

Application for Permission to Reapply for Admission Into the United States After Deportation or Removal

Department of Homeland Security U.S. Citizenship and Immigration Services USCIS Form I-212 OMB No. 1615-0018 Expires 06/30/2022

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Part 1. Information About You	4.a. Family Name (Last Name)
1. Alien Registration Number (A-Number) ► A-	4.b. Given Name (First Name)
	4.c. Middle Name
Your Full Name	
2.a. Family Name (Last Name)	Mailing Address USPS ZIP Code Lookup NOTE: If you are outside the United States, provide a U.S.
2.b. Given Name (First Name)	mailing address, if available. If a U.S. mailing address is not available, provide your mailing address abroad.
2.c. Middle Name	5.a. In Care Of Name
Other Names Used	5.h. Street Number
Provide all other names you have ever used, including aliases,	and Name
maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 9.	5.c. Apt. Ste. Flr.
Additional Information.	5.d. City or Town
3.a. Family Name (Last Name)	5.e. State 5.f. ZIP Code
3.b. Given Name (First Name)	5.g. Province
3.c. Middle Name	5.h. Postal Code
	5.i. Country

Par	t 1. Information About You (continued)	If you seek an immigrant or nonimmigrant visa and you are or
6.	Is your mailing address the same address where you currently live (physical address)?	will file your application for consent to reapply with your immigrant or nonimmigrant visa application, provide the information requested in Item Numbers 16 17.b.
	If you answered "No" to Item Number 6. , provide your current physical address in Item Numbers 7.a 7.f.	16. The Department of State (DOS) Consular Case Number (if available)
Phy	esical Address	The Location of the U.S. Embassy or U.S. Consulate Where
7.a.	Street Number and Name	Your Application for an Immigrant Visa is Being or Will Be Made
7.b.	Apt. Ste. Flr.	17.a. City or Town
7.c.	City or Town	17.b. Country
7.d.	State 7.e. ZIP Code	
7.f.	Province	If you are seeking consent to reapply in connection with your
7.g.	Postal Code	application to adjust your status to that of a lawful permanent resident, provide information in Item Numbers 18.a 18.c.
7.h.	Country	18.a. USCIS Receipt Number
Oth	er Information About You	18.b. Where did you file your application (for example, "USCIS Office Name" or "Lockbox")?
8.	U.S. Social Security Number	18.c. Date Filed (mm/dd/yyyy)
9.	U.S. Online Account Number	19. Are you submitting Form I-601, Application for Waiver of Grounds of Inadmissibility, along with this application?
10.	Gender Male Female	Yes No
11.	Date of Birth (mm/dd/yyyy)	If you answered "No," provide the information requested in Item Numbers 20.a 20.c. about previously filed
12.	City or Town of Birth	Forms I-601:
		20.a. USCIS Receipt Number for Form I-601
13.	State or Province of Birth (if applicable)	20.b. Where did you file your application (for example,
14	Country of Pirth	"USCIS Office Name" or "Lockbox")?
14.	Country of Birth	
15.	Country of Citizenship or Nationality	20.c. Date Filed (mm/dd/yyyy)

If you are inadmissible to the United States for the following reason, select "Yes" and then select the appropriate boxes. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

Removal as an Arriving Alien (INA Section 212(a)(9)(A)(i))

- I.a. I have been removed as an arriving alien in expedited removal proceedings under INA section 235(b)(1) or I was removed at the end of proceedings under INA section 240 as an arriving alien.
- **1.b.** I have only been removed once, and my last removal was less than five years ago.
- **1.c.** I have been removed at least two or more times, and my last removal was less than 20 years ago.
- **1.d.** I have been convicted of an aggravated felony in the United States or abroad, before or after my removal from the United States. Provide information on your aggravated felony convictions in **Part 9. Additional Information** and include the required evidence.
- 2. Date You Were Removed From the United States (mm/dd/yyyy)

