



# ANNOTATED DACA APPLICATION PACKET

DECEMBER 2019

The following guide is for individuals whose DACA expired **less than a year ago** and are looking to file a “renewal” application in the coming months. This guide includes annotated forms I-821D, I-765, and I-765WS which form a renewal application packet. Please note that U.S. Citizenship & Immigration Services (USCIS) will only consider your application packet as complete if all three forms and a copy of your current work permit (EAD, front and back) is submitted.

If an individual’s DACA **expired more than a year ago** or was DACA terminated, they will need to file an application as a “renewal-initial.” This means that extra documentation will be needed in order for the application to be considered complete. That type of application packet is beyond the scope of this guide.

On January 2018 USCIS issued new guidance on renewing DACA, which can be located by going to:

<https://www.uscis.gov/humanitarian/deferred-action-childhood-arrivals-response-january-2018-preliminaryinjunction>.

USCIS will reject applications that is not filed using the current edition of the forms. Currently, USCIS is accepting the following editions for each form:

- I-821D form edition date 04/24/2019;
- I-765 form edition date 05/31/2018; and
- I-765WS form edition 05/31/2018.

New forms can be downloaded free of cost from the USCIS website at: <https://www.uscis.gov/i-821d>.

Applicants can visit the ILRC website at <https://www.ilrc.org/daca> for more information on the program changes and updates.





List your A#. It is the 9-digit number listed under the USCIS # on work permit. This number can also be found on the I-797 (Notice of Action) or DACA approval letter as an A#.

Fill out information accordingly. A best practice is to use your ID/driver license information.

**Part 1. Information About You** (For Initial and Renewal Requests) (continued)

**Other Information**

6. Alien Registration Number (A-Number) (if any)  
 ▶ A-
- U.S. Social Security Number (if any)  
 ▶
8. Date of Birth (mm/dd/yyyy) ▶
9. Gender  Male  Female
- 10.a. City/Town/Village of Birth
- 10.b. Country of Birth
11. Current Country of Residence
12. Country of Citizenship or Nationality
13. Marital Status  
 Married  Widowed  Single  Divorced

List real SSN that was given to you!

Should be USA

Usually is country of birth

Check appropriate box with respect to your legal marital status.

**Other Names Used** (If Applicable)

If you need additional space, use Part 8. Additional Information.

- 14.a. Family Name (Last Name)
- 14.b. Given Name (First Name)
- 14.c. Middle Name

List all other names used that are different from your legal name (i.e. driver's license, Social Security card, passports, etc.)

**Processing Information**

15. Ethnicity (Select **only one** box)  
 Hispanic or Latino  
 Not Hispanic or Latino
16. Race (Select **all applicable** boxes)  
 White  
 Asian  
 Black or African American  
 American Indian or Alaska Native  
 Native Hawaiian or Other Pacific Islander
17. Height Feet  Inches
18. Weight Pounds
19. Eye Color (Select **only one** box)  
 Black  Blue  Brown  
 Gray  Green  Hazel  
 Maroon  Pink  Unknown/Other
20. Hair Color (Select **only one** box)  
 Bald (No hair)  Black  Blond  
 Brown  Gray  Red  
 Sandy  White  Unknown/Other

**Part 2. Residence and Travel Information** (For Initial and Renewal Requests)

1. I have been continuously residing in the U.S. since at least June 15, 2007, up to the present time.  Yes  No

**NOTE:** If you departed the United States for some period of time before your 16th birthday and returned to the United States on or after your 16th birthday to begin continuous residence, and if this is an evidence that you established residence to 16 years of age as set forth in the i

**For Initial Requests:** List your current address of your knowledge, the addresses where you resided since you submitted your last application, and the date of your initial entry into the United States.

**For Renewal Requests:** List only the addresses where you resided since you submitted your last application, and the date of your last application approval.

If you require additional space, use Part 8. Additional Information.

In order to qualify for DACA, you must have been continuously residing in the U.S. since June 15, 2007. If the answer is "no," speak to a trusted legal service provider before submitting a renewal application.



**Part 2. Residence and Travel Information** (For Initial and Renewal Requests) (continued)

**Present Address**

2.a. Dates at this residence (mm/dd/yyyy)  
From ▶  To ▶ Present

2.b. Street Number and Name

2.c. Apt.  Ste.  Flr.

