ADVICE TO APPLICANT

PLEASE READ CAREFULLY, FEES WILL NOT BE RETURNED.

- I. <u>Aliens Eligible for Cancellation of Removal</u>: You may be eligible to have your removal cancelled under section 240A(b) of the Immigration and Nationality Act (INA). To qualify for this benefit, you must establish in a hearing before an Immigration Judge that:
 - A. 1. Prior to the service of the Notice to Appear, you have maintained continuous physical presence in the United States for ten (10) years or more, and you have been a person of good moral character as defined in section 101(f) of the INA during such period;
 - 2. You have not been convicted of an offense covered under sections 212(a)(2), 237(a)(2), or 237(a)(3) of the INA; and
 - 3. Your removal would result in exceptional and extremely unusual hardship to your United States citizen or lawful permanent resident spouse, parent, or child, and you are deserving of a favorable exercise of discretion on your application.

OR

- B. 1. You have been battered or subjected to extreme cruelty in the United States by your United States citizen or lawful permanent resident spouse or parent, or you are the parent of a child of a United States citizen or lawful permanent resident and the child has been battered or subjected to extreme cruelty in the United States by such citizen or lawful permanent resident parent;
 - 2. Prior to the service of the Notice to Appear, you have maintained continuous physical presence in the United States for three (3) years or more and you have been a person of good moral character as defined in section 101(f) of the INA during such period;
 - 3. You are not inadmissible under sections 212(a)(2) or 212(a)(3) of the INA, you are not deportable under section 237(a)(1)(G) or sections 237(a)(2)-(4) of the INA, and you have not been convicted of an aggravated felony as defined under the INA;
 - 4. a. Your removal would result in extreme hardship to you or your child who is the child of a United States citizen or lawful permanent resident; or
 - b. You are a child whose removal would result in extreme hardship to you or your parent; and
 - 5. You are deserving of a favorable exercise of discretion on your application.

Note: If you have served on active duty in the Armed Forces of the United States for at least 24 months, you do not have to meet the requirements of continuous physical presence in the United States. You must, however, have been in the United States when you entered the Armed Forces. If you are no longer in the Armed Forces, you must have been separated under honorable conditions.

- **II.** Aliens NOT Eligible for Cancellation of Removal: You are not eligible for cancellation of removal under section 240A(b)(1) of the INA if you:
 - **A.** Entered the United States as a crewman after June 30, 1964;

- **B.** Were admitted to the United States as, or later became, a nonimmigrant exchange alien as defined in section 101(a)(15)(J) of the INA in order to receive graduate medical education or training, regardless of whether you are subject to or have fulfilled the 2-year foreign residence requirement of section 212(e) of the INA;
- C. Were admitted to the United States as, or later became, a nonimmigrant exchange alien as defined in section 101(a)(15)(J) of the INA, other than to receive graduate medical education or training, and are subject to the 2-year foreign residence requirement of section 212(e) of the INA, but have neither fulfilled nor obtained a waiver of that requirement;
- **D.** Are an alien who is either inadmissible under section 212(a)(3) of the INA or deportable under section 237(a)(4) of the INA;
- **E.** Are an alien who ordered, incited, assisted, or otherwise participated in the persecution of an individual because of the individual's race, religion, nationality, membership in a particular social group, or political opinion; or
- F. Are an alien who was previously granted relief under section 212(c) of the INA, or section 244(a) of the INA as such sections were in effect prior to the enactment of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, whose removal has previously been cancelled under section 240A of the INA.

III. How to Apply for Cancellation of Removal:

If you believe that you have met all the requirements for cancellation of removal, you must answer all the questions on the attached Form EOIR-42B fully and accurately. You must pay the filing and biometrics fees and comply with the Department of Homeland Security (DHS) instructions for providing biometric and biographic information to USCIS, [available at http://uscis.gov]. You must also serve a copy of your application on the Assistant Chief Counsel for the DHS, U.S. Immigration and Customs Enforcement (ICE) as required in the proof of service on page 8 of this application, and you must file your application with the appropriate Immigration Court. Please read the following instructions carefully before completing your application.

