

部分非永久居民关于
取消驱逐令和调整身份的申请

给申请人的建议

请仔细阅读。费用将不予退还。

I. 有资格取消驱逐令的非公民：根据《移民和国籍法》（INA）第240A(b)条，您可能符合取消驱逐的资格。要想获得这项福利，您必须在移民法官的听证会上证明：

- A.**
1. 在送达出庭通知书之前，您已经在美国连续停留了十（10）年或更长时间，并且根据《移民和国籍法》第101（f）条的定义，在此期间您是一个具有良好品德的人。
 2. 您没有被判定犯有《移民和国籍法》第212(a)(2)、237(a)(2)或237(a)(3)条所涵盖的罪行；并且
 3. 如您被遣返，会导致已入籍美国或取得合法永久居民身份的您的配偶、家长或子女带来特殊和极不寻常的困难，并且您应当在申请中得到对您有利的酌情处理。

或者

- B.**
1. 您在美国受到身为美国公民或合法永久居民的配偶或家长殴打，或受到他们的极端虐待，或者您是某美国公民或合法永久居民的儿童的家长，而该儿童在美国被该公民或合法永久居民家长殴打，或受到他们的极端虐待；
 2. 在送达出庭通知书之前，您已经在美国连续停留了三（3）年或更长时间，并且根据《移民和国籍法》第101（f）条定义，在此期间您是一个具有良好品德的人。
 3. 根据《移民与国籍法》第212(a)(2)或212(a)(3)条，您并非不允许入境，根据《移民与国籍法》第237(a)(1)(G)条或第237(a)(2)-(4)条，您并未被驱逐出境过，而且您没有被判定过由《移民与国籍法》**第101(a)(43)条**定义的严重罪行。
 4.
 - a. 如您被驱逐，则会导致您或您已入籍美国或取得合法永久居民身份的子女陷入极端困难；或
 - b. 您是一名儿童，将其遣送回国会给您或您的父母带来极大的困难；并且
 5. 您应当对自己的申请行使有利的裁量权。

注意：如果您在美国武装部队服役至少 24 个月，则无需满足在美国连续居住的要求。但是，当您进入武装部队时，您必须在美国境内。如果您不再留在武装部队中，您必须是名誉退伍。

II. 不符合取消驱逐令条件的非公民：如果您满足以下条件，则根据 INA 第 240A(b)(1) 条，您没有资格取消驱逐：

- A.** 1964年6月30日以后作为船员进入美国；

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- B. 以《移民和国籍法》第101(a)(15)(J)条定义的非移民交换**非公民**身份入境美国，接受医学研究生教育或培训，无论您是否受《移民和国籍法》第212(e)条规定的2年外国居留要求约束或已经满足。
- C. 曾作为或后来成为《移民和国籍法》第101(a)(15)(J)条定义的非移民交换**非公民**入境美国，但并非为了接受医学研究生教育或培训，并受《移民和国籍法》第212(e)条规定的2年外国居留要求的限制，但既没有申请也没有获得该要求的豁免；
- D. 根据《移民和国籍法》第212(a)(3)条，**您不能**入境，或根据《移民和国籍法》第237(a)(4)条可被驱逐出境；
- E. **您**曾因为某人的种族、宗教、国籍、特定社会团体成员身份或政治观点，命令、煽动、协助或以其他方式参与过迫害该人；或
- F. 根据《移民和国籍法》第212(c)条或《移民和国籍法》第244(a)条，**您以前**获得过救济，因为这些条款在《1996年非法移民改革和移民责任法》颁布之前是有效的，根据《移民和国籍法》第240A条，其驱逐令在此前就已被取消。

III. 如何申请取消驱逐令：

如果您认为自己已满足取消驱逐令的所有要求，则您必须完整准确地回答所附EOIR-42B表的所有问题。您必须支付申请费和生物识别费，并遵守国土安全部（DHS）关于向**美国公民及移民服务局**（USCIS）提供生物识别和履历信息的说明，[可在<http://uscis.gov>]。您还必须按照本申请书第8页关于送达证明的要求，将您的申请书副本送达国土安全部、美国移民和海关执法局（ICE）的助理首席律师，如果适用的话，并且您必须向合适的移民法院提交申请。在完成您的申请之前，请仔细阅读以下说明。