2.d. City or Town

2.e. State  2.f. ZIP Code

You only need to provide addresses since your previous DACA application. If you have moved since your last renewal, list those addresses, starting with your current address. If you cannot remember exact date, you can handwrite month/year (e.g. May/2016) or write "Approx. May 5, 2017."

dd/yyyy)  
To ▶

3.e. State  3.f. ZIP Code

**Address 2**

4.a. Dates at this residence (mm/dd/yyyy)  
From ▶  To ▶

4.b. Street Number and Name

4.c. Apt.  Ste.  Flr.

4.d. City or Town

4.e. State  4.f. ZIP Code

**Address 3**

5.a. Dates at this residence (mm/dd/yyyy)  
From ▶  To ▶

5.b. Street Number and Name

5.c. Apt.  Ste.  Flr.

5.d. City or Town

5.e. State  5.f. ZIP Code

**Travel Information**

**For Initial Requests:** List all of your absences from the United States since June 15, 2007.

**For Renewal Requests:** List only your absences from the United States since you submitted your last Form I-821D that was approved.

If you require additional space, use **Part 8. Additional Information**.

**Departure 1**

6.a. Departure Date (mm/dd/yyyy) ▶

6.b. Return Date (mm/dd/yyyy) ▶

6.c. Reason for Departure

**Departure 2**

7.a. Departure Date (mm/dd/yyyy) ▶

7.b. Return Date (mm/dd/yyyy) ▶

7.c. Reason for Departure

Mark "no" if you have not left on or after August 15, 2012. You can also mark "no" if the travel was with Advanced Parole. Note that if you traveled without Advance Parole since receiving DACA, then DACA is automatically terminated.

8. Have you left the United States without advance parole on or after August 15, 2012?  Yes  No

9.a. What country issued your last passport?

9.b. Passport Number

9.c. Passport Expiration Date (mm/dd/yyyy) ▶

Provide passport information if available, even if expired. Country issuing passport will be country of citizenship.

10. Border Crossing Card Number (if any)

**Part 3. For Initial Requests Only**

1. I initially arrived and established residence in the U.S.  Yes  No

2. Do you have any pending immigration cases (including but not limited to removal proceedings)?  Yes  No

3. Please provide details of any pending immigration cases (including but not limited to removal proceedings):

A RENEWAL APPLICANT CAN IGNORE PART 3 BECAUSE THIS IS ONLY FOR INITIALS!



**Part 3. For Initial Requests Only (continued)**

4. Immigration Status on June 15, 2012 (e.g., No Lawful Status, Status Expired, Parole Expired)
- 5.a.  Yes  No
- 5.b.  Yes  No
- 5.c. If you answered "Yes" to Item Number 5.a., provide the date your authorized stay expired, as shown on Form I-94, I-94W, or I-95 (if available). (mm/dd/yyyy) ▶

**A RENEWAL APPLICANT CAN IGNORE PART 3 BECAUSE THIS IS ONLY FOR INITIALS!**

**Education Information**

6. Indicate how you meet the education guideline (e.g., Graduated from high school, Received a general educational development (GED) certificate or equivalent state-authorized exam, Currently in school)
7. Name, City, and State of School Currently Attending or Where Education Received
8. Date of Graduation (e.g., Receipt of a Certificate of Completion, GED certificate, other equivalent state-authorized exam) or, if currently in school, date of last attendance. (mm/dd/yyyy) ▶

**Military Service Information**

9. Were you a member of the U.S. Armed Forces or U.S. Coast Guard?  Yes  No
- If you answered "Yes" to Item Number 9., you must provide responses to Item Numbers 9.a. - 9.d.
- 9.a. Military Branch
- 9.b. Service Start Date (mm/dd/yyyy) ▶
- 9.c. Discharge Date (mm/dd/yyyy) ▶
- 9.d. Type of Discharge

**Part 4. Criminal, National Security, and Public Safety Information (For Initial and Renewal Requests)**

If any of the following questions apply to you, use Part 8. Additional Information to describe the circumstances and include a full explanation.