INSTRUCTIONS

1. PREPARATION OF APPLICATION.

To apply for cancellation of removal under section 240A(b) of the Immigration and Nationality Act (INA), you must fully and accurately answer all questions on the attached Form EOIR-42B. You must also comply with all of the instructions contained in this form. These instructions have the force of law. A separate application must be prepared and executed for each person applying for cancellation of removal. An application on behalf of an alien who is mentally incompetent or is a child under 14 years of age shall be executed by a parent or guardian.

Your responses must be typed or printed legibly in ink. Do not leave any questions unanswered or blank. If any questions do not apply to you, write "none" or "not applicable" in the appropriate space.

To the extent possible, answer all questions directly on the form. If there is insufficient room to respond fully to a question, please continue your response on an additional sheet of paper. Please indicate the number of the question being answered next to your response on the additional sheet, write your alien registration number, print your name, and sign, date, and securely attach each additional sheet to the Form EOIR-42B.

2. BURDEN OF PROOF.

The burden of proof is on you to prove that you meet all of the statutory requirements for cancellation of removal for certain nonpermanent resident aliens under section 240A(b) of the INA and that you are entitled to such relief as a matter of discretion. To meet this burden, your responses to the questions on the application should be as detailed and complete as possible. You should also attach to your application any documents that demonstrate your eligibility for cancellation of removal (see "SUPPORTING DOCUMENTS" below).

3. SUPPORTING DOCUMENTS.

You should submit documentary evidence to show that you have maintained continuous physical presence in the United States for the required period. Documents which may show evidence of your physical presence in the United States include, but are not limited to, bankbooks, leases, deeds, licenses, receipts, letters, birth records, church records, school records, employment records, and evidence of tax payments.

You should submit documents which help to show that you are, and have been, a person of good moral character during the entire period of continuous physical presence in the United States required for eligibility for cancellation of removal. You should submit police records from each jurisdiction in which you resided during such period. To show good moral character, it is recommended that you submit the affidavits of witnesses attesting to your good moral character, preferably citizens of the United States, and if you are employed, your employer. The affidavit from your employer should include information regarding the nature and duration of your employment and your earnings.

You should submit official certification to establish your relationship to those you claim would suffer hardship by your removal, and if such persons are citizens of the United States or lawful permanent residents, evidence of their citizenship or lawful permanent resident status. Documentary evidence of such relationships may include, but are not limited to, birth records, marriage certificates, proof of divorce or termination of marriage, and death certificates.

You should also submit with your application copies of any documents which the Department of Homeland Security (DHS), formerly the Immigration and Naturalization Service, issued to you. You should also submit all documents which reflect payment of taxes, your criminal history, including all conviction records, and payment of child support during your physical presence in the United States. The Immigration Judge may require you to submit additional records relating to your request for cancellation of removal.

The original of all supporting documents must be available for inspection at the hearing. If you wish to have the original documents returned to you, you should also present reproductions.

4. REQUIRED BIOMETRIC AND BIOGRAPHIC INFORMATION.

Each applicant 14 years of age or older must also comply with the requirement to supply biometric and biographic information. You will be given instructions on how to complete this requirement. You will be notified in writing of the location of the Application Support Center (ASC) or the designated Law Enforcement Agency where you must go to provide biometric and biographic information. You will also be given a date and time for the appointment. It is important to furnish all the required information. Failure to comply with this requirement may result in a delay in your application or in your application being deemed abandoned and dismissed by the Immigration Court.

5. TRANSLATIONS.

Any document in a foreign language must be accompanied by an English language translation and a certificate signed by the translator stating that he/she is competent to translate the document and that the translation is true and accurate to the best of the translator's abilities. Such certification must be printed legibly or typed.

6. PHOTOGRAPHS.

Unless you are incarcerated or detained in a facility which prevents your compliance with this instruction, you must submit two glossy, unretouched, color photographs of yourself taken within 30 days of the date of this application. These photos must have a white background and must not be mounted. The dimension of your facial image in the photograph should be about one (1) inch from the chin to the top of your hair and you should be shown in full frontal/passport-style view with your eyes open. Using a pencil or felt pen, you should lightly print your name and alien registration number on the back of each photograph.