指示

1. 申请准备。

要根据《移民和国籍法》(INA)第240A(b)条申请取消驱逐令，您必须完整和准确地回答所附EOIR-42B表的所有问题。您还必须遵守本表格中的所有说明。这些说明具有法律效力。每个申请取消驱逐令的人都必须单独准备和执行一份申请。精神上无行为能力的**非公民**或14岁以下的儿童，应由家长或监护人代表执行申请。

您的回答必须用打字或用墨水清晰打印出来。不要留下任何未回答的问题或空白。如果任何问题对您来说不适用，请在适当的位置写上"无"或"不适用"。

尽可能在表格中直接回答所有问题。如果没有足够的空间完全回答某个问题，请在另一张纸上继续回答。请在附加纸上的回答旁边注明所回答问题的编号，写上您的外国人登记(**"A"**)号码，打印您的姓名，并在每张附加纸上签名、写上日期，并牢牢地附在EOIR-42B表上。

2. 举证责任。

您有责任证明自己符合《移民和国籍法》第240A(b)条对某些非永久居民取消驱逐令的所有法定要求，并且您有权酌情获得这种救济。为了履行这一责任，您对申请中的问题的回答应尽可能详细和完整。您也应该在自己的申请中附上任何能证明有资格取消驱逐令的文件（见下文"证明文件"）。

3. 证明文件。

您应该提交文件证据，以证明您在规定的时间内一直在美国持续居住。可以证明您在美持续逗留的文件包括但不限于银行存折、租约、契约、执照、收据、信件、出生记录、教会记录、学校记录、就业记录、**医疗记录**和缴税证明。

为获得取消驱逐令的资格，您应提交文件证明自己在美国连续逗留期间，一直是个品行良好的人。**如果有的话**，您应该提交在此期间逗留的每个司法管辖区的**定罪**记录。为了证明良好的道德品质，我们建议您提交证明您良好道德品质的证人宣誓书，其证人最好是美国公民。如果有工作的话，则提交您雇主的证人宣誓书，其中应包括有关您工作的性质和时间以及您的收入的信息。

您应该提交官方证明，确定您与声称会因您被驱逐而遭受困难的人们的关系，如果这些人是美国公民或合法永久居民，则应提交他们的公民身份或合法永久居民身份的证据。这种关系的文件证据可包括，但不限于出生记录、结婚证、离婚或终止婚姻的证明和死亡证明。

您还应在申请中提交国土安全部（DHS），即以前的移民及归化局（**"INS"**）发给您的任何文件的副本。您还应提交所有反映自己在美国实际逗留期间的纳税情况、您的犯罪历史，包括所有定罪记录，以及支付子女抚养费的文件。移民法官可能会要求您提交与您取消驱逐令请求有关的其他记录。

所有证明文件的原件必须在听证会上供人检查。如果您希望把文件原件还给您，则您也应该出示**副本**。

4. 所需的生物识别和履历信息。

每个14岁或以上的申请人也必须遵守提供生物识别和履历信息的要求。您将得到如何完成这一要求的指示。您将收到**国土安全部移民局 (DHS USCIS)** 申请支持中心 (ASC) 或指定执法机构位置的书面通知，您必须去那里提供生物识别和履历信息。您也会得到一个预约的日期和时间。提供所有必须的信息是很重要的。如果不遵守这一要求，可能会导致您的申请被推迟，或者被移民法院视为放弃和驳回。

5. 翻译。

任何外语文件都必须附有英文译本和一份由翻译人员签署的证明，说明他/她有能力翻译该文件，并且该译本在翻译人员的能力范围内是真实和准确的。这种证明必须打印清晰。

6. 照片。

除非您被监禁或被拘留在某一设施中，致使您无法遵守这一指示，否则您必须提交两张在本申请日期30天内拍摄的光面、未经修饰的彩色照片。这些照片必须有白色背景，而且不能装裱。照片中您的面部形象尺寸应该是从下巴到头发的顶部大约一 (1) 英寸，您应该睁开眼睛，以全额正面/运动式的方式展示。用铅笔或毛笔在每张照片的背面轻轻地印上您的名字和外国人登记 ("A") 号码。

