

AILA Citizenship Day Fee Waiver Training

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Justice Southern California**

August 16, 2023



Citizenshipworks

AILA Doc. No. 17080263 (Posted 8/18/23)

AILA Citizenship Day

- AILA's 18th annual Citizenship Day will take place on or around Saturday, September 16, 2023.
- Citizenship Day is a single-day nationwide event hosted by AILA chapters across the country and their local grassroots partners. Each year, Citizenship Day helps thousands of eligible legal permanent residents to prepare and apply for U.S. naturalization.
- Every year, AILA chapters across the country host free or low-cost naturalization drives on the same day to amplify our pro bono impact and our voices.
- AILA members have helped thousands of LPRs take the final step towards citizenship over the past 17 years, but there are still nearly 9 million people eligible to naturalize in the US today.





ASIAN AMERICANS
**ADVANCING
JUSTICE**
SOUTHERN CALIFORNIA

Applying for Citizenship: Form I-912 Fee Waiver & I-942 Reduced Fee

Presented by: Christine Chen, Citizenship Project Director

Asian Americans Advancing Justice Southern California (AJSOCAL)

HOW WE CAN HELP

We are available to answer questions and offer guidance on a number of legal issues. Our service is free of charge.

Anti-Asian Discrimination

Citizenship

Domestic Violence

Family Law

Health Care Access

Housing Rights

Immigration

We do not accept criminal, personal injury or traffic court matters.

TOLL FREE HELP LINES

ENGLISH:
888.349.9695

中文:
800.520.2356

한글:
800.867.3640

TAGALOG:
855.300.2552

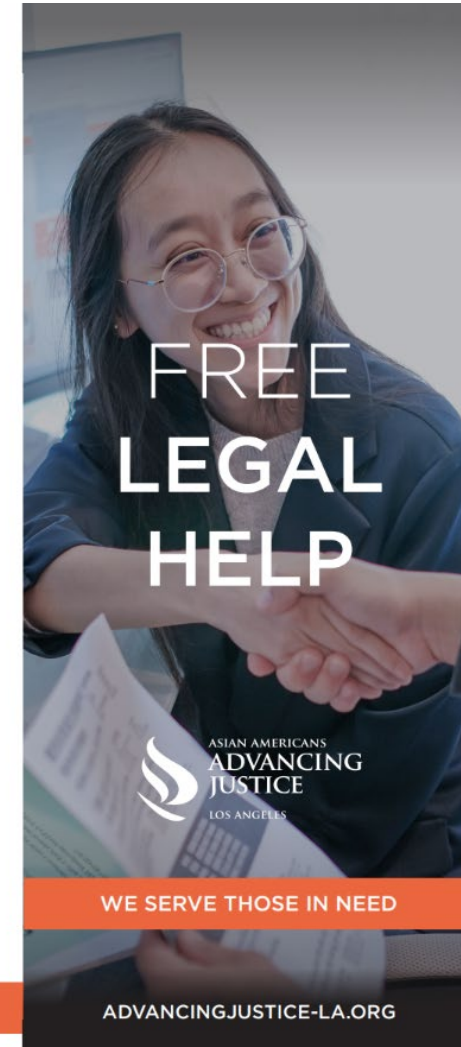
ภาษาไทย
800.914.9583

TIẾNG VIỆT:
714.477.2958



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www.ajsocal.org

Learning Objectives

By the end of this training, you will:

1. Understand the importance of the I-912 Fee Waiver and the I-942 Request for Reduced Fee for low-income immigrants;
2. Become familiar with the forms and who qualifies; and
3. Be able to identify red flags to watch for when providing pro bono assistance to applicants.

Agenda

- Importance of Fee Waiver
- Fee Waiver Eligibility
- How to Complete the Form
- Who Qualifies
- Special Issues & Red Flags

Importance of Fee Waivers

- Fee = Major Barrier
- Fees have increased almost 700% since 1997
 - 1997 = \$95
 - 1999 = \$225
 - 2008 = \$595 + biometrics
 - 2016 = \$640 + biometrics
- 1/3 of LPRs are at or below 150% of FPG
- Fee waivers are an important tool to accessing US citizenship

Cost of Applying for Naturalization

Naturalization Application fee: \$640 + \$85
biometrics = **\$725** (under 75 years of age)