7. FEES.

Before you file your Form EOIR 42B with the Immigration Court, you must pay the required \$100 filing fee and the biometrics fee to the DHS. Evidence of payment of these fees in the form of a copy of the DHS, U.S. Citizenship and Immigration Services (USCIS) ASC notice of fee receipt and biometrics appointment instructions must accompany your Form EOIR-42B. These fees will not be refunded, regardless of the action taken on your application. Therefore, it is important that you read the advice, instructions, and application carefully before responding. If you are unable to pay the filing fee, you may ask the Immigration Judge to permit you to file your Form EOIR-42B without fee (fee waiver).

DO NOT SEND CASH. All fees must be submitted in the exact amount. Remittance may be made by personal check, cashier's check, certified bank check, bank international money order, or foreign draft drawn on a financial institution in the United States and payable to the "Department of Homeland Security" in United States currency. If the applicant resides in the Virgin Islands, the check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." If the applicant resides in Guam, the check or money order must be made payable to the "Treasurer, Guam." Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$30.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. When the check is drawn on an account of a person other than the applicant, the name and alien registration number of the applicant must be entered on the face of the check. All checks must be drawn on a bank located in the United States.

8. SERVING & FILING YOUR APPLICATION.

- A. You must first comply with the DHS instructions for providing biometric and biographic information to USCIS, which involves sending a copy of the application to the appropriate USCIS Service Center. The DHS instructions also address payment of the application fees.
- B. You must then serve the following documents on the Assistant Chief Counsel for DHS, U.S. Immigration and Customs Enforcement (ICE):

- a copy of your Form EOIR-42B, Application for Cancellation of Removal, with all supporting documents and additional sheets;
- a copy of the USCIS ASC notice of fee receipt and biometrics appointment instructions;
- the original Biographical Information Form G-325A; and
- a photograph of you which meets the requirements of instruction #6 above.

You must file the following documents with the appropriate Immigration Court:

- the original Form EOIR-42B with all supporting documents and additional sheets;
- a copy of the USCIS ASC notice of fee receipt and biometrics appointment instructions;
- a copy of Biographical Information Form G-325A;
- a photograph of you which meets the requirements of instruction #6 above; and
- a completed certificate showing service of these documents (See Part 10 of the Application on page 8) on the ICE Assistant Chief Counsel, unless service is made on the record at the hearing.

Retain your USCIS ASC biometrics confirmation document or a copy of your Fingerprint Card, FD-258, if applicable, as proof that your biometrics were taken, and bring it to your future Immigration Court hearings.

9. PENALTIES.

You must answer all questions on Form EOIR-42B truthfully and submit only genuine documents in support of your application. You will be required to swear or affirm that the contents of your application and the supporting documents are true to the best of your knowledge. Your answer to the questions on this form and the supporting documents you present will be used to determine whether your removal should be cancelled and whether you should be permitted to adjust your status. Any answer you give and any supporting document you present may also be used as evidence in any proceeding to determine your right to be admitted or readmitted, re-enter, pass through, or reside in the United States. Your application may be denied if any of your answers or supporting documents are found to be false.

Presenting false answers or false documents may also subject you to criminal prosecution under 18 U.S.C. section 1546 and/or subject you to civil penalties under 8 U.S.C. section 1324c if you submit your application knowing that the application, or any supporting document, contains any false statement with respect to a material fact, or if you swear or affirm that the contents of your application and the supporting documents are true, knowing that the application or any supporting documents contain any false statement with respect to a material fact. If convicted, you could be fined up to \$250,000, imprisoned for up to ten (10) years, or both. 18 U.S.C. sections 1546(a), 3559(a)(4), 3571(b)(3). If it is determined you have violated the prohibition against document fraud and a final order is entered against you, you could be subject to a civil penalty up to \$2,000 for each document used or created for the first offense, and up to \$5,000 for any second, or subsequent offense. In addition, if you are the subject of a final order for violating 8 U.S.C. section 1324c, relating to civil penalties for document fraud, you will be removable from the United States.