7. 费用。

在向移民法院提交EOIR-42B表之前，您必须向国土安全部支付规定的100美元申请费和生物识别费。缴纳这些费用的证据是**国土安全部 (DHS)** 移民局的ASC费用收据和生物识别技术预约说明的副本，必须随同您的EOIR-42B表一起提交。无论您的申请结果如何，这些费用都不会被退还。因此，在答复之前，您必须仔细阅读该通知、说明和申请。**如果您无法支付申请费，则可以要求移民法官允许您提交EOIR-42B表而不必支付费用，并在您的申请中包括一份完整的EOIR-26A费用减免表。**

请勿寄送现金。所有费用必须以准确的金额提交。可以用个人支票、本票、认证银行支票、银行国际汇票或由美国金融机构签发的外国汇票进行汇款，收款人为 "国土安全部 " 的美钞。如果申请人居住在维尔京群岛，支票或汇票的收款人必须是 "维尔京群岛财政专员"。如果申请人居住在关岛，支票或汇票的收款人必须是 "关岛财政局"。接受个人支票，但要看能否收回。无法收回的支票将导致申请书和据此签发的任何文件无效。如果支付费用的支票不被银行承兑，您将被收取30美元的费用。如果支票以申请人以外的人的账户开具，则必须在支票表面填写申请人的姓名和外国人登记 ("A") 号码。所有支票必须在美国境内的银行开具。

8. 送达和提交您的申请。

- A. 您必须首先遵守国土安全部关于向移民局提供生物识别和生物信息的指示，这涉及到向合适的移民局服务中心发送一份申请副本。国土安全部的指示还涉及到申请费的支付。
- B. 然后，您必须向美国国土安全部、美国移民和海关执法局 (ICE) 的助理首席律师送达以下文件：

- 您的EOIR-42B表格，取消驱逐令的申请，以及所有证明文件和附加页副本各一份；
- 美国移民局的ASC费用收据通知和生物识别技术预约说明副本各一份；
- 履历信息表G-325A原件；以及
- 您的一张照片，需要符合上述第6条要求。

Note: Electronic filers are not required to serve the opposing party if the opposing party is participating in ECAS. EOIR's ECAS system will provide an electronic service notification to participating parties. 注：如果对方当事人参加了ECAS，电子申请者不需要向对方当事人送达。EOIR的ECAS系统将向参与方提供电子服务通知。

您必须向合适的移民法院提交以下文件：

- EOIR-42B表的原件及所有证明文件和附加页；
- 美国移民局的ASC费用收据通知和生物识别技术预约说明的副本各一份；
- 履历信息表G-325A的副本；
- 一张符合上述第6条规定的照片；以及
- 填写好的证明，表明这些文件已送达ICE助理首席律师（见申请书第8页第10部分），或确认这些文件是通过ECAS系统以电子方式提交的，除非送达是在听证会的记录中进行的。

保留您的移民局ASC生物识别确认文件或您的指纹卡副本，FD-258，如果适用的话，它将作为您的生物识别证明，并带它到未来的移民法庭听证会上。

9. 处罚。

您必须如实回答EOIR 42B表的所有问题，并只提交支持您申请的真实文件。您将被要求宣誓或确认您的申请和支持文件内容在您所知范围内是真实的。您对本表问题的回答以及您提交的证明文件将被用来决定是否应取消对您的遣返以及是否应允许您调整身份。您的任何回答和您提供的任何证明文件也可以在任何程序中作为证据，以确定您是否有权利入境或重新入境、重新进入、通过或居住在美国的权利。如果您的任何答案或证明文件被发现是虚假的，您的申请可能会被拒绝。

根据《美国法典》第18章第1546条，提交虚假答案或虚假文件也可能使您受到刑事起诉，和/或根据《美国法典》第8章第1324c条，如果您知道自己的申请或任何支持文件包含任何有关重大事实的虚假陈述，或者如果您发誓或确认您的申请和支持文件内容是真实的，但知道申请或任何支持文件包含任何有关重大事实的虚假陈述，您将受到民事处罚。如果罪名成立，您可能会被处以最高25万美元的罚款，最高10年的监禁，或两者并罚。美国法典》第18卷第1546(a)、3559(a)(4)、3571(b)(3)条。如果确定您违反了禁止文件欺诈的规定，并且对您发出了最终命令，您可能会就第一次违反使用或创建的每份文件处以最高2000美元的民事罚款，而第二次或以后的违反罚款则最高为每份文件5000美元。此外，如果您因违反《美国法典》第8篇第1324c节（与文件欺诈的民事处罚有关）而成为最终命令的对象，您将被驱逐出美国。