Location From Where You Were Removed

3. City or Town
4. State

Removal as a Deportable Alien (INA Section 212(a)(9)(A)(ii))

- 5.a. I have been removed as a deportable alien under INA section 240 or any other provision of the law, or I departed the United States while an order of removal was outstanding.
- **5.b.** I have only been removed once and my removal was less than 10 years ago.
- **5.c.** I have been removed two or more times, and my last removal was less than 20 years ago.
- 5.d. I have been convicted of an aggravated felony in the United States or abroad, before or after my removal from the United States. Provide information on your aggravated felony convictions in **Part 9. Additional Information** and include the required evidence.
- 6. Date You Were Excluded, Deported, or Removed From the United States (mm/dd/yyyy)

Location From Where You Were Removed

7.a. <u>City or Town</u>

7.b. State

Entry After Unlawful Presence in the Aggregate of 1 Year (INA Section 212(a)(9)(C)(i)(I))

I entered or attempted to enter the United States without being admitted or paroled, after having been unlawfully present in the United States on or after April 1, 1997, for a period of more than one year, in the aggregate.



NOTE: If you answered "Yes" to **Item Number 8.**, list all the time periods during which you were unlawfully present in the United States (including any periods in which you overstayed your lawful status). Begin with your most recent period of unlawful presence. Also attach evidence demonstrating that you have *remained outside the United States for 10 years* since your last departure.

Periods of Unlawful Presence

- **9.a.** From (mm/dd/yyyy)
- **9.b.** To (mm/dd/yyyy)
- **10.** Date You Departed the United States After Your Period of Unlawful Presence (mm/dd/yyyy)

Location Where You Departed the United States After Your Period of Unlawful Presence

11.a. City or Town

11.b. State

Location Where You Reentered or Attempted to Reenter the United States

12.a. City or Town

12.b. State

13. Date You Attempted to Unlawfully Enter or Reenter the United States After Period of Unlawful Presence (mm/dd/yyyy)

	t 2. Reasons You Are Filing Form I-212 ntinued)	U.S. Citizen or Lawful Permanent Resident Family Members					
Entry After Removal (INA Section 212(a)(9)(C)(i)(II))		NOTE: If you need extra space to complete this section, use the space provided in Part 9. Additional Information .					
14.	I entered or attempted to enter the United States without being admitted or paroled after having been excluded, deported, or removed.	3.a. Family Name (Last Name) 3.b. Given Name (First Name)					
	NOTE: If you answered "Yes" to Item Number 14. , list all the dates when you were excluded, deported, or removed from the United States. If you need extra space to complete this section, use the space provided in Part 9. Additional Information.	3.d. Relationship					
	Date You Were Excluded, Deported, or Removed From the United States (mm/dd/yyyy)	My relative is (Select one): 4.a. A lawful permanent resident. 4.b. A U.S. citizen.					
	ed States After Your Exclusion, Deportation, or Removal City or Town	Part 4. Biographic Information					
10141		1. Ethnicity (Select only one box)					
16.b. 17.	State Date You Entered or Attempted to Reenter the United States After Exclusion, Deportation, or Removal (mm/dd/yyyy)	 Hispanic or Latino Not Hispanic or Latino 2. Race (Select all applicable boxes) White Asian 					
	t 3. Reasons For Your Request For mission to Reapply	 Black or African American American Indian or Alaska Native Native Hawaiian or Other Pacific Islander 					
	Department of Homeland Security (DHS) permits you to er the United States, what immigration status will you seek?						
1.a.	Permanent Resident	4. Weight Pounds					
1.b.	Visitor	5. Eye Color (Select only one box)					
1.c.	Student	Black Blue Brown					
1.d.	Other (Explain)	Gray Green Hazel					
		Maroon Pink Unknown/Other					
2.	Explain Why You Would Like to Reenter the United States	 6. Hair Color (Select only one box) Bald (No hair) Black Blond Brown Grav Red 					
	NOTE: If you need extra space to complete this section, use the space provided in Part 9. Additional Information .	Brown Gray Red Sandy White Unknown/Othe					