10. PAPERWORK REDUCTION ACT NOTICE.

Under the Paperwork Reduction Act, 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 easily be understood, and which impose the least possible burden on you to provide us with information. Often, this process is difficult because some immigration laws are very complex. The reporting burden for this collection of information is computed as follows: (1) learning about the form, 50 minutes, (2) completing the form, 2 hours, and (3) assembling and filing the form, 3 hours, for an average of 5 hours, 50 minutes per application. If you have comments regarding the accuracy of this burden estimate, or any other aspect of this collection of information, including suggestions for reducing this burden, you may write to the U.S. Department of Justice, Executive Office for Immigration Review, Office of the General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041

U.S. Department of JusticeExecutive Office for Immigration Review

Application for Cancellation of Removal and Adjustment of Status for Certain Nonpermanent Residents

PLEASE READ ADVICE AND INSTRUCTIONS	Fee Stamp (Official Use Only)
BEFORE FILLING IN FORM	
DI EACE TYDE OD DDINT	

PLEASE TYPE (OR PRINT			
PA	RT 1 - INFORMATION	ABOUT YOUR	SELF	
1) My present true name is: (Last, First, Mi	ddle)	2) Alien Registratio	n (or "A") Number(s):	
3) My name given at birth was: (Last, First	t, Middle)	4) Birth Place: (City	and Country)	
5) Date of Birth: (Month, Day, Year)	6) Gender: ☐ Male ☐ Female	7) Height:	8) Hair Color:	9) Eye Color:
10) Current Nationality and Citizenship:	11) Social Security Number:	12) Home Phone N	umber: 13) Work Ph	one Number:
14) I currently reside at:		15) I have been	known by these add	itional name(s):
Apt. number and/or in care of				
Number and Street				
City or Town	State Zip Code			
16) I have resided in the following locati years.)	ons in the United States: (List PRE	SENT ADDRESS FI	RST, and work back in t	ime for at least 10
Street and Number - Apt.	or Room # - City or Town - State	-Zip Code	Resided From: (Month, Day, Year)	Resided To: (Month, Day, Year)
				PRESENT
PART	2 - INFORMATION ABO	OUT THIS APPI	LICATION	
17) I, the undersigned, hereby request the Act (INA). I believe that I am eligible				ration and Nationality
		(-3-7	
My removal would result i	n exceptional and extremely unusua UNITED STATES L.	al hardship to my: AWFUL PERMANENT	D 4	
	CITIZEN	RESIDENT	Remove these co	olumns
spouse, who is a				
father, who is a mother, who is a				
child/children, who i	s/are a			
With the exception of abo	sences described in question #23,	I have resided in the	United States since:	
(Month, Day, Year)			·	
I, or my child, have been ba	attered or subjected to extreme cruelty	by a United States citiz	en or lawful permanent re	sident spouse or parent.
With the exception of abse	ences described in question #23, I ha	ave resided in the Unit	ed States since:	
(Month, Day, Year)			·	

PARI 3 - INFURMAI	ION ABOUT YOUR	PRESENCE IN THE UNI	TED STATES	
18) I first arrived in the United States under the name of: (Last, First, Middle) 19) I first arrived in the United States on: (Month, Day, Year)				
20) Place or port of first arrival: (Place or Port, C	City, and State)			
			•	
21) I: was inspected and admitted.	awful Permanent Resident card	I which is valid until		
Category on Lawful P	Permanent Resident card		(Month, Day, Year)	
I entered using a	(Specify Type of Visa) visa		(Month, Day, Year)	
was not inspected and admitted.	•		Monn, Day, Tear)	
	uments. Explain: pection. Explain:			
Other. Explain:				
		15	·	
22) I applied on		and it was granted on	(Month, Day, Year)	
and valid until	, or 🖵 denied on	Odouth Day Voge		
23) Since the date of my first entry, I departe			on the following dates:	
(Please list all a	departures regardless of how b	riefly you were absent from the United	d States.)	
		ur original date of entry, please mark		
Port of Departure (Place or Port, City and State)	Departure Date (Month, Day, Year)	Purpose of Travel	Destination	
Port of Return (Place or Port, City and State)	Return Date (Month, Day, Year)	Manner of Return	Inspected and Admitted?	
			Yes No	
Port of Departure (Place or Port, City and State)	Departure Date (Month, Day, Year)	Purpose of Travel	Destination	
Port of Return (Place or Port, City and State)	Return Date (Month, Day, Year)	Manner of Return	Inspected and Admitted?	
			Yes No	
24) Have you ever departed the United States		rtation, exclusion, or removal?		
	b) pursuant to a grant of v	oluntary departure?	Yes Vo	
PART 4 - INFORMATION A	BOUT YOUR MAR	TAL STATUS AND SPOU	JSE (Continued on page 3)	
	he name of my spouse is: (Last,			
I am married:		y,y		
28) The marriage took place in: (City and Country	(v)	29) Date of marriage: (Month, Day, Year	r)	
20) May 200 200 200 200 200 200 200 200 200 20		21) Place and data of hinth of my an	over (C) and an Alaba Wall	
30) My spouse currently resides at:		31) Place and date of birth of my spe	ouse: (City & Country; Month, Day, Year)	
Apt, number and/or in care of				
Number and Street		32) My spouse is a citizen of: (Country	ry)	
City or Town	State/Country Zip Code			
33) If your spouse is other than a native born		the following:		
He/she arrived in the United States at: (Pi				
He/she arrived in the United States on: (A				
His/her alien registration number(s) is: A				
He/she was naturalized on: (Month, Day, Yea				
			v and State)	
34) My spouse \Box - is \Box - is not employed	ed. If employed, please give sa	alary and the name and address of the	place(s) of employment.	
	Full Name and Address	ss of Employer	Earnings Per Week	
			(Approximate)	
			\$ \$	
			- 0	