1. Have you EVER been arrested for, convicted of a felony or misdemeanor handled in juvenile court, in the United States? (Include minor traffic violations unless drug-related.)
- If you answered "Yes," you must include a certified court disposition, arrest record, sentencing record, etc., for each disclosure is prohibited under state law.
2. Have you EVER been arrested for, convicted of a crime in any country other than the United States?

If you answered "Yes," you must include a certified court disposition, arrest record, charging document, sentencing record, etc., for each arrest.

3. Have you EVER engaged in, do you continue to engage in, or plan to engage in terrorist activities?  Yes  No
4. Are you NOW or have you EVER been a member of a gang?  Yes  No
5. Have you EVER engaged in, ordered, incited, assisted, or otherwise participated in any of the following:
- 5.a. Acts involving torture, genocide, or human trafficking?  Yes  No
- 5.b. Killing any person?  Yes  No
- 5.c. Severely injuring any person?  Yes  No
- 5.d. Any kind of sexual contact or relationship with a minor who was being forced or threatened?
6. Have you EVER recruited, enlisted, or conscripted any person to serve in or help an armed force while such person was under age 18?
7. Have you EVER used any person to part in hostilities, or to help or provide support in combat?

**If your answer is "Yes" to any of the following questions (1-7), speak to a trusted legal service provider before filling renewal!**

**These questions ask "if ever" so even if event was before previous renewal, you must still disclose. Any changes in answers should be discussed with legal service providers.**

**No need to resubmit criminal documents already given to USCIS. Indicate in Part 8 that USCIS already has criminal history documents and you previously disclosed them on prior applications. Consult an immigration attorney or accredited representative for any new incidents before filling.**



If no translator was used to prepare application, check this box.

If a translator was used to prepare application, check this box AND list translator's name.

IT IS VERY IMPORTANT FOR YOU TO SIGN AND DATE FOR THE RENEWAL TO BE PROCESSED.

Applicant's information goes here.

**Part 5. Statement, Certification, Signature, and Contact Information of the Requestor (For Initial and Renewal Requests)**

**NOTE:** Select the box for either **Item Number 1.a.** or **1.b.**

- 1.a.  I can read and understand English, and have read and understand each and every question and instruction on this form, as well as my answer to each question.
- 1.b.  The interpreter named in **Part 6.** has read to me each and every question and instruction on this form, as well as my answer to each question, in \_\_\_\_\_, a language in which I am fluent. I understand each and every question and instruction on this form as translated to me by my interpreter, and have provided true and correct responses in the language indicated above.

**Requestor's Certification**

I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct and that copies of documents submitted are exact photocopies of unaltered original documents. I understand that I may be required to submit original documents to U.S. Citizenship and Immigration Services (USCIS) at a later date. I also understand \_\_\_\_\_ by providing materially false \_\_\_\_\_ a federal felony punishable by a \_\_\_\_\_ years, or both, under 18 U.S.C. \_\_\_\_\_, I authorize the release of any \_\_\_\_\_ that USCIS may need to reach a \_\_\_\_\_ determination on my \_\_\_\_\_ action request.

- 2.a. Requestor's Signature
- 2.b. Date of Signature (mm/dd/yyyy)

**Requestor's Contact Information**

- 3. Requestor's Daytime Telephone Number
- Requestor's Mobile Telephone Number
- Requestor's Email Address

**Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests)**

**Interpreter's Full Name**

Provide the following information concerning the interpreter:

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

**Interpreter's Mailing Address**

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

If used translator, list appropriate information for the translator. Note: if the Interpreter does not have a business or organization affiliation, they can leave parts blank.

**Interpreter's Contact Information**

- 4. Interpreter's Daytime Telephone Number
- 5. Interpreter's Email Address



**Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests) (continued)**

**Interpreter's Certification**

I certify that:

I am fluent in English and [ ] which is the same language provided in Part 5., Item Number 1.b.;

I have read to this requestor each and every question and instruction, in [ ] and [ ] and every instruction and question on the form, as well as the answer to each question.