10. 减少文书工作法通知。

根据《减少文书工作法》，除非一个人显示目前有效的OMB控制号码，否则不需要对信息收集作出回应。我们试图创建准确的表格和说明，让其可以很容易理解，并尽可能减少您向我们提供信息的负担。通常，这个过程是困难的，因为一些移民法是非常复杂的。这种信息收集的报告负担按以下方式计算：(1)了解表格，50分钟；(2)填写表格，2小时；(3)封装和提交表格，3小时，平均每份申请耗时5小时50分钟。如果您对这个负担估计的准确性或这个信息收集的任何其他方面有意见，包括减少这个负担的建议，您可以写信给美国司法部，移民审查执行办公室，总法律顾问办公室，5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041

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

**PLEASE READ ADVICE AND INSTRUCTIONS
BEFORE FILLING IN FORM**

PLEASE TYPE OR PRINT

Fee Stamp (Official Use Only)

PART 1 - INFORMATION ABOUT YOURSELF

1) My present true name is: <i>(Last, First, Middle)</i>		2) Alien Registration ("A") Number(s):	
3) My name given at birth was: <i>(Last, First, Middle)</i>		4) Birth Place: <i>(City and Country)</i>	
5) Date of Birth: <i>(Month, Day, Year)</i>	6) Gender:	7) Height:	8) Hair Color: 9) Eye Color:
10) Current Nationality and Citizenship: 11) National ID/Passport Number: 12) Home Phone Number: 13) Work Phone Number:			
14) I currently reside at:		15) I have been known by these additional name(s):	
<hr/>		<hr/>	
<hr/>		<hr/>	
<hr/>		<hr/>	

16) I have resided in the following locations in the United States: (List PRESENT ADDRESS FIRST, and work back in time for at least 10 years.)

Street and Number - Apt. or Room # - City or Town - State - Zip Code	Resided From: <i>(Month, Day, Year)</i>	Resided To: <i>(Month, Day, Year)</i>
		PRESENT

PART 2 - INFORMATION ABOUT THIS APPLICATION

17) I, the undersigned, hereby request that my removal be cancelled under the provisions of section 240A(b) of the Immigration and Nationality Act (INA). I believe that I am eligible for cancellation of removal because: (Check all that apply.)

☐ My removal would result in exceptional and extremely unusual hardship to my:

	UNITED STATES CITIZEN	LAWFUL PERMANENT RESIDENT
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___ spouse, who is a	___	___
___ father, who is a	___	___
___ mother, who is a	___	___
___ child/children, who is/are a	___	___

___ I, or my child, have been battered or subject to extreme cruelty by a United States citizen or lawful permanent resident spouse or parent.

With the exception of absences described in question #23, I have resided in the United States since: _____
(Month, Day, Year)

PART 3 - INFORMATION ABOUT YOUR PRESENCE IN THE UNITED 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, City, and State)*

21) I: ☐ was inspected and admitted.

☐ I entered using my Lawful Permanent Resident card which is valid until _____.
Category on Lawful Permanent Resident card _____ *(Month, Day, Year)*

☐ I entered using a _____ visa which is valid until _____ *(Month, Day, Year)*

☐ was not inspected and admitted. *(Specify Type of Visa)* *(Month, Day, Year)*

☐ I entered without documents. Explain: _____

☐ I entered without inspection. Explain: _____

☐ Other. Explain: _____

22) I applied on _____ for additional time to stay and it was ☐ granted on _____ *(Month, Day, Year)*
and valid until _____, or ☐ denied on _____ *(Month, Day, Year)*

23) Since the date of my first entry, I departed from and returned to the United States at the following places and on the following dates:
(Please list all departures regardless of how briefly you were absent from the United States.)

