#### **Application for T Nonimmigrant Status**

(Filing Instructions for Application for T Nonimmigrant Status (Form I-914); Application for Immediate Family Member of T-1 Recipient (Form I-914, Supplement A); and Declaration of Law Enforcement Officer for Victim of Trafficking in Persons (Form I-914, Supplement B).

#### Index

Sections	Page N	(
1. Purpose	- 1	
2. General Filing Instructions	- 1	
3. Required Documentation for Each Application	- 2	
4. Completing Each Application	. 3	
5. Fee	- 6	
6. Where to File	6	
7. Certification Instructions	6	
8. Other Information	- 6	

#### Section 1. Purpose

#### Form I-914, Application for T Nonimmigrant

The purpose of the Form I-914 is to provide temporary immigration benefits to aliens who are victims of severe forms of trafficking in persons, and to their immediate family members, as appropriate. Form I-914 shall be filed initially by the victims themselves, who may also include eligible family members on their application at that time. The form may also be filed to petition for eligible family members whom the victim did not include in the original application, but for whom the victim subsequently wishes to file.

### Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient

The purpose of the Form I-914, Supplement A, is to allow principal T nonimmigrant status holders and applicants to apply for derivative benefits for their immediate family members. The Principal Applicant shall complete and file one Form I-914, Supplement A, for each family member for whom the Principal Applicant is now seeking derivative status.

An alien granted **T-2**, **T-3**, or **T-4** nonimmigrant status may apply for employment authorization by filing an Application for Employment Authorization (Form I-765), with the appropriate fee or an application for fee waiver.

The Form I-765 may be filed concurrently with the filing of the application for **T-2**, **T-3**, or **T-4** status, or at any time thereafter.

If employment authorization is approved, the **T-2**, **T-3**, or **T-4** alien will be given an eligibility classification of **C25** in accordance with section 274a.12(c)(25). Employment authorization will last for the length of the duration of the T nonimmigrant status (3 years maximum).

The validity period of the initial EAD will be for twelve (12) months. Extensions may be granted in twelve-month increments, up to the expiration date of the T nonimmigrant status (3 years maximum).

**Note:** An Employment Authorization Document (EAD) cannot be issued to an alien (derivative family member) that is presently residing outside the United States. The principal alien will be notified of this fact.

## Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons

The Form I-914, Supplement B, is used by Federal Law Enforcement Officers to certify that the applicant is a victim of a severe form of trafficking in persons.

#### Section 2. General Filing Instructions

As a result of situations leading to your filing of this application, you may not feel secure receiving correspondence regarding this application at the address where you live. The Safe Mailing Address may, but need not be, the mailing address for the place where you live. It may be a post office box, the address of a friend, a community based organization that is helping you, your attorney, or any other address at which you can receive correspondence safely and punctually.

#### **How to File**

#### Form I-914

In addition to the Form I-914 application and the requisite evidence in support of the applicant's claim, as described in Section 3 below, a complete application package shall include the filing fee and three identical photographs of the applicant.

The photographs must have been taken within six months of filing the application, and be unmounted and unretouched. The photographs shall be three-quarter views of the right side of the applicant's face, showing the applicant's entire face, including the right ear and left eye. The photographs shall be 1 1/2 X 1 1/2 inches. The applicant's head shall not make up less than 3/4 of the photographs. The background must be consistent and light in color. The applicant's name and A#, if known, shall be lightly printed on the back of each photograph with a pencil.

A principal or derivative applicant who is or becomes inadmissible under section 212(a) of the Immigration and Nationality Act (the Act) will not be eligible for T nonimmigrant status unless the ground of inadmissibility is waived by the Service. If the ground of inadmissibility is one that can be waived, the alien should apply for a waiver of the grounds of inadmissibility from the Service on Form I-192, Application for Advance Permission to Enter as Nonimmigrant (Pursuant to Section 212(d)(3) of the Immigration and Nationality Act). Section 212(d)(3)(B) provides general authority for the Service to waive many grounds of inadmissibility for nonimmigrants. These waivers are not automatic, but may be granted in the exercise of discretion. Form I-192 should be filed at the time of filing Form I-914.