- Applicants 75 years of age or older do not need to pay a biometric fee. They only need to pay the \$640 filing fee.
 - No filing fee or biometric services fee is required for military applicants filing under section 328 or 329 of the INA.
-
- I-912 Fee Waiver waives the *entire* fee (\$725)!
 - I-942 Reduced Fee reduces the application fee to \$320 + \$85 biometrics = \$405

I-912 Fee Waiver Eligibility

3 Ways to Qualify:

1. Means tested benefits;
2. Income at or below 150% of the Federal Poverty Guidelines; and/or
3. Financial Hardship

1. Means Tested Benefits

Means-tested benefit programs	NOT means-tested benefit programs
<p>Examples include:</p> <ul style="list-style-type: none">• Medicaid• Supplemental Nutrition Assistance Program (SNAP, formerly called Food Stamps)• Temporary Assistance to Needy Families (TANF)• Supplemental Security Income (SSI)	<p>Examples include:</p> <ul style="list-style-type: none">• Medicare• Unemployment benefits• Social Security benefits• Social Security Disability Insurance (SSDI)• Retirement, Survivors and Disability Insurance (RSDI)• Student financial aid/loans/grants

Evidence of Means Tested Benefit

Need current proof benefit is being received:

- Notice of Action or Letter from the Benefit Agency
- Current: dated within 6 months
- Need date benefit awarded and expired (or needs to be renewed by)
- Spouse's benefits are OK, if same household
- Child(ren)'s benefits cannot be applied toward parent applicant
- Must be in English (or with certified English translation)

Sample Benefit Verification Letter

- Name of the Agency administering the benefit (i.e. County of Los Angeles Department of Public Social Services)
- Name of the recipient and/or family members who receive it
- Date of benefit letter (recently dated)
- Need to ask applicant when benefit was first received and when it will expire/renew

COUNTY OF LOS ANGELES
SAMPLE ONLY DEPARTMENT OF PUBLIC SOCIAL SERVICES

VERIFICATION OF BENEFITS

DISTRICT NAME AND ADDRESS: _____

DATE: _____
CASE NAME: _____
CASE / FILE NUMBER: _____
WORKER NAME: _____
WORKER PHONE: _____

MAIL BACK TO ADDRESS: _____

CUSTOMER ID: _____

A. VERIFICATION

This will verify that the above participant is receiving:

CalWORKs (cash) in the amount of \$ _____, per month for _____ people.

General Relief (cash) in the amount of \$ _____, per month for _____ people.

Refugee Cash Assistance (cash) in the amount of \$ _____, per month for _____ people.

CalFresh benefits in the amount of \$ _____, per month for _____ people.

Medi-Cal - In Receipt of Medical Benefits _____ per month for _____ people.

B. ASSISTANCE UNIT MEMBERS


1. _____ Name _____ Self _____	7. _____ Name _____ Relation to# 1
2. _____ Name _____ Relation to# 1	8. _____ Name _____ Relation to# 1
3. _____ Name _____ Relation to# 1	9. _____ Name _____ Relation to# 1
4. _____ Name _____ Relation to# 1	10. _____ Name _____ Relation to# 1
5. _____ Name _____ Relation to# 1	11. _____ Name _____ Relation to# 1
6. _____ Name _____ Relation to# 1	12. _____ Name _____ Relation to# 1

C. AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize DPSS to release the above information to : _____

_____ Applicant/Participant Signature

_____ Witness Signature, if Applicant/Participant Not Able To Sign



Retention: Three Years

File/Image: EDMS Documentation Folder
76V244G PA 1918 (5/13)

DEPARTMENT OF PUBLIC SOCIAL SERVICES
Victims Special District
2015 W. Sixth St.
Los Angeles, California 90007

2. Income

Household Size	150% of HHS Poverty Guidelines*	200% of HHS Poverty Guidelines*
1	\$20,385	\$27,180
2	\$27,465	\$36,620
3	\$34,545	\$46,060
4	\$41,625	\$55,500
5	\$48,705	\$64,940
6	\$55,785	\$74,380
7	\$62,865	\$83,820
8	\$69,945	\$93,260
	Add \$7,080 for each additional person	Add \$9,440 for each additional person

Source: www.uscis.gov/i-912p, www.uscis.gov/i-942p

What is Income?