If you have never departed from the United States since your original date of entry, please mark an X in this box: ☐

	<i>Place or area or port or city and state of departure</i>	<i>Departure Date (Month, Day, Year)</i>	<i>Purpose of Travel</i>	<i>Destination</i>
1	<i>Place or area or port or city and state of return</i>	<i>Return Date (Month, Day, Year)</i>	<i>Manner of Return</i>	<i>Inspected and Admitted?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
2	<i>Place or area or port or city and state of departure</i>	<i>Departure Date (Month, Day, Year)</i>	<i>Purpose of Travel</i>	<i>Destination</i>
	<i>Place or area or port or city and state of return</i>	<i>Return Date (Month, Day, Year)</i>	<i>Manner of Return</i>	<i>Inspected and Admitted?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No

24) Have you ever departed the United States: a) under an order of deportation, exclusion, or removal?..... ☐ Yes ☐ No

b) pursuant to a grant of voluntary departure?..... ☐ Yes ☐ No

PART 4 - INFORMATION ABOUT YOUR MARITAL STATUS AND SPOUSE *(Continued on page 3)*

25) I am **divorced**:
I am married: **yes** **no**

26) If married, the name of my spouse is: *(Last, First, Middle)*

27) My spouse's name before marriage was:

28) The marriage took place in: *(City and Country)*

29) Date of marriage: *(Month, Day, Year)*

30) My spouse currently resides at:

Apt. number and/or in care of

Number and Street

City or Town

State/Country Zip Code

31) Place and date of birth of my spouse: *(City & Country; Month, Day, Year)*

32) My spouse is a citizen of: *(Country)*

33) If your spouse is other than a native born United States citizen, answer the following:

He/she arrived in the United States at: *(Place or Port, City and State)* _____

He/she arrived in the United States on: *(Month, Day, Year)* _____

His/her alien registration number(s) is: A# _____

He/she was naturalized on: *(Month, Day, Year)* _____ at _____ *(City and State)*

34) My spouse ☐ - is ☐ - is not employed. If employed, please give salary and the name and address of the place(s) of employment.

Full Name and Address of Employer	Earnings Per Week <i>(Approximate)</i>
	\$
	\$
	\$

Please continue answers on a separate sheet as needed.

PART 4 - INFORMATION ABOUT YOUR MARITAL STATUS AND SPOUSE (Continued)

35) I ☐ - have ☐ - have not been previously married: (If previously married, list the name of each prior spouse, the dates on which each marriage began and ended, the place where the marriage terminated, and describe how each marriage ended.)

Name of prior spouse: (Last, First, Middle)	Date marriage began: Date marriage ended:	Place marriage ended: (City and Country)	Description or manner of how marriage was terminated or ended:

36) My present spouse ☐ - has ☐ - has not been previously married: (If previously married, list the names of each prior spouse, the dates on which each marriage began and ended, the place where the marriage terminated, and describe how each marriage ended.)

Name of prior spouse: (Last, First, Middle)	Date marriage began: Date marriage ended:	Place marriage ended: (City and Country)	Description or manner of how marriage was terminated or ended:

37) Have you been ordered by any court, or are otherwise under any legal obligation, to provide child support and/or spousal maintenance as a result of a separation and/or divorce? ☐ Yes ☐ No

PART 5 - INFORMATION ABOUT YOUR EMPLOYMENT AND FINANCIAL STATUS

38) Since my arrival into the United States, I have been employed by the following named persons or firms: (Please begin with present employment and work back in time. Any periods of unemployment or school attendance should be specified. Attach a separate sheet for additional entries if necessary.)

Full Name and Address of Employer	Earnings Per Week (Approximate)	Type of Work Performed	Employed From: (Month, Day, Year)	Employed To: (Month, Day, Year)
	\$			PRESENT
	\$			
	\$			

39) If self-employed, describe the nature of the business, the name of the business, its address, and net income derived therefrom:

40) My assets (and if married, my spouse's assets) in the United States and other countries, not including clothing and household necessities, are:

<u>Self</u>	<u>Jointly Owned With Spouse</u>
Cash, Stocks, and Bonds..... \$	Cash, Stocks, and Bonds. \$
Real Estate..... \$	Real Estate..... \$
Auto (dollar value minus amount owed)..... \$	Auto (dollar value minus amount owed)..... \$
Other (describe on line below)..... \$	Other (describe on line below). \$
TOTAL \$	TOTAL \$

41) I ☐ - have ☐ - have not received public or private relief or assistance (e.g., Welfare, Unemployment Benefits, Medicaid, TANF, AFDC, etc.). If you have, please give full details including the type of relief or assistance received, date for which relief or assistance was received, place, and total amount received during this time: _____