**List the language translated to and have interpreter sign and date form.**

- 6.a. Interpreter's Signature [ ]  
6.b. Date of Signature (mm/dd/yyyy) ▶ [ ]

**Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests)**

**Preparer's Full Name**

Provide the following information concerning the preparer:

- 1.a. Preparer's Family Name (Last Name) [ ]  
1.b. Preparer's Given Name (First Name) [ ]  
2. Preparer's Business or Organization Name [ ]

**Preparer's Mailing Address**

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

**Preparer's Contact Information**

4. Preparer's Daytime Telephone Number [ ]  
5. Preparer's Fax Number [ ]  
6. Preparer's Email Address [ ]

**List information for the person who helped prepare the application on your behalf and have their preparer sign/date.**

**Preparer's Declaration**

I declare that I prepared this Form I-821D at the requestor's behest, and it is based on all the information of which I have knowledge.

- 7.a. Preparer's Signature [ ]  
7.b. Date of Signature (mm/dd/yyyy) ▶ [ ]

**NOTE:** If you need extra space to complete any item within this request, see the next page for **Part 8. Additional Information.**

**Part 8. Additional Information** *(For Initial and Renewal Requests)*

If you need extra space to complete any item within this request, use the space below. You may also make copies of this page to complete and file with this request. Include your name and A-Number *(if any)* at the top of each sheet of paper; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

**Full Legal Name**

1.a. Family Name *(Last Name)*

1.b. Given Name *(First Name)*

1.c. Middle Name

2. A-Number *(if any)*  
▶ A-

4.a. Page Number  4.b. Part Number  4.c. Item Number

4.d. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Relist your information as listed on the first page of the I-821D.**

3.a. Page Number  3.b. Part Number  3.c. Item Number

3.d. \_\_\_\_\_  
\_\_\_\_\_

**This space is to add additional information. Write name, A#, page number, and item number for sections you are adding information to.**

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5.a. Page Number  5.b. Part Number  5.c. Item Number

5.d. \_\_\_\_\_  
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# Application For Employment Authorization

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-765  
OMB No. 1615-0040  
Expires 05/31/2020

<b>For USCIS Use Only</b>	<input type="checkbox"/> Authorization/Extension Valid From _____	<b>Fee Stamp</b>	<b>Action Block</b>
	<input type="checkbox"/> Authorization/Extension Valid Through _____		
	Alien Registration Number A- <input type="text"/>		
	Remarks		

<b>To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).</b>	<input type="checkbox"/> Select this box if Form G-28 is attached.	<b>Attorney or Accredited Representative USCIS Online Account Number (if any)</b> <input type="text"/>
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► **START HERE - Type or print in black ink.**

### Part 1. Reason for Applying

I am applying for (select only one box):

- 1.a.  Initial permission to accept employment.
- 1.b.  Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document **NOT DUE** to U.S. Citizenship and Immigration Services (USCIS) error.  
**NOTE:** Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to **Replacement for Card Error** in the **What is the Filing Fee** section of the Form I-765 Instructions for further details.
- 1.c.  Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

To renew your work permit, you must check this box.

### Part 2. Information About You

#### Your Full Legal Name

- 1.a. Family Name (Last Name)
- 1.b. Given Name (First Name)

Name as it appears on your birth certificate or most recent legal document (e.g. marriage certificate). Ensure that name listed on this form matches name on Form I-821D.

### Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6**.

#### Additional Information.

- 2.a. Family Name (Last Name)
- 2.b. Given Name
- 2.c.
- 3.a.
- 3.b.
- 3.c. Middle Name
- 4.a. Family Name (Last Name)
- 4.b. Given Name (First Name)
- 4.c. Middle Name

List all other names that are different from your legal name— this should match what is listed on I-821D



List real SSN that was assigned to you!

Part 2. Information About You (continued)

Your U.S. Mailing Address

5.a. In Care Of Name (if any)
5.b. Street Number and
5.c.
5.d. City or Town
5.e. State
5.f. ZIP Code (USPS ZIP Code Lookup)

List address where you want renewal work permit mailed to.

6. Is your current mailing address the same as your physical address? Yes No

NOTE: If you answered "No" to Item Number 6, provide your physical address below.

If mailing address is the same as the physical address, mark "Yes." If physical address is different, mark "No" and fill physical address here.

