

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

**START HERE - Type or print in black ink. See the instructions for information about eligibility and how to complete and file this application. There is no filing fee for this application.**

**NOTE:** ☐ Check this box if you also want to apply for withholding of removal under the Convention Against Torture.

Make sure and check this box if your client is a survivor of torture or fears torture.

## Part A.I. Information About You

1. Alien Registration Number(s) (A-Number) (if any)		2. U.S. Social Security Number (if any)		3. USCIS Online Account Number (if any)	
4. Complete Last Name		5. First Name		6. Middle Name	
7. What other names have you used (include maiden name and aliases)?		8. Residence in the U.S. (where you physically reside)			
Street Number and Name		Apt. Number			
City		State		Zip Code	
				Telephone Number ( )	
(NOTE: You must be residing in the United States to submit this form.)					
9. Mailing Address in the U.S. (if different than the address in Item Number 8)					
In Care Of (if applicable):		Telephone Number ( )			
Street Number and Name					
City		State			
10. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		11. Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
12. Date of Birth (mm/dd/yyyy)		13. City and Country of Birth			
14. Present Nationality (Citizenship)		15. Nationality at Birth		16. Race, Ethnic, or Tribal Group	
				17. Religion	
18. Check the box, a through c, that applies: a. <input type="checkbox"/> I have never been in Immigration Court proceedings. b. <input type="checkbox"/> I am now in Immigration Court proceedings. c. <input type="checkbox"/> I am not now in Immigration Court proceedings, but I have been in the past.					
19. Complete 19 a through c.					
a. When did you last leave your country? (mm/dd/yyyy) b. What is your current I-94 Number, if any?					
c. List each entry into the U.S. beginning with your most recent entry. List date (mm/dd/yyyy), place, and your status for each entry. (Attach additional sheets as needed.)					
Date		Place		Date Status Expires	
Date		Place		Status	
Date		Place		Status	
20. What country issued your last passport or travel document?		21. Passport Number		22. Expiration Date (mm/dd/yyyy)	
		Travel Document Number			
23. What is your native language (include dialect, if applicable)?		24. Are you fluent in English?		25. What other languages do you speak fluently?	
Client's first and best language.		<input type="checkbox"/> Yes <input type="checkbox"/> No		Only mark if actually fluent.	
For EOIR use only.		For USCIS use only.		Decision:	
		Action:		Approval Date:	
		Interview Date:		Denial Date:	
		Asylum Officer ID No.:		Referral Date:	

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

### Your spouse

☐ I am not married. **S**

If your client is married (even if it's traditional and you're not sure it's legal) LIST the spouse. Failure to list a spouse may preclude them from ever coming to the U.S. If he or she is not married, make sure and check the box to say "no." And note, it only asks married - if they are divorced, they are not married. If they are separated but not divorced, they are still legally married. Engaged is also not married.

1. Alien Registration Number (A-Number) (if any)	2. Passport/ID Card (if any)		
5. Complete Last Name	6. First Name	7. Middle Name	8. Other names used (include maiden name and aliases)
9. Date of Marriage (mm/dd/yyyy)	10. Place of Marriage	11. City and Country of Birth	
12. Nationality (Citizenship)	13. Race, Ethnic, or Tribal Group		14. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
15. Is this person in the U.S. <input type="checkbox"/> Yes (Complete Blocks 16 to 24.) <input type="checkbox"/> No (Specify location):			
16. Place of last entry into the U.S.	17. Date of last entry into the U.S. (mm/dd/yyyy)	18. I-94 Number (if any)	19. Status when last admitted (Visa type, if any)
20. What is your spouse's current status?	21. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy)	22. Is your spouse in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	23. If previously in the U.S., date of previous arrival (mm/dd/yyyy)
24. If in the U.S., is your spouse to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No If spouse has his/her own permanent legal status (green card, refugee, asylee, citizen) then he/she likely would not be included - although you may have another option for your client to get legal status. If spouse lacks legal status and is in U.S. you will likely want to include him/her. And should follow the instructions for included family members.			

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

☐ I do not have any children. (Skip to Part A.III., Information about your background.)  
☐ I have children. Total number of children: \_\_\_\_\_

Include ALL children, living or dead, whether the client knows where they are or not, and whether they are biological, step or adopted. Failure to list them here can preclude them from coming in the future.

(NOTE: Use Form I-589 Supplement A or attach additional sheets of paper and documentation if you have more than four children.)

