# Guided DACA Renewal Application UC Santa Barbara

January 19, 2018

### Current Advice re: applying for renewal

- There is a likelihood that the chance to apply for DACA renewal will not be available through another Court order
- There is also a possibility that DACA may be revoked by the President
- We are not sure what impact the government shutdown will be on the ability of USCIS to accept and process DACA renewal applications
- This means that it is a chance that your \$495 fee will be cashed but that you will not receive a new EAD
- But our advice is still to apply for renewal if you are eligible

### Do I qualify for DACA Renewal?

- If you have already been approved for DACA, you may apply for DACA Renewal during your Renewal period.
- You may also apply if your DACA is expired
  - o If your DACA expired more than 1 year ago, please make an appointment with me
- If you have never applied for DACA before, you are not eligible to apply under USCIS' recent guidance
- If you have had any contact with law enforcement or immigration authorities or you have left the country since submitting the initial DACA application, please consult with an attorney before applying for DACA Renewal.
  - Schedule an appointment with me after today's workshop
- O You cannot age out of DACA even if you are over the age of 31 now.

#### **DACA** Application

A complete Renewal application includes:

- □ \$495 filing fee, payable to U.S. Department of Hameland Security
- 2 passport style photos
- ☐ Form G-1145, e-Notification of Application
- ☐ Form I-821D, Consideration of Deferred Action for Childhood Arrivals
- ☐ Form I-765, Application for Employment Authorization
- ☐ I-765 Worksheet
- Copy of the front and back of your work authorization card

#### **Cover Letter**

- Date
- Addressee
- Short message explaining what you are sending and why.
   Here, you can also insert any extra considerations for your application.
  - Ex: Why you are filing late etc.
- List of items in your application
- Signature at bottom

#### **Cover Letter**

REQUEST FOR RENEWAL	OF DEFERRED	ACTION FOR	СНЦ РНООР	ARRIVAL

DATE

USCIS Phoenix Lockbox Facility Attn: DACA Renewal Requests P.O. Box 20700 Phoenix, AZ 85036-0700

Dear Officer:

Enclosed are the following fees, forms and exhibits:

- 1. Filing Fee of \$465 made out to the U.S. Department of Homeland Security;
- 2. Form G-1145, e-Notification of Application
- 3. Form I-821D, Request for Renewal of DACA
- 4. Form I-765, Application for Employment Authorization;
- Form I-765 Worksheet;
- 6. Two passport photographs;
- 7. Copy of front and back of current Employment Authorization Document

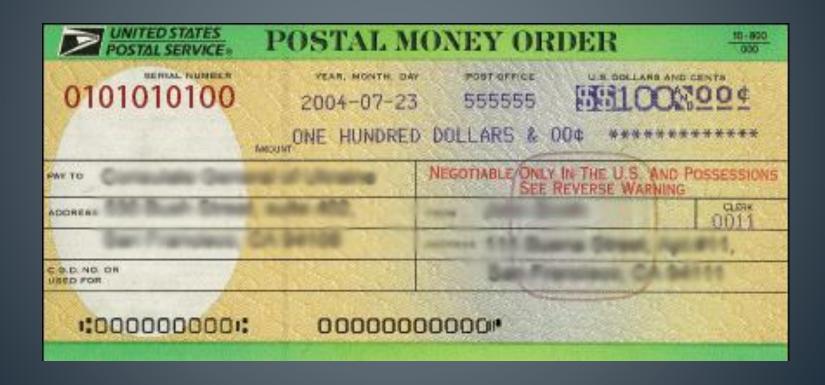
Thank you for your prompt attention to this case.

Respectfully submitted,

Name

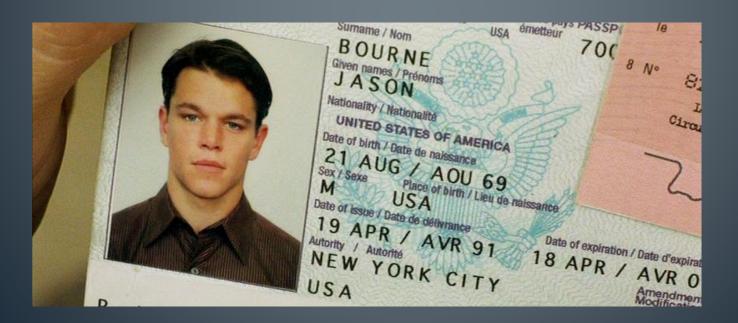
### \$495 Filing Fee

Payable to U.S. Department of Homeland Security



### Two (2) Passport Photos

- You can have passport photos taken at stores like Walmart, CVS, Rite Aid, Fed Ex, Costco, the post office, or a local photo shop.
- \$5.00 **-** \$10.00