#### Form I-914, Supplement A

If, in addition to the Form I-914, the applicant also files one or more Forms I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, each must be accompanied by all of the appropriate documentation and evidence, the appropriate fees, and three photographs of the Derivative Applicant. The photographs of the derivative must comply with the same requirements as the photographs of the Principal Applicant, described above. If you are requesting employment authorization for the Derivative Applicant, a Form I-765, Application for Employment Authorization, must also accompany the Form I-914, Supplement A.

A Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, may be filed concurrently with the initial application of the Principal Applicant, or at any time thereafter. Any Form I-914, Supplement A, submitted subsequently to the Principal Applicant's initial filing, however, must be accompanied by a new Form I-914 with the appropriate boxes checked in Part A, and **original signature**, with the appropriate fee. Evidence supporting the original application, however, is not required to be resubmitted with the new Form I-914. No Form I-914, Supplement A, will be accepted without a copy of the original Form I-914.

#### **Fingerprinting and Interview Appointments**

All applicants between the ages of 14 and 79 inclusive must be fingerprinted to facilitate a criminal background check. In addition, the Immigration and Naturalization Service (Service) may require the applicant to appear for a personal interview. The applicant will be notified of the proper time and location to appear for an interview, if the Service so requires, and for fingerprinting. Failure to appear for a scheduled interview without prior authorization, or failure to comply with fingerprint processing requirements, may result in denial of the application.

#### Section 3. Required Documentation for Each Application

#### **Evidence**

#### Form I-914

Application must be filed with evidence sufficient to demonstrate that each of the eligibility requirements is satisfied.

#### **Principal Applicant for T Nonimmigrant (T-1) Status:**

To qualify for T-1 nonimmigrant status, an applicant must demonstrate that he or she:

- Is physically present in the United States, American Samoa or the Commonwealth of the Northern Mariana Islands as a result of trafficking;
- Is a victim of a severe form of trafficking in persons;
- Would suffer extreme hardship involving unusual and severe harm upon removal; and
- Has complied with any reasonable request for assistance in the investigation and prosecution of acts of trafficking in persons, unless the applicant is less than 15 years old.

To establish that he or she is a victim of a severe form of trafficking in persons, the applicant must demonstrate that he or she was brought to the United States either:

- (1) For the purpose of a commercial sex act, which act was either induced by force, fraud or coercion, or occurred when the applicant had not reached 18 years of age, or
- (2) For the purpose of labor or services induced by force, fraud, or coercion for the purpose of subjecting the applicant to involuntary servitude, peonage, debt bondage, or slavery.

An applicant is encouraged to raise all arguments and to document all elements of his or her claim, including allegations of extreme hardship, in his or her initial application.

#### Form I-914, Supplement A

The Form I-914, Supplement A, must be filed with evidence sufficient to demonstrate that each of the eligibility requirements is satisfied.

#### Qualifications for T Derivative Applicants for Nonimmigrant Status

An applicant for T derivative status must be:

The spouse or child of the T nonimmigrant principal applicant or the T nonimmigrant status holder, if the principal applicant or status holder is over the age of 21;

• The spouse, child or parent, if the principal applicant or status holder is under the age of 21.

Applicants for derivative status, as family members of an applicant for T-1 nonimmigrant status, or of a person granted T-1 nonimmigrant status, must submit credible documentary evidence of the relationship of the Derivative Applicant to the Principal Applicant. Documents that will be considered for this purpose are described below. If the Principal Applicant is over the age of 21, the Derivative Applicant must be the spouse or child of the Principal Applicant. If the Principal Applicant is under the age of 21, the Derivative Applicant may be the spouse, child, or parent of the Principal Applicant. If the Derivative Applicant is applying as the child of the Principal Applicant, the evidence must also establish that the Derivative Applicant is under the age of 21.

In addition, applicants for derivative status must submit evidence to demonstrate that either the principal or the Derivative Applicant will suffer extreme hardship if the Derivative Applicant is not permitted to join the Principal Applicant. An applicant is encouraged to raise all arguments and to document all elements of his or her claim, including allegations of extreme hardship, in his or her initial application.