1. Alien Registration Number (if any)	2. Passport/ID Card Number (if any)	3. Marital Status (Married, Single, Divorced, Widowed)	4. U.S. Social Security Number (if any)
5. Complete Last Name	6. First Name	7. Middle Name	8. Date of Birth (mm/dd/yyyy)
9. City and Country of Birth	10. Nationality (Citizenship)	11. Race, Ethnic, or Tribal Group	12. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S. ? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location):			
14. Place of last entry into the U.S.	15. Date of last entry into the U.S. (mm/dd/yyyy)	16. I-94 Number (If any)	17. Status when last admitted (Visa type, if any)
18. What is your child's current status?	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy)	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No As with spouse, if child is in U.S. and needs asylum too, check "yes" and follow the directions.			

**Part A.II. Information About Your Spouse and Children (Continued)**

1. Alien Registration Number (A-Number) (if any)	2. Passport/ID Card Number (if any)	3. Marital Status (Married, Single, Divorced, Widowed)	4. U.S. Social Security Number (if any)
5. Complete Last Name	6. First Name	7. Middle Name	8. Date of Birth (mm/dd/yyyy)
9. City and Country of Birth	10. Nationality (Citizenship)	11. Race	12. Gender
13. Is this child in the U.S.? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location):		17. Status when last admitted (Visa type, if any)	
14. Place of last entry into the U.S.	15. Date of last entry into the U.S. (mm/dd/yyyy)	16. I-94 Number (If any)	17. Status when last admitted (Visa type, if any)
18. What is your child's current status?	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy)	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No			
1. Alien Registration Number (A-Number) (if any)	2. Passport/ID Card Number (if any)	3. Marital Status (Married, Single, Divorced, Widowed)	4. U.S. Social Security Number (if any)
5. Complete Last Name	6. First Name	7. Middle Name	8. Date of Birth (mm/dd/yyyy)
9. City and Country of Birth	10. Nationality (Citizenship)	11. Race, Ethnic, or Tribal Group	12. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S.? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location):		17. Status when last admitted (Visa type, if any)	
14. Place of last entry into the U.S.	15. Date of last entry into the U.S. (mm/dd/yyyy)	16. I-94 Number (If any)	17. Status when last admitted (Visa type, if any)
18. What is your child's current status?	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy)	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No			
1. Alien Registration Number (A-Number) (if any)	2. Passport/ID Card Number (if any)	3. Marital Status (Married, Single, Divorced, Widowed)	4. U.S. Social Security Number (if any)
5. Complete Last Name	6. First Name	7. Middle Name	8. Date of Birth (mm/dd/yyyy)
9. City and Country of Birth	10. Nationality (Citizenship)	11. Race, Ethnic, or Tribal Group	12. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S.? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location):		17. Status when last admitted (Visa type, if any)	
14. Place of last entry into the U.S.	15. Date of last entry into the U.S. (mm/dd/yyyy)	16. I-94 Number (If any)	17. Status when last admitted (Visa type, if any)
18. What is your child's current status?	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy)	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No		There is a supplemental page, page 11, which has additional spaces to list more children. Make as many copies of that form as you need.	

### Part A.III. Information About Your Background

1. List your last address where you lived before coming to the United States. **If this is not the country where you fear persecution, also list the last address in the country where you fear persecution.** (List Address, City/Town, Department, Province, or State and Country.)  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street (Provide if available)	City/Town	Department, Province, or State	Country	Dates	
				From (Mo/Yr)	To (Mo/Yr)

2. Provide the following information about your residences during the **past 5 years**. List your present address first.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street	City/Town	Department, Province, or State	Country	Dates	
				From (Mo/Yr)	To (Mo/Yr)

Once you've completed your client's statement or affidavit, review it with this biographic data and ensure that it matches - if your client's story places him/her in hiding in Addis Ababa for six months the residence history should be consistent with that.

3. Provide the following information about your education, beginning with the most recent school that you attended.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name of School	Type of School	Location (Address)	Attended	
			From (Mo/Yr)	To (Mo/Yr)

Likewise, if part of your client's claim is based on his/her activities as a student, or member of a student group, corroborate that with the education information and match up the dates.

4. Provide the following information about your **employment during the past 5 years**. List your present employment first.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name and Address of Employer	Your Occupation	Dates	
		From (Mo/Yr)	To (Mo/Yr)

Include employment without permission.

5. Provide the following information about your parents and **siblings (brothers and sisters)**. Check the box if the person is deceased.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Full Name	City/Town and Country of Birth	Current Location
Mother		<input type="checkbox"/> Deceased
Father		<input type="checkbox"/> Deceased
Sibling		<input type="checkbox"/> Deceased
Sibling		<input type="checkbox"/> Deceased
Sibling		<input type="checkbox"/> Deceased
Sibling		<input type="checkbox"/> Deceased

Include half brothers and sisters who may only share one parent.