#### Form G-1145

- E-Notification of Application
- This form is optional
- <a href="https://www.uscis.gov/g-1145">https://www.uscis.gov/g-1145</a>
- Information required:
  - Full Last Name
  - Full First Name
  - Full Middle Name (if applicable)
  - E-Mail Address
  - Mobile Phone Number (for text messages)

#### e-Notification of Application/Petition Acceptance



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

USCIS Form G-1145

OMB No. 1615-0109 Expires 09/30/2016

#### What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

#### General Information

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

#### USCIS Privacy Act Statement

AUTHORITIES: The information requested on this form is collected pursuant to section 103(a) of the Immigration and Nationality Act, as amended INA section 101, et seq.

PURPOSE: The primary purpose for providing the information on this form is to request an electronic notification when USCIS accepts immigration form. The information you provide will be used to send you a text and/or email message.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may prevent USCIS from providing you a text and/or email message receipting your immigration form.

ROUTINE USES: The information provide on this form will be used by and disclosed to DHS personnel and contractors in accordance with approved routine uses, as described in the associated published system of records notices [DHS-USCIS-007 -Benefits Information System and DHS-USCIS-001 - Alien File (A-File) and Central Index System (CIS), which can be found at www.dhs.gov/privacy]. The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security.

#### Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 3 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue, NW, Washington, DC 20529-2140. OMB No. 1615-0109. Do not mail your completed Form G-1145 to this address.

#### Complete this form and clip it on top of the first page of your immigration form(s). Applicant/Petitioner Full Last Name Applicant/Petitioner Full First Name Applicant/Petitioner Full Middle Name E-mail Address Mobile Phone Number (Text Message)

Form G-1145 09/15/14 Y Page 1 of 1

#### Form I-821D

- Consideration of Deferred Action for Childhood Arrivals
- This form is REQUIRED!
- https://www.uscis.gov/i-821d
- Information you will need:
  - Full Name, mailing address
  - A#, SSN, Birth information (when & where)
  - Residence history (only since last DACA application)
  - Travel Information



#### Consideration of Deferred Action for Childhood Arrivals

Department of Homeland Security U.S. Citizenship and Immigration Services USCIS Form I-821D OMB No. 1615-0124 Expires 06/30/2016

I I A-I	ceipt	Action Block		
For USCIS Case ID:				
Use Case ID:				
Only Requestor interviewed				
Returned: / / E Received: / Remar	l			
Tarabata January Janua	NS .			
Resubmitted: / J Seut: /	landinkanis Eran C 201	s attached to Attorney State Bar Number (if any):		
To be completed by married act	lect this box if Form G-28 i present the requestor.	s attached to Anothey State Bal Number (0 to 0).		
► START HERE - Type or print in black ink. Read Fo		for information on how to complete this form.		
Part 1. Information About You (For Initial and	Removal Pr	oceedings Information		
Renewal Requests)	5. Are you	5. Are you NOW or have you EVER been in removal		
I am not in immigration detention and I have included Form	•	ngs, or do you have a removal order issued in any		
I-765, Application for Employment Authorization, and Form I-765WS, Form I-765 Worksheet; and		ttext (for example, at the border or within the tates by an immigration agent)?		
I am requesting:	Ontied St	Yes No		
Initial Request - Consideration of Deferred Actio	n NOTE:	The term "removal proceedings" includes		
for Childhood Arrivals		or deportation proceedings initiated before		
OR		1997; an Immigration and Nationality Act (INA)		
2. Renewal Request - Consideration of Deferred		40 removal proceeding; expedited removal; ment of a final order of exclusion, deportation, or		
Action for Childhood Arrivals		an INA section 217 removal after admission		
AND		Visa Waiver Program; or removal as a criminal		
For this Renewal request, my most recent period of Deferred	alien und	er INA section 238.		
Action for Childhood Arrivals expires on		d "Yes" to Item Number 5., you must select a		
(mm/dd/yyyy) ►	box below indi removal procee	cating your current status or outcome of your		
Full Legal Name		-		
	Status or outco			
3.a. Family Name (Last Name)		ntly in Proceedings (Active)		
3.b. Given Name	5.b. Cure	ntly in Proceedings (Administratively Closed)		
(First Name)	5.c. Term	inated		
3.c. Middle Name	5.d. Subje	ct to a Final Order		
U.S. Mailing Address (Enter the same address on	5.e. Other	Explain in Part 8. Additional Information.		
Form I-765)		cent Date of Proceedings		
4.a. In Care Of Name (if applicable)		(mm/dd/3333) ►		
an Care of Frame (g apparation)	5.g. Location	of Proceedings		
4.b. Street Number and Name				
4.c. Apt. Ste. Flr.				
4.d. City or Town				
4.e. State 4.f. ZIP Code				