# <u>Form I-914, Supplement B (Declaration of Law Enforcement Officer for Victim of Trafficking in Persons)</u>

The primary evidence of an applicant's claim to be a victim of trafficking shall be a Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons. That certification is appended to this form. An applicant for T-1 nonimmigrant status need not necessarily file a Form I-914, Supplement B, to prove the claim. However, the endorsement of a Federal Law Enforcement Officer on the Form I-914, Supplement B, constitutes presumptive proof that the applicant is a victim and has complied with any reasonable request for assistance in the investigation and prosecution. These elements of the applicant's claim may be difficult to establish otherwise, and submission of the Form I-914, Supplement B, is strongly advised. Instructions pertinent to the Form I-914, Supplement B, follow.

If you do not provide a completed Form I-914, Supplement B, however, you must submit an explanation, describing your attempts to obtain the certification and why your request was refused. If you did not attempt to obtain the certification, you must explain why you did not.

#### **Secondary Evidence**

If you do not provide a completed Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons, in addition to the explanation described above, you must also submit credible secondary evidence to establish your eligibility. Such evidence may include, but is not limited to, police reports, newspaper articles, witness affidavits, or any other form of evidence. Even if you do provide a Form I-914, Supplement B, you may submit additional evidence.

Whether or not you provide a Form I-914, Supplement B, you must provide a personal narrative statement. That statement should describe the trafficking crime of which you were a victim, including:

- How you were induced to enter the United States;
- The purpose for which you were brought to the United States;
- When these events took place;
- Who was responsible;
- How long were you detained by the traffickers;
- How and when you escaped, were rescued, or otherwise became separated from the traffickers;
- What you have been doing since you were separated from the traffickers;
- Why you were unable to leave the United States after you were separated from the traffickers;
- What harm or mistreatment you fear if you are removed from the United States; and
- Why you fear you would be harmed or mistreated.

Attach documents to support your claim. The evidence submitted in support of the application must credibly establish each element of your claim. If you have in your possession, or have access to, a document showing how you entered the United States, you must submit a copy of that document with your application.

#### **Section 4. Completing Each Application**

#### Form I-914

Provide the specific information requested about you and your family. Answer ALL of the questions asked. If any question does not apply to you or you do not know the answer, reply "none," "N/A" (for not applicable), or "unknown," as appropriate. Provide detailed information. Answer the questions as completely as possible. You are strongly encouraged to attach additional written statements and documents that support your claim.

#### Part A. Purpose for Filing the Application

As was explained above, this form shall be used both for the initial application of a victim of trafficking in persons, and to file subsequently for eligible family members. In this section, you are asked to describe, by checking one or more boxes, your purpose in filing this form.

#### Part B. General Information about the Applicant

Provide the requested information about yourself.

#### Part C. Details Related to Nonimmigrant Status

The applicant must answer each question. The Principal Applicant must provide evidence to document that he or she:

- (1) Is a victim of a severe form of trafficking in persons;
- (2) Is present in the United States, American Samoa, or the Commonwealth of the Northern Mariana Islands, or at a port-of-entry thereto, on account of such trafficking;
- (3) Has complied with any reasonable request for assistance in the investigation or prosecution of acts of trafficking (or is not yet 15 years old); and
- (4) Would suffer extreme harship involving unusual and severe harm upon removal.

The applicant must explain each of those elements of the claim in detail, and provide evidence of each of those elements of the claim. The evidence must be attached to the application when it is submitted. Failure to demonstrate eligibility credibly will result in denial of the application.

#### Part D. Processing Information

Answer each of the questions. If you answer "Yes" to any of the questions, you must explain your answer on a separate piece of paper. Label that sheet Form I-914, Part D, reference the number of the question which requires explanation, and attach that sheet to your application. Answering "Yes" does not necessarily mean that your application will be denied.

#### Part E. Information about Your Family Members

Provide the requested information about each of your family members for whom you now wish to seek immigration benefits. You may also file for a family member at a later date, rather than on your initial application. You must file one Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, with this application for each family member for whom you are now applying.

#### Part F. Attestation and Release

By signing this form, you declare, under penalty of perjury, that the statements made on the application, and the evidence submitted with it, are true and correct.

By signing this form, you also agree that the Service may release information from the record in order to investigate your claim to determine your eligibility to investigate fraudulent claims, and to assist in the investigation of trafficking in persons and related crimes. The Service requires that you sign the attestation and release so that the Service may investigate your claim to eligibility.

