Draft, not for production usons No. 1615-XXXX; Expires 00/00/00

Department of Homeland Security

U.S. Citizenship and Immigration Services

I-918, Application for U Nonimmigrant Status

Instructions

Please read these instructions carefully to properly complete the form. If you need more space to complete an answer, use a separate sheet(s) of paper. Write your name and Alien Registration Number (A #), if any, at the top of each sheet(s) and indicate the number of the item relating to your answer. Include the Part and letter or number referring to the additional information you are providing (example: Part 2, Z.) NOTE: U.S. Citizenship and Immigration Services (USCIS) is comprised of offices of the former Immigration and Naturalization Service (INS).

Use Form I-918 to request temporary immigration benefits if you are a victim of certain criminal activities.

You will need to give us:

- A completed and signed Form I-918 with filing fee and biometric services fee.
- A completed and signed Form I-918, Supplement A, Application for Qualifying Family Member of U-1 Recipient.
- A completed and signed Form I-918, Supplement B, U Nonimmigrant Status Certification.
- Documents to support your application.
- Translation of any non-English language document.

To file this application see Step 3 for specific instructions.

How Do I File Form I-918?

A separate Form I-918 must be filed for each person seeking U nonimmigrant status that accords temporary immigration benefits for victims of certain criminal activities, including qualifying family members of the victim. Follow the steps below to file your application:

- Step 1 Determine the Reason for Filing Form I-918
- Step 2 Complete Your Application
- Step 3 Submit Your Application

Filing Deadline.

If you are applying for U nonimmigrant status based upon victimization during a qualifying criminal activity that occurred prior to October 28, 2000, you must file your application by **[insert date one year and 30 days from publication of rule**] or within one year after your 16th birthday, whichever date comes later.

If you do not file within the allotted time period, your application will be denied unless you can establish exceptional circumstances for your failure to file within a reasonable period. Exceptional circumstances refer to events or factors directly related to the failure to file the application in the one-year filing period between the date that implementing regulations go into effect and the filing deadline. Circumstances may include, but are not limited to:

- Serious illness or mental or physical disability, including any effects of trauma suffered in the past or during the filing period;
- Legal disability (e.g., applicant was an unaccompanied minor or suffered from a mental impairment) during the filing period;
- Ineffective assistance of counsel, provided that:
 - (1) You file an affidavit setting forth in detail the agreement that was entered into with counsel with respect to the actions to be taken and what representations counsel did or did not make to the respondent in this regard;
 - (2) The counsel whose integrity or competence is being impugned has been informed of the allegations and given an opportunity to respond; and
 - (3) You indicate whether a complaint has been filed with the appropriate disciplinary authorities with respect to any violation of counsel's ethical or legal responsibilities, and if not, why not;
- Maintaining lawful immigrant or nonimmigrant status during the filing period;
- Having parole or deferred action to be a witness in an investigation or proceeding being conducted by a law enforcement agency, a judicial body, or an administrative body;
- Having an asylum application pending during the filing period;

- Having an S nonimmigrant visa (alien witness or informant) application pending during the filing period;
- The death or serious illness or incapacity of your legal representative or a member of your qualifying family member; or
- Filing an application for U nonimmigrant status prior to the expiration of the deadline that was rejected as not properly filed, provided it is re-filed within a reasonable period thereafter.

Notice

USCIS wants to make sure that you receive the requested benefit if you are eligible. To do this, we may ask for more evidence, interview you, and/or conduct an inquiry. **If you give us false documents, misrepresent facts or otherwise engage in fraud, USCIS will take appropriate action.** This means we will not only deny your application, but you may also lose current and future immigration benefits. You may also face penalties, including criminal and/or civil prosecution leading to fines and/or imprisonment.

Step 1. Reason for Filing Form I-918.

When Should I Use Form I-918?

You should use Form I-918 to request temporary immigration benefits if you are a victim of certain qualifying criminal activity. Form I-918 should be filed by you, the victim, and may include qualifying family members. It can also be used at a later date to file for qualifying family members not included on the original application.

- **Principal Applicant**. You must demonstrate all of the following:
 - You are a victim of criminal activity designated in section 101(a)(15)(U) of the Immigration and Nationality Act (the Act). Such activity is defined as being the victim of one or more of the following or any similar activity in violation of Federal, State or local criminal law:
 - Rape;
 - Torture;
 - Trafficking;

- Incest;
- Domestic violence;
- Sexual assault;
- Abusive sexual contact;
- Prostitution;
- Sexual exploitation;
- Female genital mutilation;
- Being held hostage;
- Peonage;
- Involuntary servitude;
- Slave trade;
- Kidnapping;
- Abduction;
- Unlawful criminal restraint;
- False imprisonment;
- Blackmail;
- Extortion;
- Manslaughter;
- Murder;
- Felonious assault;
- Witness tampering;
- Obstruction of justice;
- Perjury; or
- Attempt, conspiracy or solicitation to commit any of the above.
- -- You have suffered substantial physical or mental abuse as a result of having been a victim of qualifying criminal activity;
- -- You possess information concerning the qualifying criminal activity of which you were a victim;
- -- A Federal, State or local government official investigating or prosecuting a qualifying criminal activity certifies (using **Supplement B** of this application) that you have been, you are being or you are likely to be helpful; and
- The criminal activity of which you are a victim violated the laws of the United States or occurred in the United States (including Indian country and military installations) or the territories and possessions of the United States.

- **Principal Applicant** filing for a qualifying family member, or **currently holding U-1 status** and filing for a qualifying family member. You must also demonstrate that:
 - -- If you are under the age of 21, qualifying family members for whom you are filing are your:
 - Spouse;
 - Unmarried child(ren) under the age of 21;
 - Parent(s).
 - -- If you are over the age of 21 years, qualifying family members for whom you are filing are your:
 - Spouse;
 - Unmarried child(ren) under the age of 21.
 - -- Your qualifying family member(s) will suffer extreme hardship if not allowed to remain in or join you in the United States.
 - -- A federal, State or local government official of the agency investigating or prosecuting qualifying criminal activity certifies (using **Supplement B** of this application) that the investigation or prosecution would be harmed if your family member were removed from the United States or not permitted to join you in the United States.

If your application is approved, you will be employment authorized incident to status and USCIS will send you an Employment Authorization Document as evidence of that authorization.

Derivative family members are also employment authorized incident to status. If they wish to obtain an Employment Authorization Document as evidence of authorization, a Form I-765, Application for Employment Authorization Document, with appropriate fee, may be filed concurrently with the Form I-918 and FormI-918, Supplement A.

Derivative family members living outside the United States are not eligible to receive employment authorization until they lawfully enter the United States. Do not file Form I-765 for a derivative family member who is outside the United States.

If you and/or your qualifying family member is or becomes inadmissible under Section 212(a) of the Immigration and Nationality Act, you and/or your family member will not be eligible for U nonimmigrant status unless the ground of inadmissibility is waived by USCIS. If the ground of inadmissibility is one that can be waived, you must submit a Form I-192, Application for Advance Permission to Enter as a Nonimmigrant (Pursuant to Section 212(d)(3) of the Immigration and Nationality Act). Form I-192 should be filed concurrently with the Form I-918. USCIS, at its discretion, will decide eligibility for the waiver.

Step 2. Complete Forms I-918, I-918, Supplement A and I-918, Supplement B.

Use **black ink**. Type or print clearly using capital letters. If an item does not apply to you, write "N/A." If the answer is none, write "NONE."

This form is divided into **Parts 1** through **8**. The following information should help you fill out the form.

A. Completing Form I-918.

You, as the principal applicant, must file a Form I-918 for yourself. You must also file a Form 918, Supplement B, U Nonimmigrant Status Certification that has been completed and signed by a certifying official. The Form I-918, Supplement B, must be submitted with the original Form I-918 application package. If it is not attached, your Form I-918 will be returned to you as incomplete.

Part 1 - Basis for filing.

- Check the box that best describes your filing category.
 - -- I am filing for U nonimmigrant status for the first time. I have not previously filed for such status. Check Box A if you are the principal applicant and you meet all the requirements listed under "When Should I Use Form I-918?" on Page 1 of these instructions.
 - -- I have filed a Form I-918 requesting U-1 nonimmigrant status and that application is still pending. Check Box B if this statement applies to you.
 - -- I have been approved for U-1 nonimmigrant status. Check Box C if this statement applies to you.