7.b. Apt. Ste. Flr.
7.c. City or Town
7.d. State
7.e. ZIP Code

Other Information

8. Alien Registration Number (A-Number) (if any)
Account Number (if any)
Male Female
Married Divorced Widowed

A# can be found on the work permit. I-797 (Notice of Action) or DACA approval letter. On a work permit, it is the 9-digit number listed after USCIS #. It is ok to leave Q. 9 blank.

12. Have you previously filed Form I-765? Yes No

13.a. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? Yes No

NOTE: If you answered "No" to Item Number 13.a., skip to Item Number 14. If you answered "Yes" to Item Number 13.a., provide the information requested in Item Number 13.b.

13.b. Provide your Social Security number (SSN) (if known).

14. Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 15., Consent for Disclosure, to receive a card.) Yes No

NOTE: If you answered "No" to Item Number 14., skip to Part 2., Item Number 18.a. If you answered "Yes" to Item Number 14., you must also answer "Yes" to Item Number 15.

15. Consent for Disclosure: I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing Social Security card. Yes No

NOTE: If you answered "Yes" to Item Numbers 14. - 15., provide the information requested in Item Numbers 16.a. - 17.b.

Generally, you can mark "no" because you already have a Social Security card. If you mark "No," you can skip questions 15-17.

Father's Name

Provide your father's birth name.

16.a. Family Name (Last Name)
16.b. Given Name (First Name)

Mother's Name

Provide your mother's birth name.

17.a. Family Name (Last Name)
17.b. Given Name (First Name)

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in Part 6. Additional Information.

18.a. Country
18.b. Country

Country of Citizenship. Same answer as on I-821D.

Should generally mark "Yes," since you are renewing and have previously filed for a work permit and have been issued a SSN.



**Part 2. Information About You (continued)**

**Place of Birth**

List the city/town/village, state/province, and country where you were born.

- 19.a. City/Town/Village of Birth
- 19.b. State/Province of Birth
- 19.c. Country of Birth
- 20. Date of Birth (mm/dd/yyyy)

**Information About Your Last Arrival in the United States**

- 21.a. Form I-94 Arrival-Departure Record Number (if any)
- 21.b. Passport Number of Your Most Recently Issued Passport
- 21.c. Travel Document Number (if any)
- 21.d. Date Issued Your Passport or Travel Document
- 21.e. Date for Passport or Travel Document (mm/dd/yyyy)

- 22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)
- 23. Place of Your Last Arrival Into the United States
- 24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)
- 25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)
- 26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

**Information About Your Eligibility Category**

- 27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).
- 28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category (c)(3)(C) in Item Number 27., provide the information requested in Item Number 28.a - 28.c.

- 28.a. Degree
- 28.b. Employer's Name as Listed in E-Verify
- 28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number
- 29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in Item Number 27., provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.
- 30. **(c)(8) Eligibility Category.** If you entered the eligibility category (c)(8) in Item Number 27., have you EVER been arrested for and/or convicted of any crime?  Yes  No

**NOTE:** If you answered "Yes" to Item Number 30., refer to **Special Filing Instructions for Those With Pending Academic Applications (c)(8)** in the **Required Documents** section of the Form I-765 Instructions.

- 31.a. **(c)(35) Eligibility Category.** If you entered the eligibility category (c)(35) in Item Number 27., provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in Item Number 27., please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.
- 31.b. If you entered the eligibility category (c)(35) or (c)(36) in Item Number 27., have you EVER been arrested for and/or convicted of any crime?  Yes  No

**NOTE:** If you answered "Yes" to Item Number 31.b., refer to **Employment-Based Nonimmigrant Categories, Items 8. - 9.,** in the **Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.

**DACA Renewal eligibility category is (c)(33). You can skip Q. 28-31.**

**Leave blank if you have no I-94**

**List passport or travel document information for question 21B-21E, if you have one.**

**Enter "No lawful status" (Unless you entered with a Visa).**

**Enter "DACA Recipient".**

**Reference previously submitted work permit application for date of entry and location.**

**Leave blank if you have no SEVIS#.**



**Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature**

**NOTE:** Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

**Applicant's Statement**

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

- 1.a.  I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 1.b.  The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I understood everything.
- 2.  At my request, the preparer named in **Part 5.**, , prepared this application for me based only upon information I provided or authorized.