#### Part G. Preparer and/or Translator Certification

If anyone assisted you in preparing this form, translated the questions to you, or translated your responses to the questions, they must sign this certification, declaring, under penalty of perjury, that they asisted you, and that, to the best of their knowledge, the information on the form is truthful.

#### Form I-914, Supplement A

Provide the specific information requested about you and your family. Answer ALL of the questions asked. If any question does not apply to you or you do not know the answer, reply "none," "N/A" (for not applicable), or "unknown," as appropriate. Provide detailed information. Answer the questions as completely as possible. You are strongly encouraged to attach additional written statements and documents that support your claim.

#### Part A. Relationship

State the relationship of the Derivative Applicant family member to you. You must also include documentation of the claimed relationship. Documents acceptable for this purpose are listed below.

If you are filing for your:

- Husband or wife, give the Service a copy of your marriage certificate.
- Child, and you are the mother, give the child's birth certificate showing your name and the name of your child.
- Child, and you are the father or stepparent, give the child's birth certificate, showing both parents' names, and your marriage certificate. Child born out of wedlock and you are the father, give proof that a parent/child relationship exists or existed. For example, the child's birth certificate showing your name and evidence that you have financially supported the child. (A blood test may be necessary.)

- **Mother**, give your birth certificate showing your name and the name of your mother.
- Father, give your birth certificate showing your names of both parents, and your parents' marriage certificate.
- **Stepparent,** give your birth certificate showing the name of both natural parents, and the marriage certificate of your parent to your stepparent.
- Adoptive parent or adopoted child, give a certified copy of
  the adoption decree, the legal custody decree if you
  obtained custody before adoption, and a statement
  showing the dates and places you have lived together
  with the adopted parent or child.

In addition, in any case in which a marriage license is required, if either the husband or wife was married before, you must submit documents to show that all previous marriages were legally ended (for example, a divorce decree or death certificate). In cases where the names shown on the supporting documents have changed, give the Service legal documents to show how the name change occurred (for example, a marriage certificate, adoption decree, court order, etc.).

If a required document is unavailable, you may give the Service the following instead. (The Service may require a statement from the appropriate civil authority certifying that the necessary document is unavailable.)

- **Church record:** A certificate under the seal of the church where the baptism, dedication, or comparable rite occurred within two months after birth, showing the date and place of child's birth, date of the religious ceremony, and the names of the child's parents.
- **School record:** A letter from the authorities of the school attended (preferably the first school), showing the date 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.
- **Census record:** State or Federal census record showing the names, place of birth, and date of birth or age of the person listed.
- 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; for example, the date and place of birth, marriage, divorce, or death. The persons making the affidavits need not be citizens of the United States. Each affidavit should contain the following information: (1) the relationship, if any, of the affiant to you; (2) full information concerning the event; and (3) complete details concerning how the person acquired knowledge of the event.

#### Part B. Information about Primary Applicant

Provide the requested information about yourself.

#### Part C. Information about Derivative Applicant

Provide the requested information about the family member for whom you are applying. Answer each question fully. If necessary, attach additional sheets to completely address the question. Label those sheets "Form I-914, Supplement A, Part C." and reference the questions that require additional explanation.

#### Part D. Processing Information

Answer each of the questions. If you answer "Yes" to any of the questions, you must explain your answer on a separate sheet of paper. Label that sheet Form I-914, Supplement A, Part D, reference the number of the question that requires additional explanation, and attach the sheet to the application. Answering "Yes" does not necessarily mean that benefits will be denied.

#### Part E. Attestation and Release

By signing this application, you declare, under penalty of perjury, that the statements made on the application, and the evidence submitted with it, are true and correct. The derivative applicant must also sign, also under the penalty of perjury, if he or she is in the United States.

By signing this application, you also agree that the Service may release information from the record in order to investigate your claim, to determine your eligibility, to assist in the investigation and prosecution of trafficking and related crimes, and to investigate and prosecute false claims. The Service requires that you sign the attestation and release.

#### Part F. Preparer and/or Translator Certification

If anyone assisted you in preparing this application, translated the questions to you, or translated your responses to the questions, they must sign this certification, declaring, under penalty of perjury, that they assisted you, and that, to the best of their knowledge, that the information on the application is truthful.