## Part B. Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part B.)

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

Refer to Instructions, Part 1: Filing Instructions, Section II, "Basis of Eligibility," Parts A - D, Section V, Completing the Form," Part B, and Section VII, "Additional Evidence That You Should Submit," for more information on completing this section of the form.

1. Why are you applying for asylum or withholding of removal under section 241(b)(3) of the INA, or for withholding of removal under the Convention Against Torture? Check the appropriate box(es) below and then provide detailed answers to questions A and B below.

I am seeking asylum or withholding of removal based on:

- |                                      |  |  |
|--------------------------------------|--|--|
| <input type="checkbox"/> Race        | <div>Check as many boxes as apply; your client may have a claim on multiple grounds.</div> | <input type="checkbox"/> Political opinion                       |
| <input type="checkbox"/> Religion    |  | <input type="checkbox"/> Membership in a particular social group |
| <input type="checkbox"/> Nationality |  | <input type="checkbox"/> Torture Convention                      |

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

- ☐ No ☐ Yes

If "Yes," explain in detail:

1. What happened;
2. When the harm or mistreatment or threats occurred;
3. Who caused the harm or mistreatment or threats; and
4. Why you believe the harm or mistreatment or threats occurred.

Make sure the answer in the blank is responsive to all four points.

I was arrested three times by the Ethiopian authorities and detained and tortured because of my involvement with a student group supporting the Coalition for Unity and Democracy (CUD). The first arrest was in May, 2005 when Ethiopian police took me from class, detained me at the local police station and interrogated and tortured me for three days. The second time was in October, 2005 after a rally, four Ethiopian military members came to my house and arrested me in the middle of the night. They took me to a prison where I was held for two months and repeatedly beaten. My final arrest was in October, 2009 and lasted one month. My family was also questioned and my brother was arrested and tortured when he went to the police to inquire about me in October, 2009. I believe that I was arrested and tortured because of my involvement with the CUD, because on each occasion of my arrest the officers would make statements and question me about the CUD.

Please see my attached statement for more details.

Always provide an answer to the question in the blank, but also refer to the client's statement or affidavit for more detail.

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

- ☐ No ☐ Yes

If "Yes," explain in detail:

1. What harm or mistreatment you fear;
2. Who you believe would harm or mistreat you; and
3. Why you believe you would or could be harmed or mistreated.

I believe I would be arrested by the Ethiopian police or military and detained and tortured if I return. I know they are aware of my involvement with the CUD, and I know from talking with my family that they have continued to come to my house and ask about me and my whereabouts. My brother was arrested and questioned in March, 2010 after I left because the authorities were seeking me. I have continued to associate with a group in the U.S. that supports the CUD, and the Ethiopian government is very suspicious of opposition political party members who go overseas. I believe they will put me in jail again and subject me to much of the same treatment as before, but likely worse since I fled. Please see my attached statement for more details. Please see my attached statement for more details.

This question is really getting at future harm, so including relevant information about what has happened since the client left the country is helpful.

## Part B. Information About Your Application (Continued)

2. Have you or your family members ever been accused, charged, arrested, detained, interrogated, convicted and sentenced, or imprisoned in any country **other than the United States** (including for an immigration law violation)?

☐ No ☐ Yes

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

If part of your client's claim is based on his/her arrest or detention by the government in his/her country, that information should be listed in this section.

- 3.A. Have you or your family members **ever belonged to** or **been associated with** any organizations or groups in your home country, such as, but not limited to, a political party, student group, labor union, religious organization, military or paramilitary group, civil patrol, guerrilla organization, ethnic group, human rights group, or the press or media?

☐ No ☐ Yes

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

Carefully question your client about the nature and activities of any group he/she was involved with. Due to a broad construction of "terrorist group" under immigration law many groups which engage in armed resistance or "rebel" activities may be considered terrorist groups whether your client participated in that part of the group or not. Careful questioning and research is important to avoid a finding of material support to terrorism.

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

☐ No ☐ Yes

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

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

☐ No ☐ Yes

If "Yes," explain why you are afraid and describe the nature of torture you fear, by whom, and why it would be inflicted.

If you are seeking torture convention protection, or if your client has experienced torture, you should answer yes here.

## Part C. Additional Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part C.)

1. Have you, your spouse, your child(ren), your parents or your siblings ever applied to the U.S. Government for refugee status, asylum, or withholding of removal?

☐ No

☐ Yes

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

If a family member applied for status, it is very likely the government will pull that individual's file and review the claim for consistency with your client's where relevant. You may want to get a copy of the family member's application to compare the stories.