Part 2 - Filing on behalf of family members.

Complete this question to indicate whether you are applying for one or more qualifying family members at this time. See **Section B** below for information on completing an application on behalf of your qualifying family member.

- **Part 3 Information about you.** (Person filing this application as a victim of qualifying criminal activity.)
- Family Name (Last name) Give your legal name. If you have two last names, include both and use a hyphen (-) between the names, if appropriate.
- **Given Name** (First name) Give your full first name, do not use "nicknames." (Example: If your name is Albert, do not use Al.)
- Other Names Used Provide all the names you have used, including maiden name if applicable, married names, nicknames, etc.
- Home Address Give your physical street address. This must include a street number and name or a rural route number. Do not put a post office box (P.O. Box) number here.
- Safe Mailing Address Give your mailing address, if different from your home address. If you do not feel secure in receiving correspondence regarding this application at your home address, provide a "safe mailing address" in this space. This address may be a post office box, the address of a friend, your attorney, a community based organization that is helping you, or any other address where you can safely and punctually receive mail.
- Home Telephone # Give the phone number with area code. If you live outside the United States, give the country and city code.
- Safe Daytime Telephone # If you do not feel secure in receiving telephone calls regarding this application at your home telephone number, provide a "safe telephone number" in this space. This number may be for a friend, your attorney, a community-based organization that is helping you, or any other number where you can safely and punctually receive a call or a message.
- E-mail address If you do not have an email address, write "None."
- A # This is your USCIS (former INS) file number. If you do not have an A number or do not know it, leave this blank.
- U.S. Social Security # If you do not have a Social Security number, leave this blank.
- Gender and Marital Status Check the appropriate box for each.

- **Date of Birth** Use eight numbers to show your date of birth (example: May 1, 1979, should be written 05/01/1979).
- **Country of Birth** Give the name of the country where you were born. Include the city, state or province, and country.
- **Country of Citizenship** Give the name of the country where you are a citizen. This is not necessarily the country where you were born.
- **Passport** # Give the number of the passport used to enter the United States, if applicable.
- Place of Issuance Give the location where your passport was issued.
- **Date of Issue** Give the date when your passport was issued.
- Place of Last Entry Into the U.S. Give the place where you last entered the United States, regardless of whether that entry was legal or illegal.
- Date of Last Entry Into the U.S. Give the date you last entered the United States, regardless of whether that entry was legal or illegal.
- Form I-94, Arrival/Departure Document, # If you are physically present in the United States, give the number on Form I-94 issued at the time of entry.
- **Current Immigration Status** Give your current status, regardless of how you entered the United States (visitor, student, entry without inspection, etc.)

Part 4 - Additional information.

• You must answer each question. If you answer "Yes" to any of the questions, explain on a separate sheet(s) of paper.

Part 5 - Processing information.

• You must answer each question. If you answer "Yes" to any of the questions, explain on a separate sheet(s) of paper.

Part 6 - Information about spouse and/or children.

• Even if you are not applying to bring your family member to the United States, you must provide the requested information about your spouse and children, if any.

Part 7 - Attestation, release and signature.

• You, the applicant, must sign and date the form. If you do not sign the form, the application will be returned as incomplete.

Part 8 - Signature of person preparing form, if other than applicant.

• If you, the applicant, did not fill out the Form I-918, the preparer must also sign, date and give his or her address.

B. Completing Form I-918, Supplement A Application for Qualifying Family Member of U-1 Recipient.

If you are filing for an qualifying family member, you must complete a Form I-918, Supplement A, Application for Immediate Family Member of U-1 Recipient. A Form I-918, Supplement B, U Nonimmigrant Status Certification, completed and signed by a certifying official, must also be submitted. Both forms must be submitted for each family member for whom you are filing.

A Form I-918, Supplement A, may be filed concurrently with the principal applicant's initial Form I-918 or at any time thereafter. However, any Form I-918, Supplement A, submitted subsequently must be accompanied by a new Form I-918 with the appropriate boxes checked in **Part 1**. An **original signature of the principal applicant** must be on the new Form I-918 and it must be submitted with the appropriate fee. Evidence submitted with the original application, however, need not be resubmitted.

Part 1 - Family member(s) relationship to you (the principal).

• Check the appropriate box.

Part 2 - Information about you.

- Family Name (Last name) Give your legal name. If you have two last names, include both and use a hyphen (-) between the names, if appropriate.
- Given Name (First name) Give your full first name, do not use "nicknames." (Example: If your name is Albert, do not use Al.)

- **Date of Birth** Use eight numbers to show your date of birth (example: May 1, 1979, should be written 05/01/1979).
- A # This is your USCIS (former INS) file number.
- Status of your Form I-918, Application for U Nonimmigrant Status - Check the appropriate box.

Part 3 - Information about your qualifying family member (the derivitave).

- Family Name (Last name) Give his or her legal name. If he or she has two last names, include both and use a hyphen (-) between the names, if appropriate.
- Given Name (First name) Give your full first name, do not use "nicknames." (Example: If your name is Albert, do not use Al.)
- Other Names Used Provide all the names he or she has used, including maiden name, if applicable, married names, nicknames, etc.
- **Date of Birth** Use eight numbers to show his or her date of birth (example: May 1, 1979, should be written 05/01/1979).
- **Country of Birth** Give the name of the country where he or she was born. Include the city, state or province, and country.
- **Country of Citizenship** Give the name of the country where he or she is a citizen. This is not necessarily the country where he or she was born.
- Intended Address in the United States Give his or her intended physical street address. This must include a street number and name or a rural route number. Do not put a post office box (P.O. Box) number here.
- Safe Mailing Address Give his or her mailing address, if different from his or her intended home address. If he or she does not feel secure in receiving correspondence regarding this application at his or her home address, provide a "safe mailing address" in this space. This address may be a post office box, the address of a friend, your/his or her attorney, a community based organization, or any other address where he or she can safely and punctually receive mail.
- **A** # This is his or her USCIS (former INS) file number. If he or she does not have an A number or you do not know it leave this blank.

- U.S. Social Security # If he or she does not have a U.S. Social Security number, leave this blank.
- Form I-94, Arrival/Departure Document # If physically present in the United States, give the number on I-94 issued at the time of entry.
- Home Telephone # Give the telephone number with area code where he or she lives and can be reached during the day.
- Safe Daytime Telephone # If he or she does not feel secure receiving telephone calls regarding this application at his or her home, provide a "safe telephone number" in this space. This number may be for a friend, his or her attorney, a community-based organization, or any other number where he or she can safely and punctually receive a call or a message.
- Gender and Marital Status Check the appropriate box for each.

Part 4 - Additional information about your qualifying family member.

- Numbers 1 through 7 Give all the requested information.
- Numbers 8 through 26 A response must be given for each question.

Part 5 - Attestation, release and signature.

- You, the applicant, must sign and date the form. If you do not sign the form, your application will be returned as incomplete.
- If the family member for whom you are filing is in the United States, he or she must sign and date the form. If her or she does not sign or date the form, the Form I-918, Supplement A, will be returned as incomplete.

Part 6 - Signature of person preparing form, if other than applicant.

• If you, the applicant, did not fill out the Form I-918, Supplement A, the preparer must also sign, date and give his or her address.

C. Completing Form I-918, Supplement B U Nonimmigrant Status Certificaton

A Form I-918, Supplement B, U Nonimmigrant Status Certification, must be filed concurrently with your (the principal applicant) initial Form I-918. This certification is required; if you fail to submit a properly completed certification with your Form I-918, the application will be returned to you as incomplete.

This supplement must be completed by the **certifying official of the agency** conducting an investigation or prosecution of the qualifying criminal activity of which you are a victim. It must have been signed within the six months immediately preceding the submission of the application package and the signature on the Form I-918, Supplement B, must be original. The supplement will contain information regarding your helpfulness to the investigation or prosecution of the qualifying criminal activity of which you are a victim.

If you are filing an application for derivative status on behalf of your qualifying family member(s) (using Form I-918, Supplement A), a separate **copy** of a U Nonimmigrant Status Certification (Form I-918, Supplement B) must be submitted for each qualifying family member. The certification will contain information regarding whether an investigation or prosecution would be harmed without the assistance of your qualifying family member.

Step 3. Submit Your Application.