**Applicant's Contact Information**

- 3. Applicant's Daytime Telephone Number
- 4. Applicant's Mobile Telephone Number (if any)
- 5. Applicant's Email Address (if any)
- 6.  Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

**If you used a translator, list appropriate information for translator here. Note: if the interpreter does not have a business or organization affiliation, they can leave those parts blank.**

**Applicant's Declaration and Certification**

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

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

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

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

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

**Applicant's Signature**

- 7.a. Applicant's Signature
- 7.b. Date of Signature (mm/dd/yyyy)

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

**IT IS VERY IMPORTANT FOR YOU TO SIGN AND DATE FOR THE RENEWAL TO BE PROCESSED!**

**Part 4. Interpreter's Contact Information, Certification, and Signature**

Provide the following information about the interpreter.

**Interpreter's Full Name**

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

**If you did not use a translator to prepare your application, check this box.**

**If you used a translator to prepare your application, check this box AND list translator's name.**

**List your (the applicant) information here.**



**Part 4. Interpreter's Contact Information, Certification, and Signature**

**Interpreter's Mailing Address**

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

**If you used a translator, list appropriate information for translator here. Note: if the interpreter does not have a business or organization affiliation, they can leave those parts blank.**

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

**Interpreter's Certification**

I certify, under penalty of perjury, that:  
I am fluent in English and ,  
which is the same language specified in **Part 3., Item Number 1.b.**, and I have read to this applicant in the identified language  
instruction on this application and his or her  
n. The applicant informed me that he or  
instruction, question, and answer on the  
the **Applicant's Declaration and**  
verified the accuracy of every answer.

**If you used a translator, clarify the translated language and have the translator sign and date.**

**Interpreter's Signature**

- 7.a. Interpreter's Signature
- 7.b. Date of Signature (mm/dd/yyyy)

**Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant**

Provide the following information about the preparer.

**Preparer's Full Name**

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

**Preparer's Mailing Address**

**If someone else prepared your application on your behalf list information here and have the preparer sign/date on the following page.**

- 3.d. State  3.e. ZIP Code
- 3.f. Province
- 3.g. Postal Code
- 3.h. Country

**Preparer's Contact Information**

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



**Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant (continued)**

**Preparer's Statement**

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

**NOTE:** If you are an attorney or accredited ay need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

**Preparer's Certification**

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

**If someone else prepared your application on your behalf list information here and have the preparer sign/date.**

**Preparer's Signature**

- 8.a. Preparer's Signature
- 8.b. Date of Signature (mm/dd/yyyy)







**Form I-765 Worksheet**  
 Department of Homeland Security  
 U.S. Citizenship and Immigration Services

USCIS  
**Form I-765WS**  
 OMB No. 1615-0040  
 Expires 05/31/2020

If you are applying for employment authorization under the (c)(14), Deferred Action, or (c)(33), Consideration of Deferred Action for Childhood Arrivals, categories, you must complete this worksheet so we can determine whether you have an economic need to work. In the spaces provided, indicate your current annual income, your current annual expenses, and the total current value of your assets. Supporting evidence is not required, but U.S. Citizenship and Immigration Services (USCIS) will accept and review any documentation that you submit. You do not need to include other household members' financial information to establish your own economic necessity.

**Part 1. Your Full Name**

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

**List your information as it is listed on the first page of I-821D and I-765.**

**Part 2. Financial Information**

1. My current annual income is: \$

2. My current annual expenses are: \$

3. The total current value of my assets is: \$

**List your financial information. Expenses should include all expenses: school, transportation, rent, family support, etc. If you do not work, you are allowed to list income as 0. DO NOT leave blank, make sure to put 0.**

**Part 3. Explanation**

If you would like to provide an explanation regarding your current financial information or your economic need for employment authorization, use the space below.

**Assets are property, under an applicant's name, that are completely paid off like a car, boat, motorcycle, etc. You are allowed to list 0 if an applicant has no assets. DO NOT leave blank, make sure to put 0.**

**No need to be overly detailed in your explanation. Some examples are listed below:**

- 1. The reason why I am requesting a work permit is to be able to provide for myself in the United States.**
- 2. The reason why I am requesting a work permit is to be able to continue my education in the United States.**
- 3. The reason why I am requesting a work permit is to be able to provide for my family in the United States.**