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

I am not in immigration detention *and* I have included Form I-765, Application for Employment Authorization, and Form I-765WS, Form I-765 Worksheet; and

#### I am requesting:

1. Initial Request - Consideration of Deferred Action for Childhood Arrivals

OR

2. Renewal Request - Consideration of Deferred Action for Childhood Arrivals

AND

For this Renewal request, my most recent period of Deferred Action for Childhood Arrivals expires on

(mm/dd/yyyy)	<b>&gt;</b>	
(**************************************		

### Full Name: Name listed on your birth certificate

Full Legal Name		
3.a.	Family Name (Last Name)	
3.b.	Given Name (First Name)	
3.c.	Middle Name	

Write in DACA expiration date

- Only use "In Care Of Name" when the mailing address is not somewhere you have ever lived.
- Double check the accuracy of what you filled in.
  - If it is incorrect, the mistake will likely result in lost mail and another \$495 fee.

U.S. Mailing Address (Enter the same address on Form I-765)		
4.a.	In Care Of Name (if applicable)	
4.b.	Street Number and Name	
4.c.	Apt. Ste. Flr.	
4.d.	City or Town	
4.e.	State . 4.f. ZIP Code	

#### Removal Proceedings Information

5. Are you NOW or have you EVER been in removal proceedings, or do you have a removal order issued in any other context (for example, at the border or within the United States by an immigration agent)?

Yes No

NOTE: The term "removal proceedings" includes exclusion or deportation proceedings initiated before April 1, 1997; an Immigration and Nationality Act (INA) section 240 removal proceeding; expedited removal; reinstatement of a final order of exclusion, deportation, or removal; an INA section 217 removal after admission under the Visa Waiver Program; or removal as a criminal alien under INA section 238.

If you answered "Yes" to **Item Number 5.**, you must select a box below indicating your current status or outcome of your removal proceedings.

If you answered "Yes" to Item Number 5., you must select a box below indicating your current status or outcome of your removal proceedings.

Status or outcome:

5.a. □ Currently in Proceedings (Active)

5.b. □ Currently in Proceedings (Administratively Closed)

5.c. □ Terminated

5.d. □ Subject to a Final Order

5.e. □ Other. Explain in Part 8. Additional Information.

5.f. Most Recent Date of Proceedings

(mm/dd/yyyy) ▶

5.g. Location of Proceedings

Speak with an attorney if the answer is YES.

 The answers on this page must be consistent with prior filings (except for Marital Status).

Oth	er Information
6.	Alien Registration Number (A-Number) (if any)
	► A-
7.	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

- If you have ever used a different name list it here.
  - Ex: You have two last names but your elementary school records only used the first name
  - Ex: You have recently married and changed your last name.

Other Names Used (If Applicable)		
If you need additional space, use <b>Part 8. Additional Information</b> .		
<b>14.a.</b> Family Name (Last Name)		
<b>14.b.</b> Given Name (First Name)		
14.c. Middle Name		

#### \*Question 16 is optional

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)
19.	Eye Color (Select only one box)  Black Blue Brown
19.	
19.	Black Blue Brown
19. 20.	Black Blue Brown Gray Green Hazel
	Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other
	Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other Hair Color (Select only one box)
	Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other Hair Color (Select only one box) Bald (No hair) Black Blond

Answer 'YES', if you think the answer is 'NO' then speak with an attorney.

Part 2. Residence and Travel Information (For *Initial and Renewal Requests)* I have been continuously residing in the U.S. since at least June 15, 2007, up to the present time.