42) Please list each of the years in which you have filed an income tax return with the Internal Revenue Service: _____

PART 6 - INFORMATION ABOUT YOUR FAMILY *(Continued on page 5)*

43) I have _____ *(Number of)* children. Please list information for each child below, include assets and earnings information for children over the age of 16 who have separate incomes:

Name of Child: <i>(Last, First, Middle)</i> Child's Alien Registration Number:	Citizen of What Country: Birth Date: <i>(Month, Day, Year)</i>	Now Residing At: <i>(City and Country)</i> Birth Place: <i>(City and Country)</i>	Immigration Status of Child
A#:			
Estimated Total of Assets: \$ _____		Estimated Average Weekly Earnings: \$ _____	
A#:			
Estimated Total of Assets: \$ _____		Estimated Average Weekly Earnings: \$ _____	
A#:			
Estimated Total of Assets: \$ _____		Estimated Average Weekly Earnings: \$ _____	

44) If your application is denied, would your spouse and all of your children accompany you to your:

Country of Birth - ☐ Yes ☐ No

Country of Nationality - ☐ Yes ☐ No

Country of Last Residence - ☐ Yes ☐ No

If you answered "No" to any of the responses, please explain: _____

45) Members of my family, including my spouse and/or child(ren) ☐ - have ☐ - have not received public or private relief or assistance (e.g., Welfare, Unemployment Benefits, Medicaid, TANF, AFDC, etc.). If any member of your immediate family has received such relief or assistance, please give full details including identity of person(s) receiving relief or assistance, dates for which relief or assistance was received, place, and total amount received during this time: _____

46) Please give the requested information about your parents, brothers, sisters, aunts, uncles, and grandparents, living or deceased. As to residence, show street address, city, and state, if in the United States; otherwise show only country:

Name: <i>(Last, First, Middle)</i> Alien Registration Number:	Citizen of What Country: Birth Date: <i>(Month, Day, Year)</i>	Relationship to Me: Birth Place: <i>(City and Country)</i>	Immigration Status of Listed Relative
A#:			
Complete Address of Current Residence, if Living: _____			

A#:			
Complete Address of Current Residence, if Living: _____			

PART 6 - INFORMATION ABOUT YOUR FAMILY (Continued)

IF THIS APPLICATION IS BASED ON HARDSHIP TO A PARENT OR PARENTS, QUESTIONS 47-50 MUST BE ANSWERED.

47) If your parent is not a citizen of the United States, give the date and place of arrival in the United States including full details as to the date, manner, and terms of admission into the United States: _____

48) My father ☐ - is ☐ - is not employed. If employed, please give salary and the name and address of the place(s) of employment.

Full Name and Address of Employer	Earnings Per Week (Approximate)
	\$

49) My mother ☐ - is ☐ - is not employed. If employed, please give salary and the name and address of place(s) of employment.

Full Name and Address of Employer	Earnings Per Week (Approximate)
	\$

50) My parent's assets in the United States and other countries not including clothing and household necessities are:

Assets of father consist of the following:

Cash, Stocks, and Bonds..... \$

Real Estate..... \$

Auto (dollar value minus amount owed)..... \$

Other (describe on line below)..... \$

TOTAL \$

Assets of mother consist of the following:

Cash, Stocks, and Bonds. \$

Real Estate..... \$

Auto (dollar value minus amount owed)..... \$

Other (describe on line below). \$

TOTAL \$

PART 7 - MISCELLANEOUS INFORMATION

51) I ☐ - have ☐ - have not entered the United States as a crewman after June 30, 1964.

52) I ☐ - have ☐ - have not been admitted as, or after arrival in the United States acquired the status of, an exchange **noncitizen**.

53) I ☐ - have ☐ - have not submitted address reports as required by section 265 of the Immigration and Nationality Act.

54) I ☐ - have ☐ - have never (either in the United States or in any foreign country) been arrested, summoned into court as a defendant, convicted, fined, imprisoned, placed on probation, or forfeited collateral for an act involving a felony, misdemeanor, or breach of any public law or ordinance (including, but not limited to, traffic violations or driving incidents involving alcohol). (If answer is in the affirmative, please give a brief description of each offense including the name and location of the offense, date of conviction, any penalty imposed, any sentence imposed, and the time actually served. You are required to submit documentation of any such occurrences.)

