstances below are related to you having been a victim of a severe form of trafficking. Answering "Yes" does not necessarily mean that you will be denied T nonimmigrant status or are not entitled to adjust your status or register for permanent residence.)

1. Have you EVER:

- A. Committed a crime or offense for which you have not been arrested? Yes No
- B. Been arrested, cited, or detained by any law enforcement officer (including Department of Homeland Security (DHS), former Immigration and Naturalization Service (INS), and military officers) for any reason? Yes No
- C. Been charged with committing any crime or offense? Yes No
- D. Been convicted of a crime or offense (even if violation was subsequently expunged or pardoned)? Yes No
- E. Been placed in an alternative sentencing or a rehabilitative program (for example: diversion, deferred prosecution, withheld adjudication, deferred adjudication)? Yes No
- F. Received a suspended sentence, been placed on probation, or been paroled? Yes No
- G. Been in jail or prison? Yes No
- H. Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action? Yes No
- I. Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? Yes No

If you answered “Yes” to any of the above questions, complete the following table. If you need extra space, use the space provided in **Part 9. Additional Information**.

Why were you arrested, cited, detained, or charged?	Date of arrest, citation, detention, charge (mm/dd/yyyy)	Where were you arrested, cited, detained, or charged? (City or Town, State, Country)	Outcome or disposition (for example, no charges filed, charges dismissed, jail, probation, etc.)

2. Have you:

- A. Engaged in prostitution or procurement of prostitution or do you intend to engage in prostitution or procurement of prostitution? Yes No
- B. **EVER** engaged in any unlawful commercialized vice, including, but not limited to illegal gambling? Yes No
- C. **EVER** knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States illegally? Yes No
- D. **EVER** illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or colluded in the illicit trafficking of any controlled substance? Yes No

Part 4. Processing Information (continued)

3. Have you **EVER** committed, planned or prepared, participated in, threatened to, attempted to, or conspired to commit, gathered information for, or solicited funds for any of the following:
- A. Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? Yes No
 - B. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? Yes No
 - C. Assassination? Yes No
 - D. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? Yes No
 - E. The use of any biological agent; chemical agent; or nuclear weapon or device; explosive; or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No
4. Have you **EVER** been a member of, solicited money or members for, provided support for, attended military training (as defined in section 2339D(c)(1) of title 18, United States Code) by or on behalf of, or been associated with an organization that is:
- A. Designated as a terrorist organization under the Immigration and Nationality Act section 219? Yes No
 - B. Any other group of two or more individuals, whether organized or not, which has engaged in or has a subgroup which has engaged in:
 - (1) Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? Yes No
 - (2) Seizing or detaining, and threatening to kill, injure, or continue to detain another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? Yes No
 - (3) Assassination? Yes No
 - (4) The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? Yes No
 - (5) Soliciting money or members or otherwise providing material support to a terrorist organization? Yes No
 - (6) The use of any biological agent; chemical agent; or nuclear weapon or device; explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No
5. Do you intend to engage in the United States in:
- A. Espionage? Yes No
 - B. Any unlawful activity, or any activity the purpose of which is in opposition, to control, or overthrow of the government of the United States? Yes No
 - C. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information? Yes No
6. Have you ever been or do you continue to be a member of the Communist or other totalitarian party, except when membership was involuntary? Yes No
7. Have you, during the period of 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 ordered, incited, assisted, or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group, or political opinion? Yes No

Part 4. Processing Information (continued)