Yes

- Present Address: Where actually you reside
- List all addresses where you have resided since your prior DACA application
- Use mm/dd/yyyy format
- Include periods you moved home for the summer
- Example: Current address,
   Home address, 1<sup>st</sup> year
   dorm address, home address
- Use page 7 to fit a long dorm address

Pres	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		
Add	ress 1		
3.a.	Dates at this residence (mm/dd/yyyy)		
	From ▶ To ▶		
3.b.	Street Number and Name		
3.c.	Apt. Ste. Flr.		
3.d.	City or Town		
3.e.	State 3.f. ZIP Code		

#### Addresses

Current Address: From 08/01/2016 to Present

1234 Albatross Street

Merced, CA 95340

**Address 1**: From 05/15/2016 to 07/31/2016

500 Oak Street

Los Angeles, CA 90012

**Address 2**: From 08/01/2015 to 05/14/2016

The Summits Tenaya #2500

5200 N. Lake Road

Merced, CA 95343

**Address 3:** From 01/01/2007 to 07/31/2015

500 Oak Street

Los Angeles, CA 90012

- Have you departed the United States since your last DACA application?
- Include a copy of:
  - Advance Parole Document
  - Stamped passport
  - Advance Parole Document
  - Or I-94 record available at:

https://i94.cbp.dhs.gov/I9 4/#/recent-search

Travel	In	form	ation
1/u/ci	- 110	, or m	uuvn

**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)	
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**6.c.** Reason for Departure

- Question 8: NO
  - Speak with an attorney if your think your answer is YES.
- Do you have a passport?
  - If yes, fill in question 9.a. 9.c.

8	Have you left the United States without advance parole on or after August 15, 2012?  Yes Vo
9.a.	What country issued your last passport?
9.b.	Passport Number
9.c.	Passport Expiration Date
	(mm/dd/yyyy) ▶
10.	Border Crossing Card Number (if any)

Speak with an attorney
if the answer to Question
1 or any other question
in this section is YES.

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, charged with, or convicted of a felony or misdemeanor, *including incidents* handled in juvenile court, in the United States? Do not include minor traffic violations unless they were alcoholor drug-related.

Yes No

If you answered "Yes," you must include a certified court disposition, arrest record, charging document, sentencing record, etc., for each arrest, unless disclosure is prohibited under state law.

#### Check Box 1.a.

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.

#### Don't forget to SIGN!!!

#### 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 that knowingly and willfully providing materially false information on this form is a federal felony punishable by a fine, imprisonment up to 5 years, or both, under 18 U.S.C. section 1001. Furthermore, I authorize the release of any information from my records that USCIS may need to reach a determination on my deferred action request.

2.a. Requestor's Signature

➡ Don't forget to sign!

**2.b.** Date of Signature (mm/dd/yyyy) ▶

Part 8.	Additional Information	n (	For	Initial	and
Renewa	l 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.

Ful	l Legal Name
1.a.	Family Name (Last Name)
1.b.	Given Name (First Name)
1.c.	Middle Name
2.	A-Number (if any)
	► A-

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

- Application for Employment Authorization
- This form is REQUIRED!
- https://www.uscis.gov/i-765
- Information you will need:
  - Full Name, mailing address
  - A#, SSN, Birth information (when & where)
  - Residence history (only since last DACA application)
  - Travel Information



Form I-765 07/17/17 N

#### **Application For Employment Authorization**

Department of Homeland Security U.S. Citizenship and Immigration Services USCIS Form I-765 OMB No. 1615-0040 Expires 02/28/2018