Your must include the following items:

1. Your signed and completed Form I-918.

2. Filing fee. The minimum base fee for filing a Form I-918 is \$270.00. In addition to this fee, you must pay an additional \$120.00 for each eligible family member included on the application, up to \$540.00. (Example: If you were filing for yourself and your spouse, you would pay \$390.00. If you were also applying for your four children, you would pay a total of \$540.00.)

You and your qualifying family members who are between the ages of 14 and 79 must also pay an additional fee of **\$70.00** each for biometric services. This fee may not be waived. After you submit this application, USCIS will notify you about when and where to go for the biometric services.

The fee must be submitted in the exact amount. It cannot be refunded. **Do not mail cash.** All checks and money orders must be drawn on a bank or other financial institution located in the United States and must be payable in United States currency. The check or money order should be made payable to the **Department of Homeland Security**, unless:

- A. If you live in Guam, make your check or money order payable to the "Treasurer, Guam."
- **B.** If you live in the U.S. Virgin Islands, make your check or money order payable to the "Commissioner of Finance of the Virgin Islands."

Checks are accepted subject to collection. An uncollected check will render the application and any document issued 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 making out your check or money order, spell out Department of Homeland Security. Do not use the initials "USDHS" or "DHS."

How to Check If the Fee Is Correct.

The fee on this form is current as of the edition date appearing in the lower right corner of this page. However, because USCIS forms change periodically, you can verify if the fee is correct by following one of the steps below:

- -- Visit our website at www.uscis.gov and scroll down to "Forms and E-Filing" to check the appropriate fee, or
- -- Review the Fee Schedule included in your form package, if you called us to request the form, or
- -- Telephone our National Customer Service Center at **1-800-375-5283** and ask for the fee information.

3. Evidence to Support Application for U Nonimmigrant Status.

Personal Statement. You **must** provide a personal narrative statement. This statement should describe the qualifying criminal activity of which you were a victim and must include the following information:

- -- The nature of the criminal activity;
- -- When the criminal activity occurred;
- -- Who was responsible;
- -- The events surrounding the criminal activity;

- -- How the criminal activity came to be investigated or prosecuted; and
- -- What substantial physical and/or mental abuse you suffered as a result of having been the victim of the criminal activity.

Certification. You must submit a Form I-918,

Supplement B, U Nonimmigrant Status Certification with your application. This certification will be given significant weight as evidence demonstrating that you are a victim; that you possess information about the criminal activity; that the criminal activity violated the laws of the United States or occurred in the United States (including Indian country and military installations) or the territories and possessions of the United States; and that you are likely to be, are being, or have been helpful in the investigation or prosecution of the qualifying criminal activity of which you were a victim. You should also provide any additional relevant evidence to help meet these eligibility requirements.

Evidence You Are the Victim of Qualifying Criminal

Activity. You should include with your application any additional evidence establishing you were a victim of qualifying criminal activity. A non-exhaustive list of the types of evidence you may wish to submit includes, but is not limited to:

- -- Trial transcripts;
- -- Court documents;
- -- Police reports;
- -- News articles;
- -- Affidavits;
- -- Orders of protection.

Evidence of Substantial Physical or Mental Abuse.

You must present credible evidence that demonstrates you suffered substantial physical or mental abuse as a result of having been a victim of qualifying criminal activity.

The evidence must show the nature and severity of the abuse you suffered. Factors USCIS will consider include the nature of the damage you suffered, severity of the perpetrator's conduct, severity of the harm you suffered, the duration of the harm (i.e. was it permanent or lasting for an extended period of time), duration of the infliction of the harm, and the extent to which there is permanent or serious harm to your appearance, health, or physical or mental soundness.

No single factor is a prerequisite to establish that the abuse suffered was substantial, nor does the existence of one or more of the factors automatically create a presumption that the abuse was substantial. If the criminal activity caused the aggravation of a pre-existing physical or mental injury, that aggravation may be considered in evaluating whether the harm constitutes substantial physical or mental abuse. If the criminal activity involved a series of acts or occurred repeatedly over a period of time, please document the pattern of abuse. USCIS will consider the abuse in its totality -- a series of acts taken together may be considered to have caused substantial physical or mental abuse even where no single act alone rises to that level.

You are encouraged to provide and document all credible evidence, particularly when documenting a pattern of abuse. A non-exhaustive list of suggested forms of evidence includes, but is not limited to:

- Reports and/or affidavits from judges and other court officials, medical personnel, school officials, clergy, social workers and other social service personnel;
- -- Orders of protection and related legal documents;
- -- Photos of your visible injuries supported by affidavits;
- Affidavits from witnesses, acquaintances or family members who have personal knowledge of the facts regarding the criminal activity.

General Instructions. Attach copies, showing the front and back of the documents you are submitting to support your application. One document may be used to demonstrate more than one element of your claim. **Do not send original documents unless instructed to do so.**

4. Form I-918, Supplement A, and evidence to establish derivative U nonimmigrant status.

You must include:

- A completed Form I-918, Supplement A, Application for Immediate Family Member of U-1 Recipient, for each qualifying family member you want included on your application.
- Documentation establishing that your family member will suffer extreme hardship if not allowed to remain in or join you in the United States.

• Credible documentation of the claimed relationship. Documents acceptable for this purpose are as follows:

If you are filing for your:

-- Husband or Wife - Submit a copy of your marriage certificate issued by a civil authority.

If either you or your spouse were married before, you must submit documents to show all previous marriages were legally terminated. (Example: a divorce decree or death certificate.)

- -- Child and you are the father Submit a copy of the child's birth certificate issued by a civil authority showing both parents' names. If the child was born out of wedlock give proof that a parent/child relationship exists or existed. (Example: the child's birth certificate showing your name and evidence that you have financially supported the child. In some cases, a blood test may be necessary.)
- -- Child and you are the mother Submit a copy of the child's birth certificate issued by a civil authority showing both parents' names.
- -- Child and you are the stepparent Submit a copy of the child's birth certificate issued by a civil authority showing both parents' names and a marriage certificate issued by a civil authority to you and the child's parent that establishes the step relationship.
- -- **Your adopted child** Submit a certified copy of the adoption decree and, if you obtained custody of the child before the adoption became final, the legal custody decree, both of which were issued by a civil authority. You must also submit a statement showing the dates and places where you have lived with your adopted child.
- -- Your mother Submit a copy of your birth certificate issued by a civil authority, showing your mother's name.
- Your father Submit a copy of your birth certificate showing both of your parents' names and a copy of your parents' marriage certificate. Both documents must have been issued by a civil authority. If you were born out of wedlock, give proof that a parent/child relationship exists or existed. (Example: Evidence that your father financially supported you.)

- -- Your stepparent Submit a copy of your birth certificate showing the names of both of your natural parents and a copy of the marriage certificate for your parent and your stepparent that establishes the step relationship. Both documents must have been issued by a civil authority.
- -- **Your adoptive parent** Submit a certified copy of the adoption decree issued by a civil authority and a statement showing the dates and places where you have lived with your adoptive parents.

If a required document is not available, you may give USCIS the following instead. **NOTE:** USCIS may require a statement from the appropriate civil authority certifying that the necessary document is unavailable.

- **Church record:** A certificate under the seal where the baptism, dedication or comparable rite occurred within two months after the birth, showing the date and place of the child's birth, date of the religious ceremony and the names of the child's parents.
- **Census records:** State or federal census records showing the names place of birth and date of birth or age of the person listed.
- School record: A letter from the authority of the school attended (preferably the first school) showing dates of admission to the school, child's date and place of birth and the names and birthplaces of both parents if shown in the school records.
- Affidavits: Written statements sworn to or affirmed by two persons who were living at the time and who have personal knowledge of the event you are trying to prove. (Example: the date and place of birth, marriage, divorce or death.) The person making the affidavit need not be a citizen of the United States. Each affidavit should contain the following:
 - -- The relationship, if any, between you and the affiant;
 - -- Full information concerning the event; and
 - -- Complete details concerning how the person acquired knowledge of the event.

NOTE: In a case where you or your relative's name has changed from what is shown on the supporting document, submit the legal document authorizing such name change. (Example: marriage certificate, adoption decree, court order, etc.)

5. Form I-918, Supplement B, U Nonimmigrant Status Certification.

A Form I-918, Supplement B, U Nonimmigrant Status Certification, must be filed concurrently with the principal applicant's initial Form I-918. The certification is required. If it is not attached, your Form I-918 will be returned to you as incomplete.