iage began and ended, the place where		1 1 :1 1 1	. 1		on which each mar
<u> </u>					
Name of prior spouse: (Last, First, Middle)	Date marriage began: Date marriage ended:	Place marriage ended: (City and Country)	Description terminated	or manner of how or ended:	marriage was
6) My present spouse \Box - has \Box - h hich each marriage began and ended, to					spouse, the dates of
Tame of prior spouse: (Last, First, Middle)	Date marriage began: Date marriage ended:	Place marriage ended: (City and Country)	Description terminated	or manner of how or ended:	marriage was
7) Have you been ordered by any court esult of a separation and/or divorce?	, or are otherwise under	any legal obligation, to	provide child s	apport and/or spousa Yes 🔲 N	
*					
PART 5 - INFORMAT	TON ABOUT YO	UR EMPLOYME	ENTAND	FINANCIAL S	STATUS
8) Since my arrival into the United States,		-			
ork back in time. Any periods of unemplo					ntries if necessary.)
Full Name and Address of	Employer		pe of Work Performed	Employed From: (Month, Day, Year)	Employed To: (Month, Day, Year)
		\$			PRESENT
		\$			
	,				
		\$			
0) 16 - 16 1 - 1 - 1 1 - 1 1	· (1) 1 (1	(4 . 1 . in		1 . 1 C	
9) If self-employed, describe the nature	of the business, the name	e of the business, its addi	ess, and net in	come derived therein	rom:
0) My assets (and if married, my spouse	e's assets) in the United S	States and other countries	, not including	clothing and househ	nold necessities, ar
elf		States and other countries Jointly Owner	_	-	nold necessities, ar
elf Cash, Stocks, and Bonds	\$	Jointly Owner Cash, Stocks,	d With Spouse and Bonds	: \$	
elf ash, Stocks, and Bonds eal Estate	\$	Jointly Owner Cash, Stocks,	d With Spouse and Bonds	·	
elf ash, Stocks, and Bonds eal Estate uto (dollar value minus amount owed).	\$ \$	Jointly Owner Cash, Stocks, a Real Estate Auto (dollar va	d With Spouse and Bonds	\$\$ bunt owed)\$	
eal Estate	\$\$\$	Jointly Owner Cash, Stocks, a Real Estate Auto (dollar va Other (describ	and Bonds	\$\$ bunt owed)\$\$	
eal Estate	\$ \$	Jointly Owner Cash, Stocks, a Real Estate Auto (dollar va Other (describ	and Bonds	\$\$ bunt owed)\$	
elf Cash, Stocks, and Bonds Leal Estate Luto (dollar value minus amount owed) Other (describe on line below)	\$\$ AL \$ public or private relief or including the type of reli	Jointly Owner Cash, Stocks, a Real Estate Auto (dollar va Other (describ r assistance (e.g., Welfare ef or assistance received,	and Bonds alue minus amore on line below Unemployme date for which	\$\$\$	d, TANF, AFDC,
cash, Stocks, and Bonds	\$\$ AL \$ public or private relief or including the type of reli	Jointly Owner Cash, Stocks, a Real Estate Auto (dollar va Other (describ r assistance (e.g., Welfare ef or assistance received,	and Bonds alue minus amore on line below Unemployme date for which	\$\$\$	d, TANF, AFDC,

