

Supplement B, Delaration of Law Enforcement Officer for Victim of Trafficking in Persons

USCIS Form I-914

OMB No. 1615-0099 Expires 07/31/2016

Department of Homeland Security

U.S. Citizenship and Immigration Services

START HERE - Type or print in blank ink. This form should be completed by	For USCIS Use Only	
Federal, State, or local law enforcement authorities for victims under the Victims of Trafficking and Violence Protection Act, Public Law 106-386, as amended.	Returned	Receipt
PART A. Victim Information	Date	
Family Name (Last Name) Given Name (First Name) Middle Name (if any)	Date	
	Resubmitted	
Other Names Used (include maiden name/nickname)	Date	
Date of Birth (mm/dd/yyyy) Gender	Date	
Male Female	Reloc Sent	
A # (if known) Social Security # (if known)	Date	
	Date	
Part B. Agency Information	Reloc Rec'd	
Name of Certifying Agency	Date	
Name of Certifying Official Title and Division/Office of Certifying Official	Date	
	F	Remarks
Agency Address - Street Number and Name Suite #		
City State/Province Zip/Postal Code		
Daytime Phone # (area code and/or extension) Fax # (with area code)		
Agency Type Federal Local		
Case Status On-going Completed Local		
Certifying Agency Category Judge Law Enforcement Prosecutor Other		
Case Number FBI # or SID # (if applicable)	1	
Part C. Statement of Claim		
1. The applicant is or has been a victim of a severe form of trafficking in persons. Specific that apply. Base your analysis on the practices to which the victim was subjected rather counts on which convictions were obtained, or whether any prosecution resulted in concontrol this analysis are not the elements of criminal offenses, but are those set forth at	than on the specifi victions. Note that t	c violations charged, the
Sex trafficking in which a commercial sex act was induced by force, fraud, or coerc recruitment, harboring, transportation, provision, or obtaining of a person for the pu		
Sex trafficking and the victim is under the age of 18.		

Pa	rt C. Statement of Claim (Continued)						
	☐ The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force,						
	fraud, or coercion for subjection to involuntary servitude, peonage, debt bondage, or slavery.						
	Not applicable.						
	Other, specify on attached additional sheets.						
2.	Please describe the victimization upon which the applicant's claim is based and identify the relationship between that victimization and the crime under investigation/prosecution. Attach the results of any name or database inquiry performed in the investigation of the case, as well as any relevant reports and findings. Include relevant dates, etc. Attach additional sheets, if necessary.						
3.	Has the applicant expressed any fear of retaliation or revenge if removed from the United States? If yes, explain. Attach additional sheets, if necessary.						
4.	Provide the date(s) on which the acts of trafficking occurred.						
	Date (mm/dd/yyyy) Date (mm/dd/yyyy) Date (mm/dd/yyyy)						
5.	List the statutory citation(s) for the acts of trafficking being investigated or prosecuted, or that were investigated or prosecuted.						
6.	Provide the date on which the investigation or prosecution was initiated.						
	Date (mm/dd/yyyy)						
7.	Provide the date on which the investigation or prosecution was completed (<i>if any</i>).						
	Date (mm/dd/yyyy)						

Part D. Cooper	ation of Victim	(Attach additional sheets, if	necessary)				
Has failed Has not bee	to comply with requ	uests to assist in the investigation st in the investigation/prosecution.	on/prosecution of	the crime of trafficking. (Explain below.) f the crime of trafficking. (Explain below.) of trafficking.			
Part E. Family	Members Implic	ated In Trafficking					
Yes No Are any of the applicant's family members believed to have been involved in his or her trafficking to the United States? If "Yes," list the relative(s) and describe the involvement. Attach additional sheets if necessary.							
	Full Name	Relationship	Involv	rement			
Part F. Attestat	ion						
evere form of traf ny knowledge, and Citizenship and Im	ficking in persons a d that I have made, amigration Services	as defined by the VTVPA. I cer and will make, no promises reg	rtify that the above garding the above I further certify t	re noted individual is or has been a victim of a ve information is true and correct to the best of e victim's ability to obtain a visa from U.S. that if the victim unreasonably refuses to assist in I will notify USCIS.			
Signature of Law Enforcement Officer (identified in Part B)				Date (mm/dd/yyyy)			
Signature of Supervisor of Certifying Officer				Date (mm/dd/yyyy)			
Printed Name of	Supervisor						