- What is income?
 - Household income – adjusted gross income (AGI) line 37 on IRS form 1040
 - Household size – spouses and/or dependents reflected on tax return
- Evidence
 - Copy of 1040 Federal Tax Return for most current tax year (ex: 2022)
 - If no tax return, or income has changed substantially from previous year, the include W2 and paystubs (3 months)
 - Official letter with salary/wages from Employer
 - Recently unemployed – EDD is NOT a means tested benefit but can be used as proof of income if below FPG

3. Financial Hardship

- Special situations:
 - Ex: medical expenses, eviction, unemployment, homelessness, or your income is above 150% FPG but believe circumstances warrant a fee waiver
 - Usually not in a workshop setting – referred to legal service provider for more individualized assistance
 - Need strong documentation including assets that can easily be converted into cash
 - Show any liabilities/debts

Filling Out Form I-912

- www.uscis.gov/i-912
- Prior editions accepted or a written request
- Current edition date: 9/03/2021
- Must be MAILED with N-400 (no online option)

Part 1. Basis for Your Request (Each basis is further explained in the **Specific Instructions** section of the Form I-912 Instructions)

Select at least one basis or more for which you may qualify and provide supporting documentation for any basis you select. You only need to qualify and provide documentation for one basis for U.S. Citizenship and Immigration Services (USCIS) to grant your fee waiver. If you choose, you may select more than one basis; you must provide supporting documentation for each basis you want considered.

1. I am, my spouse is, or the head of household living in my household is currently receiving a means-tested benefit. (Complete Parts 2. - 4. and Parts 7. - 10.)
2. My household income is at or below 150 percent of the Federal Poverty Guidelines. (Complete Parts 2. - 3., Part 5., and 7. - 10.)
3. I have a financial hardship. (Complete Parts 2. -3. and Parts 6. - 10.)

Filling Out Form I-912

- “Requestor” is the applicant for naturalization

Part 2. Information About You (Requestor)

Provide information about yourself if you are the person requesting a fee waiver for a petition or application you are filing. If you are the parent or legal guardian filing on behalf of a child or person with a physical disability or developmental or mental impairment, provide information about the child or person for whom you are filing this form.

1. Full Name

Family Name (Last Name)

Given Name (First Name)

Middle Name

2. Other Names Used (if any)

List all other names you have used, including nicknames, aliases, and maiden name.

Family Name (Last Name)

Given Name (First Name)

Middle Name

3. Alien Registration Number (A-Number) (if any)

▶ A-

4. USCIS Online Account Number (if any)

▶

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

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

▶

Filling Out Form I-912

- TIP: to avoid confusion, have each applicant submit their own form, even if they are in the same household.
- Form being filed: N-400

Part 2. Information About You (Requestor) (continued)

7. Marital Status

- Single, Never Married
 Married
 Divorced
 Widowed
 Marriage Annulled
 Separated
 Other (Explain)

Part 3. Applications and Petitions for Which You Are Requesting a Fee Waiver

1. In the table below, add the form numbers of the applications and petitions for which you are requesting a fee waiver.

Applications or Petitions for You and Your Family Members				
Full Name	A-Number (if any)	Date of Birth	Relationship to You	Forms Being Filed
	A-		Self	
	A-			
	A-			
	A-			
Total Number of Forms (including self)				

Filling Out Form I-912

- Only fill out the section applicable to the fee waiver basis you are applying for
- Must include documentation showing current receipt of the benefit
- Applicant can qualify if using spouse's valid means tested benefit

Part 4. Means-Tested Benefits

If you selected **Item Number 1.** in **Part 1.**, complete this section.

1. If you, your spouse, or the head of household (including parent if the child is under 21 years of age) living with you is receiving any means-tested benefits, list the information in the table below and attach supporting documentation. If you are the parent or legal guardian filing on behalf of a child or person with a physical disability or developmental or mental impairment, provide information about the child or person for whom you are filing this form if he or she is receiving a means-tested benefit.

Means-Tested Benefit Recipients					
Full Name of Person Receiving the Benefit	Relationship to You	Name of Agency Awarding Benefit	Type of Benefit	Date Benefit was Awarded	Date Benefit Expires (or must be renewed)

Filling Out Form I-912

- Fill out Part 5. ONLY if you are applying based on income
- [Federal Poverty Guidelines: www.uscis.gov/i-912p](http://www.uscis.gov/i-912p)

Part 5. Income at or Below 150 Percent of the Federal Poverty Guidelines

If you selected **Item Number 2.** in **Part 1.**, complete this section.