PARI 0 -	INFORMATION ABOU	JT YOUR FAMILY (Continued on page	ge 5)
43) I have(Num	ber of) children. Please list informa	ation for each child below, include assets and e	earnings information for
children over the age of 16 who hav	e separate incomes:		
Name of Child: (Last, First, Middle)	Citizen of What Country:	Now Residing At: (City and Country)	Immigration Status
Child's Alien Registration Number:	Birth Date: (Month, Day, Year)	Birth Place: (City and Country)	of Child
	-	_ -	
<u>A#:</u>			
Estimated Total of Assets: \$	Estimated A	Average Weekly Earnings: \$	
	-		
<u>A#:</u>	<u> </u>		
Estimated Total of Assets: \$	Estimated A	Average Weekly Earnings: \$	
	_		
<u>A#:</u>			
Estimated Total of Assets: \$	Estimated A	Average Weekly Earnings: \$	
44) If your application is denied, wo	uld your spouse and all of your chi	ldren accompany you to your:	
) 11 your approanton 10 democs, we			
Country of Birth -		answered "No" to any of the	
Country of Birtin -	respons	ses, please explain:	
Country of Nationality -	Yes No		
	105 = 110		
Country of Last Residence -	Yes No		
		have - have not received public or private	
	y of person(s) receiving relief or as	member of your immediate family has received sisistance, dates for which relief or assistance w	
		sisters, aunts, uncles, and grandparents, living o	or deceased. As to residence,
show street address, city, and state, i	f in the United States; otherwise sh	ow only country:	
Name: (Last, First, Middle)	Citizen of What Country:	Relationship to Me: Birth	Immigration Status
Alien Registration Number:	Birth Date: (Month, Day, Year)	Place: (City and Country)	of Listed Relative
A.II		<u> </u>	
A#:	.cr ·		
Complete Address of Current Resid	ence, if Living:		
	_		
<u>A#:</u>			
Complete Address of Current Resid	lence, if Living:		
			_

PART 6 - INFORMATION A	ABOUT YOUR FAMILY (Continued)
	RENT OR PARENTS, QUESTIONS 47-50 MUST BE ANSWERED. nd place of arrival in the United States including full details as to the date,
48) My father 🔲 - is 🔲 - is not employed. If employed, please given	ve salary and the name and address of the place(s) of employment.
Full Name and Address of Em	(Approximate)
	\$
49) My mother 🔲 - is 🔲 - is not employed. If employed, please giv	we salary and the name and address of place(s) of employment.
Full Name and Address of Em	mployer Earnings Per Week (Approximate)
	\$
50) My parent's assets in the United States and other countries not inc Assets of father consist of the following: Cash, Stocks, and Bonds	Cluding clothing and household necessities are: Assets of mother consist of the following: Cash, Stocks, and Bonds
Other (describe on line below)\$	Other (describe on line below)\$
TOTAL §	TOTAL \$
PART 7 - MISCELLANEOUS	INFORMATION (Continued on page 6)
51) I \Box - have \Box - have not entered the United States as a crewman	
52) I 🗖 - have 🗖 - have not been admitted as, or after arrival in th	ne United States acquired the status of, an exchange alien.
53) I 🗖 - have 🗖 - have not submitted address reports as required	by section 265 of the Immigration and Nationality Act.
victed, fined, imprisoned, placed on probation, or forfeited collateral fordinance(including, but not limited to, traffic violations or drivin	for eign country) been arrested, summoned into court as a defendant, confor an act involving a felony, misdemeanor, or breach of any public law or ng incidents involving alcohol). (If answer is in the affirmative, please ion of the offense, date of conviction, any penalty imposed, any sentence cumentation of any such occurrences.)
	es? Yes No. If "Yes" please state branch (Army, Navy, etc.) and
Place of entry on duty: (City and State)	
•	Date of discharge: (Month, Day, Year)
	to (Month, Day, Year)
	ct where you registered for the draft to avoid being drafted into the military or
naval forces of the United States?	□ Voc □ No