Page 1 of 2

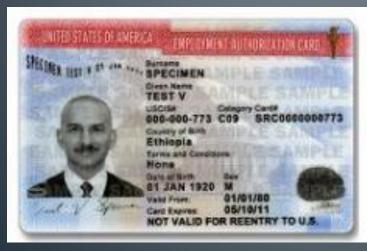
Fo		ee Stamp		Action Block Initi		Initial Receipt	Resubmitted
USC						Relo	cated
Us	se					Received	Sent
	~					Com	pleted
☐ Ap	oplication Approved			on Denied - Fail		Approved	Denied
	Authorization/Extension Va Authorization/Extension Va		Eligibil 8 CFR (a) or (c	274a.12	8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)	A#	
Su	bject to the following conditi	ons:			☐ Applicant is filing under	section 274a.12	
<b>▶</b> 8	START HERE - Type o	or print in black ink.					
I am	applying for:						
□ F	Permission to accept emp	oloyment.					
		ployment authorization do	cument).	7. Gende	r 🗌 Male 🔲 Fem	nale	
□ F	Renewal of my permission	on to accept employment (	attach a	8. Marita	al Status		
	copy of your previous en document).	nployment authorization		☐ Si	ngle	Divorced	Widowed
	Full Name				he Social Security Admi ally issued a Social Secu		
F	Family Name	First Name Midd	le Name	omei	arry issued a Social Sect	· ·	Yes □No
				NOT	E: If you answered "Ye	e" to Itam Nu	mber 0 a
2. (	Other Names Used (incl	lude Maiden Name)			de the information reque		
F	Family Name	First Name Midd	le Name	<b>9.b.</b> Provi	de your Social Security	number (SSN)	(if known)
-							
-					ou want the SSA to issue must also answer "Yes"		
L					ent for Disclosure, to re		Del 11.,
3. U	U.S. Mailing Address						Yes No
S	Street Number and Name	Apt.	Number	NOT	E: If you answered "No	" to Item Nu	nber 10., skip
				to Ite	m Number 14. If you a	nswered "Yes	" to Item
7	Γown or City	State ZIP	Code		ber 10., you must also a ber 11.	nswer "Yes" t	o Item
		0				a - 11 1	
_		(USPS ZIP C	ode Lookup)		ent for Disclosure: I au mation from this applicat		
4. (	Country of Citizenship	or Nationality			e purpose of assigning n		
L				Socia	l Security card.		Yes No
5. I	Place of Birth			NOTE: If	you answered "Yes" to I	tem Numbers	10 11.,
7	Γown or City	State/Province Cou	ntry		information requested in		
				Father's N	ame		
6. I	Date of Birth (mm/dd/y	yyy)		12.a. Fami	ly Name Name)		
				12.b. Give			
					Name)		

Aother's Name (Provide your mother's birth name.)  3.a. Family Name (Last Name)  3.b. Given Name	22. (c)(26) Eligibility Category. If you entered the eligibility category (c)(26) in Item Number 20. above, please provide the receipt number of your H-1B principal spouse's most recent Form I-797 Notice of Approval for Form I-129.
(First Name)	
4. Alien Registration Number (A-Number) or Form I-94  Number (if any)  5. Have you ever before applied for employment authorization from USCIS?  Yes (Complete the following questions.)  Which USCIS Office?  Dates	23. (c)(35) and (c)(36) Eligibility Category  a. If you entered the eligibility category (c)(35) or (c)(34 in Hem Number 20, above, please provide the receip number of the Form I-140 beneficiary's Form I-797 Notice of Approval for Form I-140.  b. Have you EVER been arrested for and/or convicted of any crime?  Yes N
Results (Granted or Denied - attach all documentation)  No (Proceed to Item Number 16.)	NOTE: If you answered "Yes" to Item Number 23.b., refer to Item Number 5., Item H. or Item I. in the Who May File Form I-765 section of these Instructions for information about providing court dispositions.
6. Date of Your Last Arrival or Entry Into the U.S., On or	Certification
About (mm/dd/yyyy)  7. Place of Your Last Arrival or Entry Into the U.S.  8. Status at Last Entry (B-2 Visitor, F-1 Student, No Lawful Status, etc.)	I certify, under penalty of perjury, that the foregoing is true an correct. Furthermore, I authorize the release of any informatio that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the Who May File Form 1-765 section of the Instructions and have identified the appropriate eligibility category in Item Number 20.  Applicant's Signature
9. Current Immigration Status (Visitor, Student, etc.)	
( visitor, statem, vity	Date of Signature (mm/dd/yyyy)
Deligibility Category. Go to the Who May File Form 1-765? section of the Instructions. In the space below, place the letter and number of the eligibility category you selected from the instructions. For example, (a)(8), (c)(17)(iii), etc. (c)(3)(C) Eligibility Category. If you entered the eligibility category (c)(3)(C) in Item Number 20. above, list your degree, your employer's name as listed in E-Verify, and	Signature of Person Preparing Form, If Other Than Applicant I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.
your employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number in the space below.	Preparer's Signature
Degree Employer's Name as listed in E-Verify  Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number	Date of Signature (mm/dd/yyyy)  Printed Name  Address

Check the box "Renewal of my permission to accept

Chock me box	Remember my perimosion
employment	I am applying for:
Cilipioyilicili	Permission to accept employment.
	Replacement (of lost employment authorization document).
<b>.</b>	<ul> <li>Renewal of my permission to accept employment (attach a copy of your previous employment authorization</li> </ul>
<u>~</u>	document).