55) Have you ever served in the Armed Forces of the United States? ☐ Yes ☐ No. If "Yes" please state branch (Army, Navy, etc.) and service number: _____

Place of entry on duty: (City and State) _____

Date of entry on duty: (Month, Day, Year) _____ Date of discharge: (Month, Day, Year) _____

Type of discharge: (Honorable, Dishonorable, etc.) _____

I served in active duty status from: (Month, Day, Year) _____ to (Month, Day, Year) _____

56) Have you ever left the United States or the jurisdiction of the district where you registered for the draft to avoid being drafted into the military or naval forces of the United States?

☐ Yes ☐ No

Please continue answers on a separate sheet as needed.

PART 7 - MISCELLANEOUS INFORMATION (Continued)

57) Have you ever deserted from the military or naval forces of the United States while the United States was at war? ☐ Yes ☐ No

58) If male, did you register under the Military Selective Service Act or any applicable previous Selective Service (Draft) Laws? ☐ Yes ☐ No
If "Yes," please give date, Selective Service number, local draft board number, and your last draft classification: _____

59) Were you ever exempted from service because of conscientious objection, alienage, or any other reason? ☐ Yes ☐ No

60) Please list your present or past membership in or affiliation with every political organization, association, fund, foundation, party, club, society, or similar group in the United States or any other place since your 16th birthday. Include any foreign military service in this part. If none, write "None." Include the name of the organization, location, nature of the organization, and the dates of membership.

Name of Organization	Location of Organization	Nature of Organization	Member From: (Month, Day, Year)	Member To: (Month, Day, Year)

61) Have you ever:

- ☐ 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 Security (DHS), formerly the Immigration and Naturalization Service (INS)?
☐ Yes ☐ No failed to appear for removal or deportation?

62) Have you ever been:

- ☐ Yes ☐ No a habitual drunkard?
☐ Yes ☐ No one whose income is derived principally from illegal gambling?
☐ 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 ☐ No a trafficker of a controlled substance, or a knowing assister, abettor, conspirator, or colluder with others in any such controlled substance offense (not including a single offense of simple possession of 30 grams or less of marijuana)?
☐ Yes ☐ No inadmissible or deportable on security-related grounds under sections 212(a)(3) or 237(a)(4) of the INA?
☐ Yes ☐ No one who has ordered, incited, assisted, or otherwise participated in the persecution of an individual on account of his or 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 previously been cancelled under section 240A of the INA?

If you answered "Yes" to any of the above questions, explain: _____

PART 7 - MISCELLANEOUS INFORMATION *(Continued)*

63) Are you the beneficiary of an approved visa petition? ☐ Yes ☐ No

If yes, can you arrange a trip outside the United States to obtain an immigrant visa? ☐ Yes ☐ No If no, please explain:

64) Name of School, Type of School, Degree Earned / Date (if any), Location (City/Country), Attended From (MM/YY) To (MM/YY)

65) The following certificates or other supporting documents are attached as part of this document. : (Refer to the Instructions for documents which should be attached.)

PART 8 - SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

(Read the following information and sign below)

I declare that I have prepared this application at the request of the person named in Part 1, that the responses provided are based on all information of which I have knowledge, or which was provided to me by the applicant, and that the completed application was read to the applicant in a language the applicant speaks fluently for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information on the Form EOIR-42B may subject me to civil penalties under 8 U.S.C. § 1324c.

Signature of Preparer:	Print Name:	Date:
Daytime Telephone#:	Address of Preparer: <i>(Number and Street, City, State, Zip Code)</i>	

PART 9 - SIGNATURE OF APPLICANT

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.

Print Name

Signature of Applicant or Parent or Guardian

Date (Month, Day, Year)

PART 10 - PROOF OF SERVICE

I hereby certify that a copy of the foregoing Form EOIR-42A was **sent** to to the Assistant Chief Counsel for the DHS (U.S. Immigration and Customs Enforcement-ICE) on _____ at:

(Month, Day, Year)

(Email Address or Physical Address (Number and Street, City, State, Zip Code))

☐ No service needed. I electronically filed this document, and the opposing party is participating in ECAS.

Signature of Applicant (or Attorney or Representative)