		PART 7 - MISCELLANEOUS INFORMATION (Continued)	
57) Have you ev	er deserted	d from the military or naval forces of the United States while the United States was at war?	Yes No
	-	er under the Military Selective Service Act or any applicable previous Selective Service (Draft) Laws? late, Selective Service number, local draft board number, and your last draft classification:	☐ Yes ☐ No
59) Were you ev	er exempte	ted from service because of conscientious objection, alienage, or any other reason?	Yes No
or similar gro	oup in the U	t or past membership in or affiliation with every political organization, association, fund, foundation, part United States or any other place since your 16 th birthday. Include any foreign military service in this parame of the organization, location, nature of the organization, and the dates of membership.	ry, club, society, art. If none, write
Name of	Organizati		Member To:
61) Have you ev	er:		
Yes	☐ No	been ordered deported, excluded, or removed?	
Yes	☐ No	overstayed a grant of voluntary departure from an Immigration Judge or the Department of Homeland Se	ecurity (DHS),
		formerly the Immigration and Naturalization Service (INS)?	
Yes	☐ No	failed to appear for removal or deportation?	
62) Have you ev	er been:		
Yes	□ No	a habitual drunkard?	
Yes	No No	one whose income is derived principally from illegal gambling?	
Yes Yes	No	one who has given false testimony for the purpose of obtaining immigration benefits?	
Yes No one who has engaged in prostitution or unlawful commercialized vice?			
Yes	□ No	involved in a serious criminal offense and asserted immunity from prosecution?	
Yes	□ No	a polygamist?	
Yes	□ No	one who brought in or attempted to bring in another to the United States illegally?	
Yes Yes	☐ No	a trafficker of a controlled substance, or a knowing assister, abettor, conspirator, or colluder with others i	in any such
		controlled substance offense (not including a single offense of simple possession of 30 grams or less of	-
☐ Yes	No	inadmissible or deportable on security-related grounds under sections 212(a)(3) or 237(a)(4) of the I	
☐ Yes	☐ No	one who has ordered, incited, assisted, or otherwise participated in the persecution of an individual on	
		her race, religion, nationality, membership in a particular social group, or political opinion?	
Yes	☐ No	a person previously granted relief under sections 212(c) or 244(a) of the INA or whose removal has cancelled under section 240A of the INA?	previously been
If a	word "Ver	s" to any of the above questions, explain:	
11 you ansv	vereu res	s to any of the above questions, explain.	

PARI /	- MISCELLAN	EOUS INFORMATION (Continued)	
63) Are you the beneficiary of an approved v			
If yes, can you arrange a trip outside the	United States to obtain	n an immigrant visa? Yes No If no, please	e explain:
64) Education: Name of School, Type of Sc	hool, Degree Earned /	Date (if any), Location (City/Country), Attended Fr	om (MM/YY) To (MM/YY)
65) The following certificates or other suppodocuments which should be attached.)	oorting documents are	attache reto as a part of this application: (Refer	to the Instructions for
PART 8 - SIGNATURE OF	F PERSON PRE	PARING FORM, IF OTHER THAN	N APPLICANT
	(Read the following	ng information and sign below)	
on all information of which I have tion was read to the applicant in a	knowledge, or which language the applican hat the knowing place	st of the person named in Part 1, that the responses p was provided to me by the applicant, and that the c tt speaks fluently for verification before he or she s ment of false information on the Form EOIR-42B	ompleted applica- igned the applica-
Signature of Preparer:		Print Name:	Date:
Daytime Telephone #:	Address of Preparer:	(Number and Street, City, State, Zip Code)	
()			

PART 9 - SIGNATURE

APPLICATION NOT TO BE SIGNED BELOW UNTIL APPLICANT APPEARS BEFORE AN IMMIGRATION JUDGE

I swear or affirm that I know the contents of this application that I am signing, including the attached documents and supplements, and that they are all true to the best of my knowledge, taking into account the correction(s) numbered to, if any, that were made by me or at my request.
(Signature of Applicant or Parent or Guardian)
Subscribed and sworn to before me by the above-named applicant at
Ammigration Judge
Date (Month, Day, Year)
PART 10 - PROOF OF SERVICE
I hereby certify that a copy of the foregoing Form EOIR-42B was: - delivered in person - mailed first class, postage prepaid
on to the Assistant Chief Counsel for the DHS (U.S. Immigration and Customs Enforcement - ICE)
(Number and Street, City, State, Zip Code)
Signature of Applicant (or Attorney or Representative)