Include a copy of the front and back of your current EAD Card





Full Name: Name listed on your birth certificate

1.	Full Name			
	Family Name	First Na	ame	Middle Name
2.	Other Names Used (inc	lude Ma	iden Nam	e)
	Family Name	First Na	ame	Middle Name
3.	U.S. Mailing Address			
	Street Number and Name	e		Apt. Number
	Town or City		State	ZIP Code
			0	
			(	USPS ZIP Code Lookup)

Double Check Address!!! Your EAD card is mailed to the address exactly how you write it here.

4.	Country of Citizenship or	r Nationality	
5.	Place of Birth		
	Town or City	State/Province	Country
6.	Date of Birth (mm/dd/yyy	y)	
-	Condon D Male D E	1-	
7.	Gender Male F	emale	
8.	Marital Status		
	☐ Single ☐ Married	☐ Divorced	☐ Widowed
9.a.	Has the Social Security Ad		
	officially issued a Social So	ecurity card to	you?
			Yes No
	<b>NOTE:</b> If you answered "provide the information rec		
9.b.	Provide your Social Securi	ty number (SSN	N) (if known)
	▶[		

This section should mirror your answers to the same questions on Form I-821D

New questions regarding SSN

10.	Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 11.,  Consent for Disclosure, to receive a card.)  Yes No  NOTE: If you answered "No" to Item Number 10., skip to Item Number 14. If you answered "Yes" to Item  Number 10., you must also answer "Yes" to Item  Number 11.	Fath	TE: If you answered "Yes" to Item Numbers 10 11., vide the information requested in Item Numbers 12.a 13.b.  ther's Name  a. Family Name (Last Name)  b. Given Name (First Name)
11.	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 me a Social Security card.	13.	.a. Family Name (Last Name)  .b. Given Name (First Name)

You only need to provide your parents' information IF you want to receive a Social Security Card at the same time you receive the Employment Authorization Document

n Registration Number (A-Number higher (if any)	r) or Form I-94
e you ever before applied for emplorization from USCIS?	oyment
Yes (Complete the following question	ons.)
Which USCIS Office?	Dates
Results (Granted or Denied - attach a	all documentation)
No (Proceed to Item Number 16.)	

You can look at your prior EAD
To get the above information
-LIN = Nebraska Service Center
-CSC = California Service Center

16.	Date of Your Last Arrival or Entry Into the U.S., On or About (mm/dd/yyyy)
17.	Place of Your Last Arrival or Entry Into the U.S.
18.	<b>Status at Last Entry</b> (B-2 Visitor, F-1 Student, No Lawful Status, etc.)
19.	Current Immigration Status (Visitor, Student, etc.)
20.	Eligibility Category. Go to the Who May File Form I-765? section of the Instructions. In the space below, place the letter and number of the eligibility category you selected from the instructions. For example, (a)(8), (c)(17)(iii), etc.
	( ) ( ) ( )

\*\*The answers to questions 16-18 should be consistent with previous applications (except if you have departed with AP)

- Questions 19-20 should be:
- 19: Deferred Action for Childhood Arrivals
  - Unless your DACA has expired, and you would write: Expired DACA
  - Again if it expired
     MORE THAN 1 YEAR AGO,
     then make an appointment
- 20: (C)(33)

- Do not fill out anything in Questions 21-23
- Do not forget to sign the application!
- We would prefer, if possible, to represent you in your case and we would sign the second section

#### Certification

I certify, under penalty of perjury, that the foregoing is true and correct. Furthermore, I authorize the release of any information that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the **Who May File Form I-765** section of the Instructions and have identified the appropriate eligibility category in **Item Number 20**.

Applicant's Signature	
Date of Signature (mm/dd/yyyy)	
Telephone Number	
Signature of Person Preparing Form Applicant	n, If Other Than
I declare that this document was prepa of the applicant and is based on all infa any knowledge.	
Preparer's Signature	
Date of Signature (mm/dd/yyyy)	
Printed Name	
Address	

#### Form I-765WS

- Worksheet
- This form is REQUIRED!
- https://www.uscis.gov/i-765
- Information you will need:
  - Full Name
  - Current Annual Income
  - Current Annual Expenses
    - Rent, food, entertainment, etc.
  - Current Value of Assets
    - o If you own a car, the value is what you could sell it for right now and keep. It is not what you paid for it (or the outstanding loan balance).



