

CONFIDENTIAL INFORMATION: No information contained on this form shall be provided to the Immigration and Naturalization Service without the express written consent of the complainant.

Paperwork Reduction Act Notice:

Under the Paperwork Reduction Act, an agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this questionnaire is 15 minutes per questionnaire. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington, DC 20536; OMB No. 1115-XXXX. **Do not mail your completed questionnaire to this address.**

Case Tracking Number:

Date:

Agency Name:

Agency Point of Contact:

Phone No.:

Biographical Information.

Name (Family Name in CAPS)

(First)

(Middle)

Date of Birth (MM/DD/YYYY)

Address (Number and Street)

Town or City

ZIP Code

Home Telephone Number: ()

Work Telephone Number: ()

Other Contact Information/Best Time to Contact:

Program Eligibility Questionnaire (Check One).

- | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Have you ever been convicted of a crime, either in the United States or any other country? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Have you ever been deported or excluded from the United States and later reentered the United States without the permission of the United States government? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Have you ever spied or committed sabotage against the United States? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Have you ever illegally exported goods, technology, or sensitive information from the United States? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Have you ever engaged in any activity with the purpose of opposing or overthrowing the Government of the United States by force, violence, or other unlawful means? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Are you now, or have you ever been, a member of a foreign terrorist organization or engaged in terrorist activity in the United States or any other country? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Have you ever participated in the persecution of any person because of his or her race, religion, nationality, membership in a particular social group, or political opinion? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Signatures.

Signature of Complainant

Date

Signature of Screening Agency Official

Date

Form I-908 (Rev. 07/20/01)

U.S. Department of Justice
Immigration and Naturalization Service

Practitioner Fraud Pilot Program Initial Interview Form

Investigations/Fraud/IPFTF
360 E. 2nd St., Fifth Floor
Los Angeles, CA 90012
Fax: (213) 633-6441

(leave blank
for INS use)

Today's
Date:

07/19/2001

Agency Name:

Agency Case
Tracking Number:

103

Agency Contact Person:

Agency
Contact Phone

Name of Immigration service/practitioner
contacted:

Address of Immigration
service/practitioner:

Zip Code:

General description of complaint:

Are you currently in deportation/removal proceedings?

Yes
No

Did the Immigration practitioner claim to be an attorney?

Yes
No
Unknown

Did the Immigration practitioner claim to be working with an attorney?

Yes
No

Did the Immigration practitioner claim to be an employee of the U.S. Immigration &
Naturalization Service (INS)?

Yes
No

Did the immigration practitioner claim to know an employee of the INS who could provide
special assistance regarding your case?

Yes
No

Did the immigration practitioner mention what type of form s/he would file with the INS?

Yes
No

If yes, what type?

Click on the arrow at right and choose one
answer:

U.S. Department of Justice
Immigration and Naturalization Service

Practitioner Fraud Pilot Program Initial Interview Form

Did the immigration practitioner provide you with a written contract stating what services you would receive?

Yes
No

Did the immigration practitioner require that you sign any forms?

Yes
No

Did the immigration practitioner take any of your personal information for the purpose of filing a form with the INS?

Yes
No

What is the total amount that you gave to the immigration practitioner for his/her assistance?

\$0.00

Did you receive a receipt for the funds you provided the immigration practitioner?

Yes
No

Have you received any correspondence from the INS regarding your application?

Yes
No

If yes, what did you receive

Have you requested a refund of your money from the immigration practitioner?

Yes
No

If yes, when?

Did you receive a refund from the immigration practitioner?

Yes
No

If yes, how much?

\$0.00

Did the immigration practitioner threaten retaliation if you complained to the authorities?

Yes
No

When did you last speak to (or receive a letter from) this immigration practitioner?

Do you know of other people who have had problems with this immigration service?

Yes
No

Would you be willing to testify in court about your experiences with this immigration service?

Yes
No

The following questions are being asked solely to assist the INS in measuring the success of Pilot Program community outreach efforts:

What is your country of birth/ethnicity?