Your Employment Status

1. Employment Status

- Employed (full-time, part-time, seasonal, self-employed) Unemployed or Not Employed Retired Other (Explain)

Part 5. Income at or Below 150 Percent of the Federal Poverty Guidelines (continued)

2. If you are currently unemployed, are you currently receiving unemployment benefits? Yes No

A. Date you became unemployed
(mm/dd/yyyy)

Information About Your Spouse

3. If you are married or separated, does your spouse live in your household? Yes No

- A. If you answered "No" to **Item Number 3.**, does your spouse provide any financial support to your household? Yes No

Filling Out Form I-912

- TIP: if person lives with you but does not contribute financial support to household, then do not include their income (i.e. adult children)
- TIP: typically include members who are reflected in the tax return to determine household size

Your Household Size

4. Are you the person providing the primary financial support for your household? Yes No

If you answered "Yes" to **Item Number 4.**, type or print your name on the line marked "self" in the table below. If you answered "No" to **Item Number 4.**, type or print your name on the line marked "self" in the table below and add the head of household's name on the line below yours.

Household Size					
Full Name	Date of Birth	Relationship to You	Married	Full-Time Student	Is any income earned by this person counted towards the household income?
		Self	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Total Household Size (including self)					

Filling Out Form I-912

- TIP: If you are separated/still married but do not live with spouse, do not include spouse's income. However, include any financial support in Item 7.

Your Annual Household Income

Provide information about your income and the income of all family members counted as part of your household. You must list all amounts in U.S. dollars.

5. Your Annual Income \$

6. Annual Income of All Family Members

Provide the annual income of all family members counted as part of your household as listed in **Item Number 4**. (Do not include the amount provided in **Item Number 5**.)

\$

7. Total Additional Income or Financial Support \$

Provide the total annual amount you receive in additional income or financial support from a source outside of your household. (Do not include the amount provided in **Item Numbers 5**, or **6**.) You must add all of the additional income and financial support amounts and put the total amount in the space provided. Type or print "0" in the total box if there are none. Select the type of additional income or financial support that you receive and provide documentation.

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Parental Support | <input type="checkbox"/> Educational Stipends | <input type="checkbox"/> Unemployment Benefits | <input type="checkbox"/> Financial Support From Adult Children, Dependents, Other People Living in the Household |
| <input type="checkbox"/> Spousal Support (Alimony) | <input type="checkbox"/> Royalties | <input type="checkbox"/> Social Security Benefits | |
| <input type="checkbox"/> Child Support | <input type="checkbox"/> Pensions | <input type="checkbox"/> Veteran's Benefits | <input type="checkbox"/> Other (Explain) |

Filling Out Form I-912

- TIP: if you or members of household are recently unemployed or financial situation has changed since you filed your tax return, provide explanation here

Part 5. Income at or Below 150 Percent of the Federal Poverty Guidelines (continued)

8. Total Household Income (add the amounts from **Item Numbers 5., 6., and 7.**) \$
9. Has anything changed since the date you filed your Federal tax returns? (For example, your marital status, income, or number of dependents.) Yes No

If you answered "Yes" to **Item Number 9.**, provide an explanation below. Provide documentation if available. You may also use this space to provide any additional information about your circumstances that you would like USCIS to consider.

Filling Out Form I-912

- Only complete Part 6. if applying based on Financial Hardship
- Need a lot of supporting evidence
- Rare in workshop setting – refer applicants to legal services organization

Part 6. Financial Hardship

If you selected **Item Number 3.** in **Part 1.**, complete this section.

1. If you or any family members have a situation that has caused you to incur expenses, debts, or loss of income, describe the situation in the box below. Specify the amounts of the expenses, debts, and income losses in as much detail as possible. Examples may include medical expenses, job loss, eviction, and homelessness.

2. If you have cash or assets that you can quickly convert to cash, list those in the table below. For example, bank accounts, stocks, or bonds. (Do not include retirement accounts.)

Assets	
Type of Asset	Value (U.S. Dollars)
Total Value of Assets	

Filling Out Form I-912

- Part 7. Requestor's Statement, Contact Information, Certification, and Signature
- Applicant must sign here as "Requestor"
- Unsigned applications will be returned

Requestor's Signature

6. Requestor's Signature



Date of Signature (mm/dd/yyyy)

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

Filling Out Form I-912

- Part 8. Family Member's Statement, Contact Information, Certification, and Signature
- TIP: SKIP Part 8 if each applicant fills out their OWN I-912

Part 8. Family Member's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-912 Instructions before completing this part.