#### Form I-765 Worksheet

Department of Homeland Security U.S. Citizenship and Immigration Services USCIS Form 1-765WS GMB No. 1615-0040 Expires 00/28/2018

If you are applying for employment authorization under the (c)(14), Deferred Action, or (c)(33), Consideration of Deferred Action for Childhood Aerivals, categories, you must complete this worksheet so that USCIS can determine whether you have an economic need to work. In the spaces provided, please indicate your current annual income, your current annual expenses, and the total current value of your assets. It is not necessary to submit supporting documentation, though it will be accepted and reviewed if you choose to submit it. You do not need to include other household members' financial information to establish your own occurrents.

Part I. Full Name
La. Fumily Name (Last Name)
I.b. Given Name (First Name)
Lc. Middle Name
Part 2. Financial Information
2. My ourrent annual income is: 5
3. My ourrent annual expenses are: 5
4. The total current value of my assets is: 5
Part 3. Explanation
If you would like to provide an explanation regarding your current financial information or your economic need for employment authorization, please use the space below.

#### Form I-765WS

- Example: "I am a college student at UCLA and I study philosophy. I currently get \$24,500 in tuition assistance from grants and I make about \$6,500 from working at the dining commons on campus. My yearly expenses are about \$30,000 between tuition, food and rent. I need work authorization so that I can continue to make money at my job and support myself during college. Without it, I cannot continue my education. I also want to continue saving money for the future."
- Example: "I study physics at UC Merced. I need work authorization so that I can apply for jobs and make money. Right now, my tuition and rent is covered by financial aid grants. I have to pay for food and other things I need myself. I want to be self-sufficient and make my own money, which is why I need work authorization."

#### **DACA** Renewal Reminder

DACA is only valid for two years from the date of approval. Renewal applications *should* be filed no sooner than 150 days before expiration and no later than 120 days before expiration.

- Late filed applications likely will not be processed before the expiration of your current DACA
  - Risk: Accruing unlawful presence and inability to work lawfully
- Early filed applications may be processed before the expiration date, which will result in less than 4 years total of Deferred Action and Employment Authorization

#### Where to file?

#### **U.S. Postal Service**

**USCIS Phoenix Lockbox Facility** 

**USCIS** 

P.O. Box 20700

Phoenix, AZ 85036-0700

Use these addresses if you live in California or Arizona, or else visit:

https://www.uscis.gov/i-821d-addresses

#### **USPS Express Mail/Courier**

**USCIS Phoenix Lockbox Facility** 

**USCIS** 

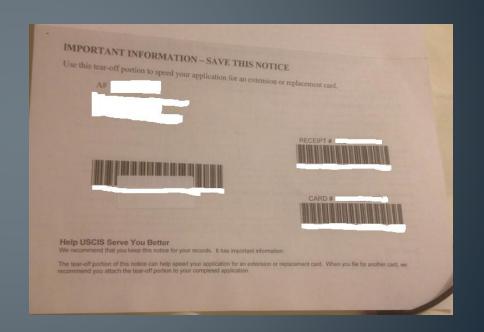
Attn: DACA

1820 E. Skyharbor Circle S, Ste. 100

Phoenix, AZ 85034

### Filing Tips

- Include the paper your last EAD card came on, if you have it.
- "Use this tear-off portion to speed your application for an extension or replacement card."



### Filing Tips

- File on the first day your renewal window opens
- Pay the extra money to ship it over night if you are filing late or near the end of your renewal window
  - We can also ship it for you
- Make a photocopy of everything you send in for your own personal records

## What happens after you submit the application?



- Receipt: Once you file these materials, you will receive two receipt notices — this will contain your receipt number so you can track your case.
- ✓ <u>Biometrics</u>: You will then be sent an appointment by mail for biometrics (fingerprints and photo).
- ✓ Response: Applications are reviewed on a case-by-case basis. A letter requesting additional information "Request for Evidence [RFE]" or a decision granting or denying your DACA application will be sent by mail.

### What happens next?

- USICS will take 105-120 days to process an application for DACA renewal
- Keep track of how long you DACA application takes
- Once 105 days has passed you may call to see what the status is