If you are filing an application for derivative status on behalf of your qualifying family member(s) (using Form I-918, Supplement A), a U Nonimmigrant Status Certification (Form I-918, Supplement B) must be submitted for each family member.

- **6. Personal Interview.** USCIS, in its discretion, may require the applicant to appear at a USCIS office for an interview.
- **7. Translations.** If you submit a document in a foreign language, it must have a full English translation that the translator has certified as complete and correct. The translator must also certify that he or she is competent to translate the foreign language into English.
- 8. Biometric Service. Do not submit fingerprints with the application. USCIS will send you a notice in the mail informing you when and where to go to have your fingerprints taken. If necessary, USCIS may also take your photograph and signature as part of the biometric services.
- **9.** Submit your Form I-918. Mail your complete application package to the following address:

USCIS - Vermont Service Center 75 Lower Welden Street St. Albans, VT 05479-0001

Processing Information.

Our goal at USCIS is to process all applications fairly. The processing time will vary, depending on the specific circumstances of each case. We may reject an incomplete application. We may deny your application if you do not give us the requested information or do not go to a scheduled interview.

Address Changes. If you change your address, you must fill out and give us a Form AR-11, Alien's Change of Address Card, and mail it to the address listed on Form AR-11. Write "Form I-918" in the lower left hand corner of the address side of the AR-11.

USCIS Forms and Information. To request USCIS forms, call our toll-free forms line at **1-800-870-3676**. You may also get USCIS forms and information about immigration laws and regulations by calling our National Customer Service Center at **1-800-375-5283** or by visiting the USCIS internet website at **www.uscis.gov.**

Privacy Act Notice. USCIS will use the information on Form I-918 to determine eligibility for the requested immigration benefit. We may provide information on your application to other government agencies.

Paperwork Reduction Act Notice. You are not required to respond to this form unless it displays a currently valid OMB control number.

We try to create forms and instructions that are accurate, can be easily understood and that impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this is as follows: (1) 1 hour 15 minutes to learn about the law and form; (2) 1 hour 15 minutes to complete the form; (3) 2 hours 30 minutes to assemble and file the application; for a total estimated average of five hours per response.

If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you may write to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., Washington, D.C. 20529; OMB No. 1615-XXXX. **Do not mail your completed application to this address.**

Check List
Did you completely fill out and sign the form?
Did you attach all required evidence?
Did you attach a Form I-918, Supplement A, for qulaifying family member(s)?
Did you attach a Form I-918, Supplement B, from a certifying official for you and each qualifying family member for whom you are applying?
Did you include a \$70.00 biometric services fee for each person between the age of 14 and 79 included in the application, including yourself?
Did you include the filing fee of \$270.00 for the Form I-918 and an additional \$120.00 for each qualifying family member included in the application?
You should keep copies of your application and documents for your records.

Department of Homeland Security for production USMB No. 1615-XXXX: Expires 00/00/0000 I-918, Application for U

U.S. Citizenship and Immigration Services

Nonimmigrant Status

START HERE - Please type or print in black ink.		For USCIS Use Only
Part 1. Basis for filing.		Returned Receipt
 Check the reason(s) that best describes your A. I am filing for U-1 nonimmigrant s B. I have a U-1 application pending. C. I have received U-1 status. 	Date Date Resubmitted	
Part 2. Filing on behalf of family	y members.	Date
I am now applying for one or more qualifyin include Form I-918, Supplement A and Supp you are applying.) Yes No	blement B, for each family member for whom	Date Reloc Sent
Part 3. Information about you.	Person filing this application as a victim)	Date
Family Name Given	Name Middle Name	Date Reloc Rec'd
Other Names Use (Include maiden name/nic	kname)	
		Date
Home Address - Street Number and Name	Apt. #	Date
City State/Prov	ince Zip/Postal Code	U.S. Embassy/Consulate:
		Validity Dates
Safe Mailing Address (if other than above)	- Street Number and Name Apt. #	From:
		То:
C/O (in care of):		Remarks
City State/Prov	ince Zip/Postal Code	
Home Telephone #Safe Daytime(with area code)(with area code)		Conditional Approval
		Stamp #: Date
A # (if any) U.S. Social S	ecurity # (<i>if any</i>) Gender	Action Block
	Male Female	
Marital Status Single Married Divo		
Date of Birth (mm/dd/yyyy) Country of Bi	Irth	
Country of Citizenship	Passport #	
Place of Issuance	Date of Issue (<i>mm/dd/yyyy</i>)	To Be Completed by
		Attorney or Representative, if any.
Place of Last Entry	Date of Last Entry (<i>mm/dd/yyyy</i>)	Fill in box if G-28 is attached to represent the applicant.
I-94 # (Arrival/Departure Document)	Current Immigration Status	ATTY State License #

Part 4. Additional information.

Answers to the questions below require explanations and supporting documentation. Attach relevant documents in support of your claims that you are a victim of criminal activity listed in the Immigration and Nationality Act (INA), section 101(a)(15)(U). You must also attach a personal narrative statement describing the criminal activity of which you were the victim. If you are only applying for U derivative status for a qualifying family member(s) subsequent to your (the principal applicant) initial filing, evidence supporting the original application is not required to be submitted with the new Form I-918.

Attach additional sheets of paper as needed. Write your name and Alien Registration Number (A #), if any, at the top of each sheet and indicate the number of the item that refers to your answer. Include the Part and letter or number relating to the additional information you provided (example: Part 2, Z).

Check either "Yes" or "No" as appropriate to each of the following questions.

1.	I am a victim of criminal activity listed in the INA at section 101(a)(15)(U).	Yes	🗌 No
2.	I have suffered substantial physical or mental abuse as a result of having been a victim of this criminal activity.	Yes	🗌 No
3.	I possess information concerning the criminal activity of which I was a victim.	Yes	🗌 No
4.	I am submitting a certification from a certifying official on Form I-918 Supplement B, U Nonimmigrant Status Certification.	Yes	🗌 No
5.	The crime of which I am a victim occurred in the United States or violated the laws of the United States.	Yes	🗌 No
6.	I am under the age of 16 years.	Yes	🗌 No
7.	I want an Employment Authorization Document.	Yes	🗌 No
8.	Have you ever been in immigration proceedings? If "Yes," what type of proceedings? <i>(Check all that apply.)</i>	Yes	🗌 No
	Removal Date Exclusion Date Deportation Date Recission Date (mm/dd/yyyy) (mm/dd/yyyy) (mm/dd/yyyy) (mm/dd/yyyy)		ludicial Date (mm/dd/yyyy)

9. List each date, place of entry and status under which you entered the United States during the five years preceding the filing of this application.

Date of Entry (mm/dd/yyyy)	Place of Entry	Status at Entry

Part 4. Additional informa	tion. (Contr	inued.)				
10. If you are outside the United S	tates, give the U.S.	consulate or inspection	on facility you	want notified if this a	pplication is	approved.
Type of Office (Check one):	Consulate	Pre-flight ins	pection	Port of Entry		
Office Address (City)		<u>U.S.</u>	State or Foreig	n Country		
Safe Foreign Address Where Y	ou Want Notificati	on Sent - Street Num	ber and Name			Apt. #
City	State/Prov	vince	Country		Zip/Postal C	Code

Part 5. Processing information.

Please answer the following questions about yourself. For the purposes of this application, you must answer "Yes" to the following questions, if applicable, even if your records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer or attorney, told you that you no longer have a record. (Answering "Yes" does not necessarily mean that you will be denied U nonimmigrant status.)

1.	Have	you	EV	ER:
----	------	-----	----	-----

a.	Committed a crime or offense for which you have not been arrested?	Tes Yes	🗆 No
b.	Been arrested, cited or detained by any law enforcement officer (including DHS, former INS and military officers) for any reason?	Yes	No No
c.	Been charged with committing any crime or offense?	Yes	🗌 No
d.	Been convicted of a crime or offense (even if violation was subsequently expunged or pardoned)?	Yes	No No
e.	Been placed in an alternative sentencing or a rehabilitative program (for example: diversion, deferred prosecution, withheld adjudication, deferred adjudication)?	Yes	No No
f.	Received a suspended sentence, been placed on probation or been paroled?	\Box Yes	□ No
g.	Been in jail or prison?	\Box Yes	□ No
h.	Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action?	Yes	🗌 No
i.	Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States?	U Yes	🗌 No

If you answered "Yes" to any of the above questions, complete the following table. If you need more space, use a separate sheet of paper to give the same information.

