AFFIDAVIT REQUESTING A FEE WAIVER

I, _____ , Alien #_____ am
requesting a fee waiver of the filing and/or biometrics fees because I cannot afford to pay the fees.
In support of this request, I declare and state the following:

1. I am requesting a fee waiver because I cannot afford to pay the following required fees:

    _____ Form I-821 (Application for TPS)

    _____ Form I-765 (Application for Employment Authorization

    _____ Biometrics Fee

2. I am a citizen and/or national of Haiti. I have been living in the U.S. since before January 12, 2010, and I continue to reside in the U.S. I believe that I am eligible for Temporary Protected Status.

3. Information about my household and family members:

Name of dependent	Relationship	Address	Age

4. My earnings (and those of my dependents) for the last three months has been $_____ ,
    which comes to $_____ per month.

Source	$ Amount per month
Wages/salary	$
SSI	$
TANF	$
Food Programs	$
Specify other benefits (e.g., housing, etc.)	$
Other income (as specified)	$
TOTAL $	

5. Information about my assets (and those of my dependents):

My total assets (including those of my dependents, if applicable), are in the amount of $_____. Below is a list of all my assets and the value of each.	Amount
Cash	$
Checking/savings accounts	$
Real estate	$
Personal property (as specified)	$
Other assets (as specified)	$
TOTAL	$

5. My monthly expenses (and those of my dependents) for each of the last three months were as follows:

Expense	11/2009	12/2009	1/2010	Total
Rent/Mortgage				$
Food				$
Utilities				$
Transportation				$
Medical Expenses				$
Clothing				$
Laundry				$
Child Care				$
Other: specify				$

7. The filing fees for my registration for TPS is: $_____
   The filing fees for my dependents' registration for TPS are: $_____
   The total registration fee for myself and my family is: $_____

   This amount EXCEEDS the amount of income I have left over after paying my essential expenses. Pursuant to 8 C.F.R. § 244.20, I am eligible for a fee waiver

8. I also have the following humanitarian concerns or economic hardship that I would like you to consider. (Examples: you are over 65, you or your dependents are disabled, extraordinary debt, homelessness, etc.) _____

_____

_____

_____

_____

_____

For all of the above reasons, I cannot afford to pay the fees associated with my registration for TPS, but I believe that I am otherwise eligible for TPS and would very much like to apply. I respectfully request that these fees be waived.

I, _____, declare under penalty of perjury that the foregoing is true and correct.

_____   _____
Signature   Date

CERTIFICATE OF TRANSLATION

I, _____, hereby certify that I am fluent in English and Haitian Creole and/or French, and that I have translated the above affidavit to the applicant and that the applicant has affirmed that it is true and correct.

_____   _____
Translator's Signature   Date