- 2.A. After leaving the country from which you are claiming asylum, did you or your spouse or child(ren) who are now in the United States travel through or reside in any other country before entering the United States?

☐ No

☐ Yes

Even if your client only had a stopover to change planes in a different country, list it.

- 2.B. Have you, your spouse, your child(ren), or other family members, such as your parents or siblings, ever applied for or received any lawful status in any country other than the one from which you are now claiming asylum?

☐ No

☐ Yes

If "Yes" to either or both questions (2A and/or 2B), provide for each person the following: the name of each country and the length of stay, the person's status while there, the reasons for leaving, whether or not the person is entitled to return for lawful residence purposes, and whether the person applied for refugee status or for asylum while there, and if not, why he or she did not do so.

2A. I traveled from Ethiopia to Kenya, then I flew to Amsterdam where I changed planes to the U.S.

3. Have you, your spouse or your child(ren) ever ordered, incited, assisted or otherwise participated in causing harm or suffering to any person because of his or her race, religion, nationality, membership in a particular social group or belief in a particular political opinion?

☐ No

☐ Yes

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

This question pertains to the persecutor bar; if your client served in the military in their country, with a rebel group, or was in any way involved with a group that "fought" you want to carefully question them about those actions.



## Part C. Additional Information About Your Application (Continued)

4. After you left the country where you were harmed or fear harm, did you return to that country?

☐ No

☐ Yes

If "Yes," describe in detail the circumstances of your visit(s) (for example, the date(s) of the trip(s), the purpose(s) of the trip(s), and the length of time you remained in that country for the visit(s).)

5. Are you filing this application **more than 1 year after your last** arrival in the United States?

☐ No

☐ Yes

If "Yes," explain why you did not file within the first year after you arrived. You must be prepared to explain at your interview or hearing why you did not file your asylum application within the first year after you arrived. For guidance in answering this question, see Instructions, Part 1: Filing Instructions, Section V. "Completing the Form," Part C.

I came to the U.S. as an F-1 student in January, 2008. I have **maintained my student status** continuously since that time. It was only after the violence following the elections in **May of this year** that I realized my hope of returning to Ethiopia after I graduated was not realistic.

Changed circumstances may be another valid exception.

Maintaining valid legal status is one exception.

If your client is past the one year deadline, you will need to provide an explanation and fit them into one of the exemptions. You should also provide a detailed legal argument on this point in a short brief or cover letter. This information may also be included in your client's affidavit.

6. Have you or any member of your family included in the application **ever committed any crime** and/or been arrested, charged, convicted, or sentenced for any crimes **in the United States** (including for an immigration law violation)?

☐ No

☐ Yes

If "Yes," for each instance, specify in your response: what occurred and the circumstances, dates, length of sentence received, location, the duration of the detention or imprisonment, reason(s) for the detention or conviction, any formal charges that were lodged against you or your relatives included in your application, and the reason(s) for release. **Attach documents referring to these incidents, if they are available, or an explanation of why documents are not available.**

Many criminal convictions can make someone ineligible for asylum (but still eligible for Withholding of Removal or Torture Convention relief).

You will definitely want to review all conviction or arrest documents before filing the asylum application; it may change whether you advise a client to file for asylum if he/she has a criminal conviction.



## Part D. Your Signature

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

You must review this warning with your client in a language they understand - the Officer or Judge will ask if you have given them these advisals.

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

Print your complete name.

Write your name in your native alphabet.

Did your spouse, parent, or child(ren) assist you in completing this application? ☐ No ☐ Yes (If "Yes," list the name and relationship.)

(Name)

(Relationship)

(Name)

(Relationship)

Did someone other than your spouse, parent, or child(ren) prepare this application?

☐ No

☐ Yes (If "Yes," complete Part E.)

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

☐ No

☐ Yes

Signature of Applicant (The person in Part A.I.)

➔ [ \_\_\_\_\_ ]

Sign your name so it all appears within the brackets

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

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

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

Signature of Preparer

Print Complete Name of Preparer

Daytime Telephone Number  
(     )

Address of Preparer: Street Number and Name

Apt. Number

City

State

Zip Code

To be completed by an attorney or accredited representative (if any).

☐ Select this box if Form G-28 is attached.

Attorney State Bar Number (if applicable)

\_\_\_\_\_

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

\_\_\_\_\_

## Part F. To Be Completed at Asylum Interview, if Applicable

**NOTE:** You will be asked to complete this part when you appear for examination before an asylum officer of the Department of Homeland Security, U.S. Citizenship and Immigration Services (USCIS).