If the information provided by the requestor in **Part 7** is not applicable to a family member identified in **Part 3**, (for example, the family member used an interpreter or speaks a different language) that individual should complete **Part 8**. USCIS rejects any Form I-912 that is not signed by all individuals requesting a fee waiver.

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

1. Family Member's Statement Regarding the Interpreter for
 - A. I can read and understand English, and I have read and understand every question and instruction on this request and my answer to every question.
 - B. The interpreter named in **Part 9** read to me every question and instruction on this request and my answer to every question in , a language in which I am fluent, and I understood everything.
2. Family Member's Statement Regarding the Preparer for
 At my request, the preparer named in **Part 10**, , prepared this request for me based only upon information I provided or authorized.

Family Member's Contact Information

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

Filling Out Form I-912

- Part 9. Interpreter's Contact Information, Certification and Signature
- Interpreter and Preparer can be the same person

Part 9. Interpreter's Contact Information, Certification, and Signature

1. Did any person filing this request use an interpreter? Yes, (complete this section) No (skip to Part 10.)
2. Was the same interpreter used for all individuals requesting a fee waiver (as listed in Part 3.)? Yes No

NOTE for Family Members: If you used a different interpreter than the one used by the requestor, make additional copies of Part 9., provide the following information, indicate the family member for whom he or she interpreted, and include the pages with your completed Form I-912.

Provide the following information about the interpreter for

Interpreter's Full Name

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

Interpreter's Mailing Address

[\(USPS ZIP Code Lookup\)](#)

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

Interpreter's Contact Information

6. Interpreter's Daytime Telephone Number
7. Interpreter's Mobile Telephone Number (if any)
8. Interpreter's Email Address

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Filling Out Form I-912

- Part 10: Preparer's Information (if someone else completed this request)
- Volunteer or Legal Services Organization
- Use contact information of Legal Services Organization
- Don't forget to sign!

Part 10. Contact Information, Declaration, and Signature of the Person Preparing this Request, if Other Than the Requestor

1. Did any person prepare this request on your behalf? Yes, (complete this section) No, skip
2. Was the same preparer used for all individuals requesting a fee waiver (as listed in Part 3.)? Yes No

NOTE for Family Members: If you used a different preparer than the one used by the requestor, provide the following information, and include the pages with your completed Form I-912.

Provide the following information about the preparer for

Preparer's Full Name

3. Preparer's Family Name (Last Name)

Preparer's Given Name (First Name)

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

Fee Waiver Issues and Red Flags

- No Public Charge test for naturalization!
- Fraudulent use of benefits
 - Misrepresentation
 - Welfare fraud (conviction) can be deportable
- Receiving Public Benefits while traveling abroad
 - > 180 days may trigger public charge ground of inadmissibility
- Refer applicant to speak with immigration attorney or legal services provider for individualized legal advice

Form I-942: Request for Reduced Fee

- Effective 12/23/2016
- Income above 150% and up to 200% of Federal Poverty Guidelines
- \$320 application fee + \$85 biometric fee
- Submit I-942 and \$320 payment with N-400
- Must be submitted by MAIL with N-400
- Currently undergoing proposed form revisions (July 2023)
- www.uscis.gov/i-942