Why were you arrested, cited, detained or charged?	Date of arrest, citation, detention, charge. (<i>mm/dd/yyyy</i>)	Where were you arrested, cited, detained or charged? <i>(City, State, Country)</i>	Outcome or disposition. (e.g., no charges filed, charges dismissed, jail, probation, etc.)

_					
Pa	art 5	. Pr	ocessing information. (Continued.)		
2.	gov	ernm	ever received public assistance in the United States from any source, including the U.S. ent or any State, county, city or other municipality (other than emergency medical), or are you likely to receive public assistance in the future?	Yes	No No
3.	Have you:				
	a.		aged in prostitution or procurement of prostitution or do you intend to engage in titution or procurement of prostitution?	Yes	🗌 No
	b.		engaged in any unlawful commercialized vice, including, but not limited to illegal bling?	Yes	No No
	c.		knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the ed States illegally?	Yes	🗌 No
4.			a ever committed, planned or prepared, participated in, threatened to, attempted to, or conspire ion for, solicited funds for any of the following:	ed to commit,	gathered
	a.	Higł	ijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle?	Yes	🗌 No
	b.	orde doin	ing or detaining, and threatening to kill, injure, or continue to detain, another individual in r to compel a third person (including a governmental organization) to do or abstain from g any act as an explicit or implicit condition for the release of the individual seized or		
			ined?	U Yes	∐ No
	c.		issination?	L Yes	∐ No
	d.		use of any firearm with intent to endanger, directly or indirectly, the safety of one or more vidual or to cause substantial damage to property?	Yes	□ No
	e.	othe	use of any biological agent, chemical agent, or nuclear weapon or device, or explosive, or r weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of or more individuals or to cause substantial damage to property?	U Yes	□ _{No}
5.			a ever been a member of, solicited money or members for, provided support for, attended milit a $2339D(c)(1)$ of title 18, United States Code) by or on behalf of, or been associated with an or		
	a.	Desi	gnated as a terrorist organization under section 219 of the Immigration and Nationality Act?	Yes	No No
	b.		other group of two or more individuals, whether organized or not, which has engaged in or a subgroup which has engaged in:	Tes Yes	No
		(1.)	Highjacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle?	\Box Yes	□ _{No}
		(2.)	Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the		
			individual seized or detained?	Yes	No
		(3.)	Assassination?	Yes	□ _{No}
		(4.)	The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property?	Yes	🗌 No

Pa	ort 5. Processing information. (Continued.)		
1 a	(Communed.)		
	(5.) The use of any biological agent, chemical agent, or nuclear weapon or device, or explosive or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property?	e, 🗌 Yes	🗌 No
	(6.) Soliciting money or members or otherwise providing material support to a terrorist organization?	Yes	🗌 No
6.	Do you intend to engage in the United States in:		
	a. Espionage?	Yes	🗌 No
	b. Any unlawful activity, or any activity the purpose of which is in opposition to, or the control or overthrow of the government of the United States?	Yes	🗌 No
	c. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information?	Yes	🗌 No
7.	Have you ever been or do you continue to be a member of the Communist or other totalitarian party, except when membership was involuntary?	Yes	🗌 No
8.	Have you, during the period of March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group or political opinion?	Yes	🗌 No
9.	Have you EVER participated (either directly or indirectly) in:		
	a. Genocide?	Yes	🗌 No
	b. Torture?	\Box Yes	□ _{No}
	c. The killing of any person?	\Box Yes	□ No
	d. A violation of another person's religious freedom?	U Yes	□ _{No}
	c. The persecution of any person because of race, religion, national origin, membership in a particular social group, or political opinion?	Yes	🗌 No
10.	Have you EVER been present when any person (other than you or a member of your family) was:		
	a. Deliberately killed?	Yes	🗌 No
	b. Subjected to severe physical pain or severe mental suffering?	Yes	No

a. b. 	ve you EVER ordered, incited, urged, or encouraged any person (<i>either directly or indirectly</i>) to: kill another person? subject another person to severe physical pain or severe mental suffering? Are removal, exclusion, rescission or deportation proceedings pending against you? Have removal, exclusion, rescission or deportation proceedings EVER been initiated against you? Have you EVER been removed, excluded or deported from the United States?	☐ Yes ☐ Yes ☐ Yes ☐ Yes ☐ Yes	□ No □ No □ No
b. c. d. e. f.	Have removal, exclusion, rescission or deportation proceedings EVER been initiated against you? Have you EVER been removed, excluded or deported from the United States?	☐ Yes	
d. e. f.			
	Have you EVER been ordered to be removed, excluded or deported from the United States? Have you EVER been denied a visa or denied admission to the United States? <i>(If a visa was denied, explain why on a seperate sheet of paper.)</i>	Yes Yes	
	Have you EVER been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time?	Yes	No
	e you under a final order or civil penality for violating section 274C (producing and/or using se documentation to unlawfully satisfy a requirement of the Immigration and Nationality Act)?	Yes	No No
	ve you ever, by fraud or willful misrepresentation of a material fact, sought to procure, or ocured, a visa or other documentation, for entry into the United States or any immigration benefit?	Yes	🗌 No
15. Ha	ve you ever left the United States to avoid being drafted into the U.S. Armed Forces?	U Yes	□ No
	ve you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign idence requirement and not yet complied with that requirement or obtained a waiver of such?	Yes	🗌 No
	ve you ever detained, retained, or withheld the custody of a child, having a lawful claim to ited States citizenship, outside the United States from a United States citizen granted custody?	Yes	No No
18. Do	you plan to practice polygamy in the United States?	Yes	🗌 No
Part 6	5. Information about spouse and/or children.		

Family Name	Given Name	Middle Name
Date of Birth (mm/dd/yyyy) Country of	Birth Relationship	Current Location

Part 6. Information about spouse an	d/or childr	cen. (Continued.)	
2. Children			
Family Name	Given Nam	ne	Middle Name
Date of Birth (<i>mm/dd/yyyy</i>) Country of B	irth	Relationship	Current Location
Family Name	Given Nam	ne	Middle Name
Date of Birth (<i>mm/dd/yyyy</i>) Country of B	irth	Relationship	Current Location
Family Name	Given Nam	ie	Middle Name
Date of Birth (<i>mm/dd/yyyy</i>) Country of B	irth	Relationship	Current Location
(If more	e space is need	ded, attach additional sheet(s)	of paper.)
Part 7. Attestation, release and sign	ature. (Read	d information on penalties in t	the instructions before completing this part.)
I certify, under penalty of perjury under the law is all true and correct. I certify also that I have Signature		any information that would at	
NOTE: If you do not completely fill out this for eligible for the benefit sought and this application.			ted in the instructions, you may not be found
Part 8. Signature of person preparir	ıg form, if	other than above. (Sign	below.)
I declare that I prepared this application at the knowledge. I have not knowingly withheld an			
Attorney or Representative: In the event of	a Request for	Evidence, may USCIS contac	t you by Fax or E-Mail? Yes No
Preparer's Signature		D:	ate (mm/dd/yyyy)
Preparer's Printed Name	Pre	parer's Firm Name (if applied	cable)
Preparer's Address			
reparer 5 Augress			
Daytime Phone Number (with area code)	Fax Number ((if any)	E-Mail Address <i>(if any</i>)
()	()	<i>v </i>	

ft not for production USOMB No. 1615-XXXX: Expires00/00/0000 I-918 Supplement A, Application for Qualifying Family Member of U-1 Recipient **r**8 **Department of Homeland Security**

U.S. Citizenship and Immigration Services

START HERE - Please type or print in black ink.	For USCIS Use Only			
(The recipient of the U-1 nonimmigrant classification is referred to as the "principal." His or her family member(s) is referred to as a "derivative." Form I-918, Supplement A is	Returned Receipt			
to be completed by the principal.)	Date			
Part 1. Family member(s) relationship to you (the principal).	Date			
The family member that I am filing for is my:	Resubmitted			
Spouse Child Parent	Date			
Part 2. Information about you.	Date			
Family Name Given Name Middle Name	Date			
	Reloc Sent			
Date of Birth $(mm/dd/yyyy)$ A # (if any)	Date			
Status of your Form I-918, Application for U Nonimmigrant Status.	Date Reloc Rec'd			
	Keloe Kee u			
Pending Approved	Date			
Part 3. Information about your family member (the derivative).	Date			
Family NameGiven NameMiddle Name	U.S. Embassy/Consulate:			
Other Names Used (Include maiden name/nickname)	Validity Dates			
	From:			
Date of Birth (mm/dd/yyyy) Country of Birth Country of Citizenship	То:			
	Remarks			
Residence or Intended Residence in the U.S. - Street Number and Name Apt. #				
City State/Province Zip/Postal Code				
	Conditional Approval			
Safe Mailing Address (if other than above) - Street Number and Name Apt. #	Stamp #: Date			
	Action Block			
C/O (in care of):				
City State/Province Zip/Postal Code				
A # (if any)U.S. Social Security # (if any)I-94 # (if any)				
Home Phone # (with area code) Safe Daytime Phone # (with area code)				
	To Be Completed by			
	Attorney or Representative, if any.			
Marital Status Gender	Fill in box if G-28 is attached to represent the applicant.			
Single Married Male				
Divorced Widowed Female	ATTY State License #			

Part 4. Additional information about your family member.