Part 5. Additional Information if Filing with CBP

If you are filing this application with Customs and Border Protection (CBP), provide the information requested in **Item Numbers 1.a. - 40.c.**

Address History

Provide physical addresses for everywhere you have lived during the last ten years, whether inside or outside the United States. Provide your current address first. If you are unsure of the exact date, provide the closest approximate date to the best of your knowledge. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

Physical Address 1 (current address)

1.a.	Street Number and Name	5.	Name of Employer or Company
1.b.	Apt. Ste. Flr.	Addr	ess of Employer or Company
1.c.	City or Town	6.a.	Street Number and Name
1.d.	State 1.e. ZIP Code	6.b.	Apt. Ste. Fir.
1.f.	Province	6.c.	City or Town
1.g.	Postal Code	6.d.	State 6.e. ZIP Code
1.h.	Country	6.f.	Province
Dates	s of Residence	-	Postal Code Country
2.a.	From (mm/dd/yyyy)		
2.b.	To (mm/dd/yyyy)	7.	Your Occupation
Physi	cal Address 2		
3.a.	Street Number and Name		s of Employment
3.b.	Apt. Ste. Flr.	8.a.	From (mm/dd/yyyy)
		8.b.	To (mm/dd/yyyy)
3.c.	City or Town		
3.d.	State 3.e. ZIP Code		
3.f.	Province		
3.g.	Postal Code		
3.h.	Country		

Dates of Residence

4.a. From (mm/dd/yyyy)

4.b. To (mm/dd/yyyy)

Employment History

Employer 1 (current or most recent)

Information.

Provide your employment history for the last five years,

recent employment first. If you are unsure of the exact

whether inside or outside the United States. Provide the most

employment date, provide the closest approximate date to the

best of your knowledge. If you need extra space to complete

this section, use the space provided in Part 9. Additional



Part 5. Additional Information if Filing with CBP (continued)	17. Country of Birth
Employer 2	18. Current City or Town of Residence (if living)
9. Name of Employer or Company	
	19. Current Country of Residence (if living)
Address of Employer or Company	
10.a. Street Number	Information About Your Father
and Name	Father's Legal Name
10.b. Apt. Ste. Flr.	20.a. Family Name
10.c. City or Town	(Last Name) 20.b. Given Name
10.d. State 10.e. ZIP Code	(First Name)
10.f. Province	20.c. Middle Name
	Father's Name at Birth (if different than above)
10.g. Postal Code	21.a. Family Name (Last Name)
10.h. Country	21.b. Given Name (First Name)
11. Your Occupation	21.c. Middle Name
	22. Date of Birth (mm/dd/yyyy)
Dates of Employment	23. City or Town of Birth
12.a. From (mm/dd/yyyy)	
	24. Country of Birth
12.b. To (mm/dd/yyyy)	
Information About Your Deposits	25. Current City or Town of Residence (if living)
Information About Your Parents	
Information About Your Mother	26. Current Country of Residence (if living)
Mother's Legal Name	
13.a. Family Name (Last Name)	Information About Your Marital History
13.b. Given Name (First Name)	
13.c. Middle Name	27. What is your current marital status?
Mother's Name at Birth (if different than above)	Single, Never Married Legally Separated Married Marriage Annulled
14.a. Family Name	
(Last Name) 14.b. Given Name	
(First Name)	28. How many times have you been married (including
14.c. Middle Name	annulled marriages and marriages to the same person)?
15. Date of Birth (mm/dd/yyyy)	
16. City or Town of Birth	

Part 5.	Additional	Information	if	Filing	with
CBP (co	ontinued)				

Information About Your Current Marriage (including if you are legally separated)

If you are currently married, provide the following information about your current spouse.