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are ☐ all true or ☐ not all true to the best of my knowledge and that correction(s) numbered \_\_\_\_\_ to \_\_\_\_\_ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

This page is only to be signed by the applicant in front of either the Asylum Officer or Immigration Judge. Do not submit the application with this page signed.

Signed and sworn to before me by the above named applicant on:

\_\_\_\_\_  
Signature of Applicant

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

\_\_\_\_\_  
Write Your Name in Your Native Alphabet

\_\_\_\_\_  
Signature of Asylum Officer

## Part G. To Be Completed at Removal Hearing, if Applicable

**NOTE:** You will be asked to complete this Part when you appear before an immigration judge of the U.S. Department of Justice, Executive Office for Immigration Review (EOIR), for a hearing.

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are ☐ all true or ☐ not all true to the best of my knowledge and that correction(s) numbered \_\_\_\_\_ to \_\_\_\_\_ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

Signed and sworn to before me by the above named applicant on:

\_\_\_\_\_  
Signature of Applicant

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

\_\_\_\_\_  
Write Your Name in Your Native Alphabet

\_\_\_\_\_  
Signature of Immigration Judge

A-Number <i>(If available)</i>	Date
Applicant's Name	Applicant's Signature

Have the applicant sign this page even if left blank.

**List All of Your Children, Regardless of Age or Marital Status**

*(NOTE: Use this form and attach additional pages and documentation as needed, if you have more than four children)*

<b>1.</b> Alien Registration Number (A-Number) <i>(if any)</i>	<b>2.</b> Passport/ID Card Number <i>(if any)</i>	<b>3.</b> Marital Status <i>(Married, Single, Divorced, Widowed)</i>	<b>4.</b> U.S. Social Security Number <i>(if any)</i>
<b>5.</b> Complete Last Name	<b>6.</b> First Name	<b>7.</b> Middle Name	<b>8.</b> Date of Birth <i>(mm/dd/yyyy)</i>
<b>9.</b> City and Country of Birth	<b>10.</b> Nationality <i>(Citizenship)</i>	<b>11.</b> Race, Ethnic, or Tribal Group	<b>12.</b> Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>13.</b> Is this child in the U.S. ? <input type="checkbox"/> Yes <i>(Complete Blocks 14 to 21.)</i> <input type="checkbox"/> No <i>(Specify location):</i> _____			
<b>14.</b> Place of last entry into the U.S.	<b>15.</b> Date of last entry into the U.S. <i>(mm/dd/yyyy)</i>	<b>16.</b> I-94 Number <i>(If any)</i>	<b>17.</b> Status when last admitted <i>(Visa type, if any)</i>
<b>18.</b> What is your child's current status?	<b>19.</b> What is the expiration date of his/her authorized stay, if any? <i>(mm/dd/yyyy)</i>	<b>20.</b> Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>21.</b> If in the U.S., is this child to be included in this application? <i>(Check the appropriate box.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			

  

<b>1.</b> Alien Registration Number (A-Number) <i>(if any)</i>	<b>2.</b> Passport/ID Card Number <i>(if any)</i>	<b>3.</b> Marital Status <i>(Married, Single, Divorced, Widowed)</i>	<b>4.</b> U.S. Social Security Number <i>(if any)</i>
<b>5.</b> Complete Last Name	<b>6.</b> First Name	<b>7.</b> Middle Name	<b>8.</b> Date of Birth <i>(mm/dd/yyyy)</i>
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<b>13.</b> Is this child in the U.S. ? <input type="checkbox"/> Yes <i>(Complete Blocks 14 to 21.)</i> <input type="checkbox"/> No <i>(Specify location):</i> _____			
<b>14.</b> Place of last entry into the U.S.	<b>15.</b> Date of last entry into the U.S. <i>(mm/dd/yyyy)</i>	<b>16.</b> I-94 Number <i>(If any)</i>	<b>17.</b> Status when last admitted <i>(Visa type, if any)</i>
<b>18.</b> What is your child's current status?	<b>19.</b> What is the expiration date of his/her authorized stay, if any? <i>(mm/dd/yyyy)</i>	<b>20.</b> Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>21.</b> If in the U.S., is this child to be included in this application? <i>(Check the appropriate box.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Additional Information About Your Claim to Asylum**

A-Number <i>(if available)</i>	Date
Applicant's Name	Applicant's Signature

Have the applicant sign this page even if left blank.

**NOTE:** Use this as a continuation page for any additional information requested. Copy and complete as needed.

**Part** \_\_\_\_\_

**Question** \_\_\_\_\_