1.	Give the following information ab Place of Last Entry	out your	family member Date of Last Ei		he is currently		notion Status
				nuy		Current Immig	
	Passport #]	Place of Issuan	ice		Date of Issue (r	nm/dd/yyyy)
2.	Give the following information ab	Dout your	•		he has previous thorized Stay	sly traveled to the Ur	nited States.
	Place of Entry	(mm/dd/			(mm/dd/yyyy)	Immigration Status	
3.	If your relative was previously ma divorce decrees or death certificat			spouses a	and dates of ter	mination of marriage	. Documents such as
	Name of Former Spouse(s)		Date Mariage (mm/dd/yyyy)	Ended	Where and Ho	w Marriage Ended	
4		ad States				:1:4	if this application is
4.	If your relative is outside the Unit approved.	ed States	give the U.S. co	onsulate c	or inspection fac	chity you want notifi	ed if this application is
	Type of Office (<i>Check one</i>):	Consula	ate 🗌 F	-	inspection S. State or For	Port of En	try
	Office Address (City) U.S. State or Foreign Country						
	Foreign Address Where You Wan	t Notifica	tion Sent.				
5.	Has your family member ever bee		•	-		Y	Yes No
	If "Yes," what type of proceedings Removal Date Exc	s? (Check lusion Dat) eportation	Date	Recission Date	Judicial Date
		n/dd/yyyy)		ım/dd/yyyy		(mm/dd/yyyy)	(<i>mm/dd/yyyy</i>)
6.	Is your family member requesting submit Form I-765, Application for						Yes No
	NOTE: <i>If your family member is until he or she is lawfully admitted</i>						
7.	List your family member's spouse	and child	lren. (Attach aa	lditional s	sheet(s) of pape	er if necessary.)	
	Full Name		Date of Birth (mm/dd/yyyy)		Country of Bi	rth	Relationship
			(1111/00/9999)				

Part 4. Additional information about your family member. (Continued.)

Please answer the following questions about your family member. For the purposes of this application, you must answer "Yes" to the following questions, if applicable, even if the records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or attorney, told you that your family member no longer has a record. *(Answering "Yes" does not necessarily mean that your family member will be denied U nonimmigrant status.)*

8.	not	e family member for whom you are filing will suffer extreme hardship if he or she is removed or allowed to accompany you to the United States. <i>(If "Yes," attach an explanation and supporting numentation.)</i>	Yes	No No
9.	Has	s the family member for whom you are filing EVER:		
	a.	Committed a crime or offense for which he or she has not been arrested?	Yes	□ No
	b.	Been arrested, cited, or detained by any law enforcement officer (including DHS (former INS) and military officers) for any reason?	Yes	🗌 No
	c.	Been charged with committing any crime or offense?	\Box Yes	□ No
	d.	Been convicted of a crime or offense (even if violation was subsequently expunged or pardoned)?	Yes	No No
	e.	Been placed in an alternative sentencing or a rehabilitative program (for example: diversion, deferred prosecution, withheld adjudication, deferred adjudication)?	Yes	No No
	f.	Received a suspended sentence, been placed on probation, or been paroled?	Yes	🗌 No
	g.	Been in jail or prison?	Yes	□ No
	h.	Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action?	Yes	🗌 No
	i.	Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States?	Yes	□ No

If the answer is "Yes" to any of the above questions, complete the following table. If you need more space, use a separate sheet(s) of paper.

Why was the family member for whom you are filing arrested, cited, detained or charged?	Date of arrest, citation, detention, charge. (<i>mm/dd/yyyy)</i>	Where was the family member for whom you are filing arrested, cited, detained or charged? <i>(City, State, Country)</i>	

10. Has the family member for whom you are filing ever received public assistance in the United States from any source, including the U.S. government or any State, county, city or other municipality (other than emergency medical treatment), or is he or she likely to receive public assistance in the future?



Part 4. Additional information about your family member. (Continued.)

11.	Has the	family	member	for	whom	vou	are	filing:
T T 	i i uo uno	runniny	memoer	101	wnom	you	ui c	mining.

a.	Engaged in prostitution or procurement of prostitution or does he or she intend to engage in prostitution or procurement of prostitution?	Yes	🗌 No
b.	Ever engaged in any unlawful commercialized vice, including, but not limited to illegal gambling?	Yes	🗌 No
c.	Ever knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the United States illegally?	Yes	🗌 No

12. Has the family member for whom you are filing ever committed, planned or prepared, participated in, threatened to, attempted to, or conspired to commit, gathered information for, solicited funds for any of the following:

a.	Highjacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle?	Yes	□ No
b.	Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or		
	detained?	Yes	🗌 No
c.	Assassination?	Yes	□ _{No}
d.	The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property?	Yes	🗌 No
e.	The use of any biological agent, chemical agent, or nuclear weapon or device, or explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property?	U Yes	□ _{No}

13. Has the family member for whom you are filing ever been a member of, solicited money or members for, provided support for, attended military training (as defined in section 2339D(c)(1) of title 18, United States Code) by or on behalf of, or been associated with an organization that is:

a.	Designated as a terrorist organization under section 219 of the Immigration and Nationality Act?	Yes	l No
b.	Any other group of two or more individuals, whether organized or not, which has engaged in or has a subgroup which has engaged in:	Yes	No
	1. Highjacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle?	Yes	□ _{No}
	2. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained?	Yes	🗌 No
	3. Assassination?	U Yes	□ _{No}

Part 4.	Additional information about your family member.	(Continued.)
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	4. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property?	Yes	🗌 No
	5. The use of any biological agent, chemical agent, or nuclear weapon or device, or explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property?	Yes	🗌 No
	6. Soliciting money or members or otherwise providing material support to a terrorist organization?	Yes	🗌 No
14.	Does the family member for whom you are filing intend to engage in the United States in:		
	a. Espionage?	Yes	🗌 No
	b. Any unlawful activity, or any activity the purpose of which is in opposition to, or the control or overthrow of the government of the United States?	Yes	🗌 No
	c. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information?	Yes	No No
15.	Has the family member for whom you are filing ever been or does her or she continue to be a member of the Communist or other totalitarian party, except when membership was involuntary?	Yes	No No
16.	Has the family member for whom you are filing, during the period of March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group or political opinion?	Yes	🗌 No
17.	Has the family member for whom you are filing EVER participated (<i>either directly or indirectly</i>) in:		
	a. Genocide?	Yes	🗌 No
	b. Torture?	Yes	🗌 No
	c. The killing of any person?	U Yes	🗌 No
	d. A violation of another person's religious freedom?	Yes	🗌 No
	e. The persecution of any person because of race, religion, national origin, membership in a particular social group, or political opinion?	Yes	🗌 No

18. Has the family member for whom you are filing **EVER** been present when any person (other than that family member or a member of his or her family) was:

a.	Deliberately killed?	Yes	🗌 No
b.	Subjected to severe physical pain or severe mental suffering?	Yes	🗌 No

Part 4. Additional information about your family member. (Continued.)