Current Spouse's Legal Name

29.a.	Family Name (Last Name)		(Last Name)
29.b.	Given Name (First Name)	35.b.	Given Name (First Name)
29.c.	Middle Name	35.c.	Middle Name
30.	A-Number ► A-	36.	Prior Spouse's Date of Birth (mm/dd/yyyy)
31.	Current Spouse's Date of Birth (mm/dd/yyyy)	37.	Date of Marriage to Prior Spouse (mm/dd/yyyy)
32.	Date of Marriage to Current Spouse (mm/dd/yyyy)	D1	
		Place	of Marriage to Prior Spouse
~		38.a.	City or Town
Curre	nt Spouse's Place of Birth		
33.a.	City or Town	38.b.	State or Province
33.b.	State or Province	38.c.	Country
33.c.	Country	39.	Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)
Place	of Marriage to Current Spouse	DI	
34 a	City or Town		Where Marriage with Prior Spouse Legally Ended
c nui		40.a.	City or Town
34.b.	State or Province	40.b.	State or Province
34.c.	Country	40.c.	Country

marriage)

Information About Prior Marriages

If you have been married before, whether in the United States or in any other country, provide the following information about your prior spouse. If you have had more than one previous marriage, use the space provided in **Part 9. Additional Information** to provide the information below.

Prior Spouse's Legal Name (provide family name before

Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-212 Instructions before completing this part.

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

- **1.a.** I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- **1.b.** The interpreter named in **Part 7.** read to me every question and instruction on this application and my

answer to every question in a language in which I am fluent, and I understood everything.

2. At my request, the preparer named in **Part 8.**,

prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

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

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

Applicant's Signature

6.a. Applicant's Signature



6.b. Date of Signature (mm/dd/yyyy)

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

Part 7. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

- **1.a.** Interpreter's Family Name (Last Name)
- **1.b.** Interpreter's Given Name (First Name)
- 2. Interpreter's Business or Organization Name (if any)

Part 7. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Mailing Address

3. a.	Street Number and Name	
3.b.	Apt. Ste	. 🗌 Flr.
3.c.	City or Town	
3.d.	State 3	3.e. ZIP Code
3.f.	Province	
3.g.	Postal Code	
3.h.	Country	

Interpreter's Contact Information

- 4. Interpreter's Daytime Telephone Number
- 5. Interpreter's Mobile Telephone Number (if any)
- 6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and

which is the same language specified in **Part 6.**, **Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature

7.b. Date of Signature (mm/dd/yyyy)

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

- 1.a. Preparer's Family Name (Last Name)
- **1.b.** Preparer's Given Name (First Name)
- 2. Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

3.a.	Street Number and Name
3.b.	Apt. Ste. Flr.
3.c.	City or Town
3.d.	State 3.e. ZIP Code
3.f.	Province
3.g.	Postal Code
3.h.	Country

Preparer's Contact Information

- 4. Preparer's Daytime Telephone Number
- 5. Preparer's Mobile Telephone Number (if any)
- 6. Preparer's Email Address (if any)

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)

Preparer's Statement

- **7.a.** I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- **7.b.** I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or Form G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy)

Par	rt 9. Additional Information	5.a.	Page Number	5.b. Part Nu	mber 5.c.	Item Number
withis space to co sheet top o and I	u need extra space to provide any additional information in this application, use the space below. If you need more e than what is provided, you may make copies of this page omplete and file with this application or attach a separate t of paper. Type or print your name and A-Number at the of each sheet; indicate the Page Number , Part Number , Item Number to which your answer refers; and sign and each sheet.	5.d.				
1.b.	(First Name)	A	FŦ			
1.c. 2. 3.a.	Middle Name A-Number ▶ A- Page Number 3.b. Part Number 3.c. Item Number	 er 6.a.	Page Number	6.b. Part Nu	umber 6.c.	Item Number
3.d.		6.d.				
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