8. Have you **EVER** been present or nearby when any person was:
- A. Intentionally killed, tortured, beaten, or injured? Yes No
 - B. Displaced or moved from his or her residence by force, compulsion, or duress? Yes No
 - C. In any way compelled or forced to engage in any kind of sexual contact or relations? Yes No
9. A. Are removal, exclusion, rescission, or deportation proceedings pending against you? Yes No
- B. Have removal, exclusion, rescission, or deportation proceedings **EVER** been initiated against you? Yes No
 - C. Have you **EVER** been removed, excluded, or deported from the United States? Yes No
 - D. Have you **EVER** been ordered to be removed, excluded, or deported from the United States? Yes No
 - E. Have you **EVER** been denied a visa or denied admission to the United States? (If a visa was denied, use the space provided in **Part 9. Additional Information**.) Yes No
 - F. Have you **EVER** been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time? Yes No
10. Have you **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:
- A. Acts involving torture or genocide? Yes No
 - B. Killing any person? Yes No
 - C. Intentionally and severely injuring any person? Yes No
 - D. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened? Yes No
 - E. Limiting or denying any person's ability to exercise religious beliefs? Yes No
11. Have you **EVER**:
- A. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization? Yes No
 - B. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No
12. Have you **EVER** been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? Yes No
13. Have you **EVER** assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person? Yes No
14. Have you **EVER** received any type of military, paramilitary, or weapons training? Yes No
15. Are you under a final order or civil penalty for violating section 274C (producing and/or using false documentation to unlawfully satisfy a requirement of the Immigration and Nationality Act)? Yes No
16. Have you **EVER**, by fraud or willful misrepresentation of a material fact, sought to procure, or procured, a visa or other documentation, for entry into the United States or any immigration benefit? Yes No
17. Have you **EVER** left the United States to avoid being drafted into the U.S. Armed Forces? Yes No
18. Have you **EVER** detained, retained, or withheld the custody of a child, having a lawful claim to U.S. citizenship, outside the United States from a U.S. citizen granted custody? Yes No
19. Do you plan to practice polygamy in the United States? Yes No
20. Have you entered the United States as a stowaway? Yes No

Part 4. Processing Information (continued)

21. **A.** Do you have a communicable disease of public health significance? Yes No
- B.** Do you have or have you had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or welfare of yourself or others? Yes No
- C.** Are you now or have you been a drug abuser or drug addict? Yes No

Part 5. Information About Your Family Members

Provide the following information about your spouse and all of your children, if applicable. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

1. Your Spouse's Legal Name

Family Name (Last Name) Given Name (First Name) Middle Name (if any)

2. Date of Birth (mm/dd/yyyy)

3. Country of Birth

4. Current Location

City or Town of Residence Country of Residence

5. Information About Your Children

A. Child 1

Family Name (Last Name) Given Name (First Name) Middle Name (if any)

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

Current Location

City or Town State Country

B. Child 2

Family Name (Last Name) Given Name (First Name) Middle Name (if any)

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

Current Location

City or Town State Country

Part 5. Information About Your Family Members (continued)

C. Child 3

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth (mm/dd/yyyy)	Country of Birth	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Location		
City or Town	State	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>

Complete Form I-914, Supplement A, Application for Family Member of T-1 Recipient, for each family member listed above for whom you are now applying for derivative T nonimmigrant status, and attach it to this application.

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

NOTE: Read the **Penalties** section of the Form I-914 Instructions before completing this section.

Applicant's Statement

NOTE: Select the box for either **Item A.** or **B.** in **Item Number 1.** If applicable, select the box for **Item Number 2.**

1. Applicant's Statement Regarding the Interpreter

- A.** I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- B.** The interpreter named in **Part 7.** read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I understood everything.

2. Applicant's Statement Regarding the Preparer

- At my request, the preparer named in **Part 8.**, , prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number	4. Applicant's Safe Daytime Telephone Number
<input type="text"/>	<input type="text"/>
5. Applicant's Email Address (if any)	
<input type="text"/>	

Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I authorize the release of any information from my record that USCIS needs to determine eligibility for the benefit I am seeking to investigate my claim, and to investigate fraudulent claims. I further authorize USCIS to release information to law enforcement agencies and prosecutors investigating crimes of trafficking or related crimes. I further authorize USCIS to release information to Federal, State, and local public and private agencies providing benefits, to be used solely in making determinations of eligibility for benefits pursuant to 8 USC 1641(c).

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

Applicant's Signature

6. 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 (if any)

Provide the following information about the interpreter.

Interpreter's Full Name

1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)
2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

3. Street Number and Name Apt. Ste. Flr. Number
City or Town State ZIP Code
Province Postal Code Country

Part 7. Interpreter's Contact Information, Certification, and Signature (if any) (continued)

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

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

6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in **Part 6., Item B.** in **Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. 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

Provide the following information about the preparer.

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 Mailing Address

3. Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

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

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

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

6. Preparer's Email Address (if any)

Preparer's Statement

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

B. I am an attorney or accredited representative and my representation of the applicant in this case
 extends does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. 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 at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers.

1. Family Name (Last Name) Given Name (First Name) Middle Name

2. A-Number ► A-

3. A. Page Number B. Part Number C. Item Number

D.

4. A. Page Number B. Part Number C. Item Number

D.

5. A. Page Number B. Part Number C. Item Number

D.

6. A. Page Number B. Part Number C. Item Number

D.