19.	Has the family member for whom you are filing EVER ordered, incited, urged, or encouraged any person (<i>either directly or indirectly</i>) to:					
	a.	Kill another person?	Yes	🗌 No		
	b.	Subject another person to severe physical pain or severe mental suffering?	Yes	No No		
20.	a.	Are removal, exclusion, rescission or deportation proceedings pending against the family member for whom you are filing?	Yes	🗌 No		
	b.	Have removal, exclusion, rescission or deportation proceedings EVER been initiated against the family member for whom you are filing?	Yes	No No		
	c.	Has the family member for whom you are filing EVER been removed, excluded or deported from the United States?	Yes	No No		
	d.	Has the family member for whom you are filing EVER been ordered to be removed, excluded or deported from the United States?	Yes	No No		
	e.	Has the family member for whom you are filing EVER been denied a visa or denied admission to the United States? (If a visa was denied, explain why on a seperate sheet of paper.)	Yes	🗌 No		
	f.	Has the family member for whom you are filing EVER been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time?	Yes	🗌 No		
	sec	he family member for whom you are filing under a final order or civil penality for violating tion 274C (producing and/or using false documentation to unlawfully satisfy a requirement of Immigration and Nationality Act)?	Yes	No No		
	mat	the family member for whom you are filing ever, by fraud or willful misrepresentation of a serial fact, sought to procure, or procured, a visa or other documentation, for entry into the ted States or any immigration benefit?	Yes	No		
23.		s the family member for whom you are filing ever left the United States to avoid being drafted to the U.S. Armed Forces?	Yes	🗌 No		
	was	the family member for whom you are filing ever been a J nonimmigrant exchange visitor who subject to the two-year foreign residence requirement and not yet complied with that uirement or obtained a waiver of such?	Yes	🗌 No		
	a cł	the family member for whom you are filing ever detained, retained, or withheld the custody of nild, having a lawful claim to United States citizenship, outside the United States from a United tes citizen granted custody?	Yes	No No		
26.	Do	es the family member for whom you are filing plan to practice polygamy in the United States?	The Yes	□ No		

Part 5. Attestation, release and signature. (Read information on penalties in the instructions before completing this part.)

I certify, under penalty of perjury under the laws of the United States of America, that the information provided with this application is all true and correct. I certify also that I have not withheld any information that would affect the outcome of this application.

Signature of Principal (you)

Date (mm/dd/yyyy)

Please Note: Your qualifying family member for whom you are filing must sign if he or she is present in the United States.

Signature of Qualifying Family Member if in the United States

Date (mm/dd/yyyy)

WARNING: Applicants who are in the United States illegally are subject to removal if their claims are not granted. Any information provided while completing this supplementary application may be used as a basis for the institution of, or as evidence in, removal proceedings even if the application is withdrawn.

Part 6. Signature of person preparing form, if other than above. (Sign below.)

I declare that I prepared this application at the request of the above person, and it is based on all information of which I have knowledge. I have not knowingly withheld any material information that would affect the outcome of this application.

Attorney or Representative:
In the event of a Request for Evidence, may USCIS contact you by Fax or E-Mail?
Yes
No

Preparer's Signature
Date (nm/dd/yyyy)

Preparer's Printed Name
Preparer's Firm Name (if applicable)

Preparer's Address

Daytime Phone Number (with area code)
Fax Number (if any)
E-Mail Address (if any)

Draft, not for production USMBNo. 1615-XXXX; Expires: 00/00/0000

Department of Homeland Security

U.S. Citizenship and Immigration Services

I-918, Supplement B, U Nonimmigrant Status Certification

Instructions

Please read these instructions carefully to properly complete the form. If you need more space to complete an answer, use a separate sheet(s) of paper. Write the victim's name and Alien Registration Number (A #), if any, at the top of each sheet(s) and indicate the number of the item that refers to your answer. Include the Part and letter or number relating to the additional information you provide (example: Part 2, Z.) NOTE: U.S. Citizenship and Immigration Services (USCIS) is comprised of offices of the former Immigration and Naturalization Service (INS).

Eligibility.

To be eligible for U nonimmigrant status, the alien must be a victim of qualifying criminal activity. The term "victim" generally means an alien who is directly acted upon or the direct subject of qualifying criminal activity.

In cases of murder and manslaughter, the spouse, unmarried child(ren) under 21 years of age, and if the victim is under 21 years of age, the parents and unmarried siblings under 21 years of age, shall be considered victims of qualifying criminal activity resulting in death. For purposes of determining eligibility under this definition, USCIS will consider the age of the victim at the time the qualifying criminal activity occurred.

A victim of witness tampering, obstruction of justice or perjury is one who is directly adversely affected by an abuser or victimizer who engages in this activity as a means to exercise his or her control over or to further violence against the victim.

When the applicant has suffered a significant injury through substantial nexus or proximity to the criminal activity, USCIS may exercise discretion to consider the applicant a victim for purpose of this regulation.

A person who is culpable for the qualifying criminal activity being investigated or prosecuted is excluded from being recognized as a victim.

A victim of qualifying criminal activity must provide evidence that he or she (or in the case of an alien under the age of 16 years, the parent, guardian, or next friend of the alien) has been, is being, or is likely to be helpful to a certifying official in the investigation or prosecution of the qualifying criminal activity as listed in **Part 3** of this form. Being "helpful" means assisting law enforcement authorities in the investigation or prosecution of the qualifying criminal activity of which he or she is a victim. If you, the certifying official, determine that the applicant is, has been, or is likely to be helpful in your investigation or prosecution, you may complete this supplement form. The **applicant** must then submit the supplement to USCIS with his or her application for U nonimmigrant status.

NOTE: An agency's decision to provide a certification is entirely discretionary; the agency is under no legal oblication to complete a Form I-918, Supplement B, for any particular alien.

Complete Form I-918, Supplement B.

Use **black ink**. Type or print clearly using capital letters. If an item does not apply, write "N/A." If the answer is none, write "NONE."

This form is divided into **Parts 1** through **7**. The following information should help you fill out the form.

Part 1 - Victim information.

- Family Name (Last Name) Give victim's legal name.
- **Given Name** (First name) Give victim's full first name, do not use "nicknames." (Example: If victim's name is Albert, do not use Al.)
- Other Names Used Provide all the names the victim has used that you are aware of, including maiden name if applicable, married names, nicknames, etc.
- **Date of Birth** Use eight numbers to show his or her date of birth (example: May 1, 1979, should be written 05/01/1979).
- **Gender** Check the appropriate box.

Part 2 - Agency information.

• Name of certifying agency - The certifying agency must be a Federal, State, or local law enforcement agency, prosecutor, or authority, or Federal or State judge, that has responsibility for the investigation or prosecution, conviction or sentencing of the qualifying criminal activity of which the applicant was a victim.

This includes traditional law enforcement branches within the criminal justice system, and other agencies that have criminal investigative jurisdiction in their respective areas of expertise, such as the Child Protective Services, Equal Employment Opportunity Commission, and Department of Labor.

- Name of certifying official A certifying official is the head of the certifying agency or any person who has been specifically designated by the head of the certifying agency to issue a U Nonimmigrant Status Certification on behalf of the agency. If the certification is not signed by the head of the certifying agency, please attach evidence of the agency head's written designation of the certifying official for this specific purpose.
- Agency address Give the agency's mailing address.

Part 3 - Criminal acts.

- Check all of the crimes of which the applicant is a victim/witness that your agency is investigating, prosecuting, or sentencing If the crime(s) of which the applicant is a victim is not listed, please list the crime(s) and provide a written explanation regarding how it is similar to one of the listed crimes. Similar activity is a criminal offense in which the nature or elements of the offense are substantially similar to one or more of the listed crimes.
- Indicate whether the qualifying criminal activity occurred within the United States - Qualifying criminal activity of which the applicant is a victim did not have to occur in the United States. Qualifying criminal activity that occurred outside the United States must violate a Federal extraterritorial jurisdiction statute. There is no requirement that a prosecution actually occur. Provide the statutory citation for the extraterritorial jurisdiction.

Part 4 - Helpfulness of the victim/witness.

• Indicate whether the victim possesses information about the crime(s). An applicant must be in possession of information about the qualifying criminal activity of which he or she is a victim. An applicant is considered to possess information concerning qualifying criminal activity of which he or she is a victim if he or she has actual knowledge of details concerning that criminal activity that would assist in the investigation or prosecution of the criminal activity. Victims with information about a cime of which they are not the victim will not be considered to possess information concerning qualifying criminal activities.