2023 HHS Poverty Guidelines for Fee Waiver & Reduced Fee Request

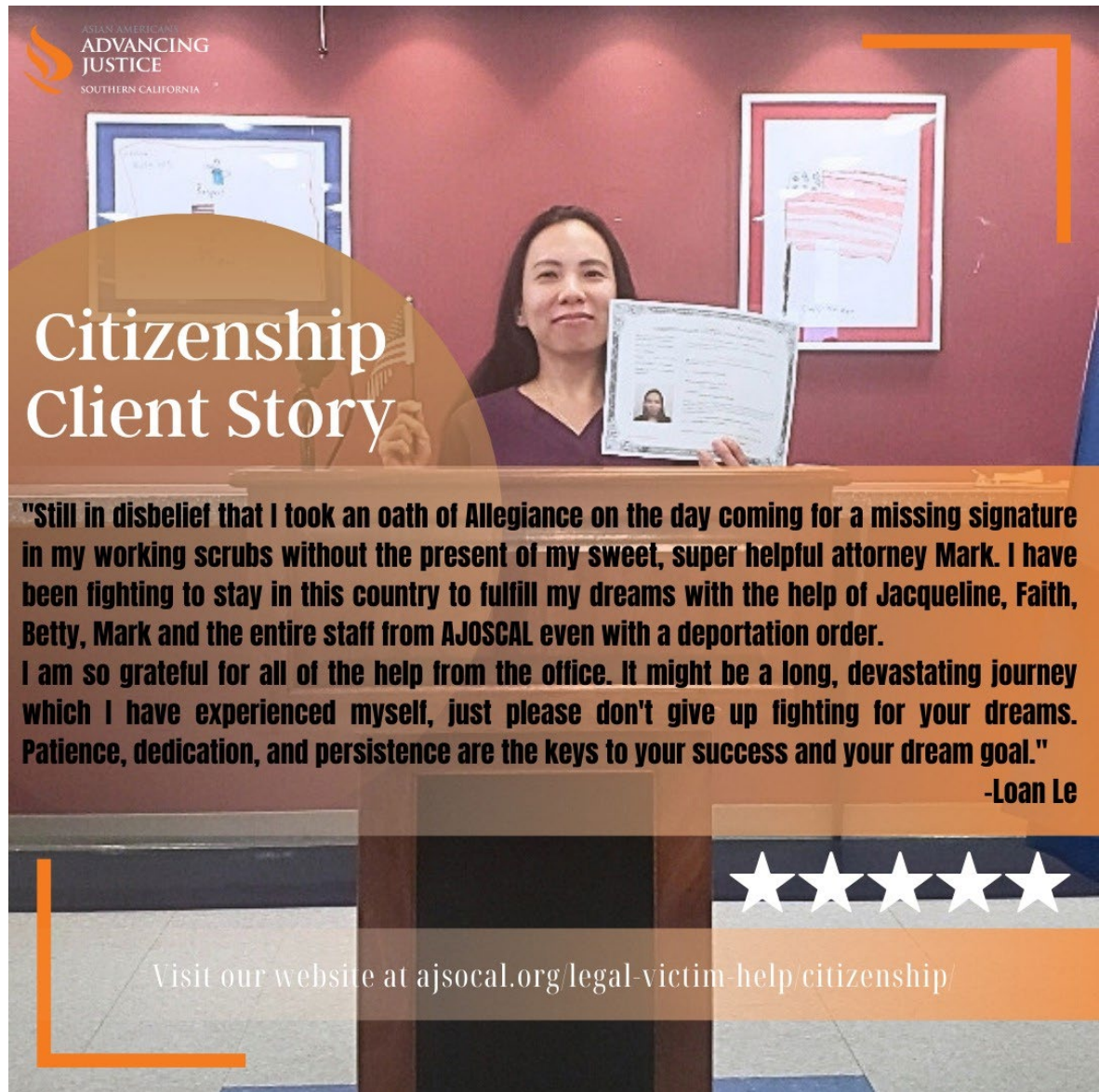
Household Size	150% of HHS Poverty Guidelines*	200% of HHS Poverty Guidelines*
1	\$20,385	\$27,180
2	\$27,465	\$36,620
3	\$34,545	\$46,060
4	\$41,625	\$55,500
5	\$48,705	\$64,940
6	\$55,785	\$74,380
7	\$62,865	\$83,820
8	\$69,945	\$93,260
	Add \$7,080 for each additional person	Add \$9,440 for each additional person

Source: www.uscis.gov/i-912p, www.uscis.gov/i-942p

I-942 Form Tips

- Identical to Part 5 of the I-912 (applying based on income), except the I-942 income eligibility is between 150-200 % of FPG
- Supporting evidence is same as what you would use to demonstrate income for the I-912
- Applying for I-912 or I-942 does not negatively impact one's naturalization application
- Can reapply for I-912 or I-942 if it gets rejected

Your Impact



Citizenship Client Story

"Still in disbelief that I took an oath of Allegiance on the day coming for a missing signature in my working scrubs without the present of my sweet, super helpful attorney Mark. I have been fighting to stay in this country to fulfill my dreams with the help of Jacqueline, Faith, Betty, Mark and the entire staff from AJOSCAL even with a deportation order. I am so grateful for all of the help from the office. It might be a long, devastating journey which I have experienced myself, just please don't give up fighting for your dreams. Patience, dedication, and persistence are the keys to your success and your dream goal."

-Loan Le

Visit our website at ajsocal.org/legal-victim-help/citizenship/