When the victim is under 16 years of age, he or she is not required to personally possess information regarding the qualifying criminal activity. The parent, guardian, or "next friend" of the minor applicant may provide that information. "Next friend" is a person who appears in a lawsuit to act for the benefit of an alien victim. The "next friend" is not a party to the legal proceeding and is not appointed as a guardian.

• Provide an explanation of the victim's helpfulness to the investigation or prosecution of the criminal activity. A victim must provide evidence to USCIS that he or she (or in the case of an alien child under the age of 16, the parent, guardian, or next friend of the alien) has been, is being, or is likely to be helpful to a certifying law enforcement official in the investigation or prosecution of the qualifying criminal activity.

Being "helpful" means assisting authorities in the investigation or prosecution of the qualifying criminal activity of which he or she is a victim. The victim should possess specific facts regarding the criminal activity leading a certifying official to determine that the victim is, has been, or is likely to provide assistance to the investigation or prosecution of the criminal activity leading a certifying official to determine that the victim is, has been, or is likely to provide assistance to the investigation or prosecution of the criminal activity. has been, or is likely to provide assistance to the investigation or prosecution of the criminal activity. This requires an ongoing responsibility on the part of the victim to be helpful, assuming there is an ongoing need for the victim's assistance. Simply reporting the crime, but being unwilling to allow an investigation to move forward does not constitute helpfulness.

You, the certifying official, will make the initial determination as to the helpfulness of the applicant. Your certification will not be considered presumptive evidence of helpfulness. USCIS will give the certification significant weight but will look at the totality of the circumstances surrounding the alien's involvement with your agency and all other information known to USCIS in determining whether the alien meets the elements of eligibility.

Part 5 - Certification for family members.

In order for the principal applicant's family member(s) to be eligible for derivative U nonimmigrant status, the applicant must submit a certification completed by a certifying official that the investigation or prosecution of the criminal activity of which the principal applicant is a victim would be harmed without the assistance of the spouse, the unmarried child under the age of 21or, in the case of a victim under the age of 21, the parent of the alien. Please indicate whether the investigation or prosecution would be harmed without the assistance of the victim's qualifying family members.

Part 6 - Family members implicated in criminal activity.

• List whether any of the victim's family members are believed to have been involved in the criminal activity of which he or she is a victim. USCIS will not grant an immigration benefit to a family member who has participated in the victimization of the principal applicant.

Part 7 - Certification.

• Please read the certification block carefully. **NOTE:** If the victim unreasonably refuses to assist in the investigation or prosecution of the qualifying criminal activity of which he or she is a victim, even after this form is submitted to USCIS, you **must** notify USCIS by sending a written statement to: USCIS - Vermont Service Center, 75 Lower Welden Street, St. Albans, VT 05479-0001. Please include the victim's name, date of birth, and A-number (if available) on all correspondence.

Draft, not for production USMB No. 1615-XXXX: Expires 00/00/0000 Department of Homeland Security

U.S. Citizenship and Immigration Services

U Nonimmigrant Status Certification

START HERE - Please type or print in black ink.	For USCIS Use Only		
Part 1. Victim information.	Returned	Receipt	
Family Name Given Name Middle Name	Date		
Other Names Use (Include maiden name/nickname)	Date Resubmitted		
Date of Birth (mm/dd/yyyy) Gender	Date		
Part 2. Agency information.	Date Reloc Sent		
Name of Certifying Agency	Date		
Name of Certifying Official Title and Division/Office of Certifying Official Image: Contract of Certifying Official Image: Contract of Certifying Official	Date Reloc Rec'd		
Name of Head of Certifying Agency	Date		
Agency Address - Street Number and Name Suite # City State/Province Zip/Postal Code	Date Remarks		
Daytime Phone # (with area code and/or extension) Fax # (with area code)			
Agency Type Federal State Local			
Case Status On-going Completed Other			
Certifying Agency Category Judge Law Enforcement Prosecutor Other			
Case Number FBI # or SID # (if applicable)			

Part 3. Criminal acts.

1. The applicant is a victim of criminal activity involving or similar to violations of one of the following Federal, State or local criminal offenses. *(Check all that apply.)*

Abduction	Female Genital Mutilation	Obstruction of Justice	Slave Trade
Abusive Sexual Contact	Hostage	Peonage	Torture
Blackmail	Incest	Perjury	Trafficking
Domestic Violence	Involuntary Servitude	Prostitution	Unlawful Criminal Restraint
Extortion	Kidnapping	Rape	Witness Tampering
False Imprisonment	Manslaughter	Sexual Assault	Related Crime(s)
Felonious Assault	Murder	Sexual Exploitation	Other: (If more space needed,
Atempt to commit any of the named crimes	Conspiracy to commit any of the named crimes	Solicitation to commit any of the named crimes	attach seperate sheet of paper.)

Form I-918, Supplement B (01/10/06)

P۶	art 3. Criminal acts. (Continued.)						
2.	Provide the date(s) on which the criminal activity occurred. Date (mm/dd/yyyy) Date (mm/dd/yyyy) Date (mm/dd/yyyy)	Date (mm/dd/)	<i>vyyy)</i>				
3.	List the statutory citation(s) for the criminal activity being investigated or prosecuted.						
4.	Did the criminal activity occur in the United States, including Indian country and military instal or the territories or possessions of the United States?	lations, 🗌 Ye	es 🗌 No				
	 a. Did the criminal activity violate a Federal extraterritorial jurisdiction statute? b. If "Yes," provide the statutory citation providing the authority for extraterritorial jurisdiction. 						
c. Where did the criminal activity occur?							
 Briefly describe the criminal activity being investigated and/or prosecuted and the involvement of the individual named in Attach copies of all relevant reports and findings. 							
 Provide a description of any known or documented injury to the victim. Attach copies of all relevant reports and findi 							
Pa	art 4. Helpfulness of the victim.						
Th	e victim (or parent, guardian or next friend, if the victim is under the age of 16):						
1.	Possesses information concerning the criminal activity listed in Part 3 .	Yes	No No				
2.	Has been, is being or is likely to be helpful in the investigation and/or prosecution of the criminal activity detailed above. (Attach an explanation briefly detailing the assistance the victim has provided.)	Yes	🗌 No				
3.	Has not been requested to provide further assistance in the investigation and/or presecution. <i>(Example: prosecution is barred by the statute of limitation.) (Attach an explanation.)</i>	Yes	🗌 No				
4.	Has unreasonably refused to provide assistance in a criminal investigation and/or prosecution						

of the crime detailed above. (Attach an explanation.)

No

Yes

Pa	rt 4. Helpfulness of the victim.	(Continued.)					
5.	5. Other, please specify.						
Pa	rt 5. Certification for family mem	bers.					
In order for a U nonimmigrant status applicant to obtain immigration benefits for qualifying family members, a certifying official must indicate that the investigation or prosecution of the criminal activity listed in Part 3 , Pages 1-2 of this supplement form, would be harmed without the assistance of the spouse, the child, or in the case of a child under the age of 21, the parent of the victim.							
1.	. Will the investigation or prosecution of the criminal activity listed in Part 3 be harmed without the assistance of the family members named in Number 2 below?						
2.	List each family member.						
	Full Name		Relation	ship	Date of Birth (mm/dd/yyyy)		
Pa	rt 6. Family members implicated	in criminal a	activity.				
1.	 Are any of the victim's family members believed to have been involved in the criminal activity of which he or she is a victim? Yes 						
2.	If "Yes," list relative(s) and criminal involv	vement. (Attach	n extra rep	orts or extra sheet(s) of pa	per if necessary.)		
	Full Name	Relationship		Involvement			
Part 7. Certification.							
I am the head of the agency listed in Part 2 or I am the person in the agency who has been specifically designated by the head of the							
agency to issue U nonimmigrant status certification on behalf of the agency. Based upon investigation of the facts, I certify, under							
	penalty of perjury, that the individual noted in Part 1 is or has been a victim of one or more of the crimes listed in Part 3 . I certify that the above information is true and correct to the best of my knowledge, and that I have made, and will make no promises regarding						
the	the above victim's ability to obtain a visa from the U.S. Citizenship and Immigration Services, based upon this certification. I further certify that if the victim unreasonably refuses to assist in the investigation or prosecution of the qualifying criminal activity of which						
	he/she is a victim, I will notify USCIS.						

Signature of Certifying Official Identified in Part 2.

Date (mm/dd/yyyy)

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