#### Part G. Application Checklist

Please verify that you have complied with each item on this checklist. Be sure that you have complied with all Service requirements pertinent to this form. The Service is not obliged to return your form to you if it is incomplete, is unaccompanied by supporting evidence or the correct fee, or is otherwise

unacceptable. In addition, failure to answer any question on the form, or failure to comply with any other Service requirement, may result in a processing delay, or in denial of the application.

#### Section 5. Fee

#### Form I-914

The fee for this application is a base fee of \$200, to a maximum amount of \$400, plus:

- \$50 for each immediate family member filed concurrently on the same application, to a maximum amount payable per application of \$400.
- \$25 fingerprint charge for each applicant between the ages of 14 and 79.

Pay the fee in the exact amount. Checks and money orders must be payable in U.S. currency. Make check or money order payable to "Immigration and Naturalization Service." If you live in Guam, make your check or money order payable to "Treasurer, Guam." If you live in the U.S. Virgin Islands, make your check or money order payable to "Commissioner of Finance of the Virgin Islands." A charge of \$30 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. Please do not send cash in the mail.

#### Section 6. Where to File

An applicant for status as a T nonimmigrant shall submit a complete application package, by mail, to the USINS, Vermont Service Center, 75 Lower Weldon Street, St. Albans, VT 05479-0001.

### Section 7. Certification Instructions (Form I-914, Supplement B)

Form I-914, Supplement B, is to be completed by Federal Law Enforcement Officers for victims under the Victims of Trafficking and Violence Protection Act, Public Law 106-386. The law enforcement officer must complete the form based upon his or her knowledge of the case, including evidence developed by other law enforcement officers investigating the case.

In order to be granted immigration benefits, the applicant must demonstrate that he or she is present in the United States as a result of being a victim of a severe form of trafficking in persons. Unless the applicant is less than 15 years of age, the applicant must also demonstrate that he or she is cooperating with law enforcement in the investigation and prosecution of the trafficking crime of which he or she was a victim. These elements may be established without submitting a Form I-914, Supplement B, but submission of the Supplement B, is strongly advised.

The Form I-914 applicant may detach Form I-914, Supplement B, and submit it to a Federal law enforcement officer familiar with the case in which he or she was a victim of a severe form of trafficking in persons. After the officer has completed the form, submit it with your application package.

#### **Section 8. Other Information**

#### Confidentiality

Information provided in the application package is confidential. It will be used to determine eligibility, to investigate the fraudulent claims, to enforce penalties for false statements, to assist in the investigation and prosecution of trafficking and related crimes, but for no other purpose. The information provided is subject to verification by the Service. However, the Service will release the information only as necessary to the stated purposes.

#### **Penalties for Perjury**

All statements contained in response to questions in this application are declared to be true and correct under penalty of perjury. Title 18, United States Code, Section 1546, provides in part:

... Whoever knowingly makes under oath, or as permitted under penalty of perjury under 1746 of Title 28, United States Code, knowingly subscribes as true, any false statement with respect to a material fact in any application, affidavit, or other document required by the immigration laws or regulations prescribed thereunder, or knowingly presents any such application, affidavit, or other document containing any such false statement shall be fined in accordance with this title or imprisoned not more than five years, or both.

The knowing placement of false information on this application may subject you and/or the preparer of this application to criminal penalties under Title 18 of the United States Code. The knowing placement of false information on this application may also subject you and/or the preparer to civil penalties under Section 274C of the Immigration and Nationality Act (INA), 8 U.S.C. 1324c. Under 8 U.S.C. 1324c, a person subject to a final order for civil document fraud is deportable from the United States and may be subject to fines.

#### **Authority for Collecting this Information**

The authority to require you to file Form I-914, Application for T Nonimmigrant Status, when applying for employment authorization is found in Public Law 106-386, Victims of Trafficking and Violence Protection Act. Information you provide on your Form I-914 is used to investigate the veracity of your claim. The information may form the basis for granting the benefit sought, or may form the basis for an investigation of a fraudulent claim. The information may also be provided to law enforcement agencies or prosecutors investigating or prosecuting crimes of trafficking or related crimes.

Failure to provide all information as requested may result in the denial or rejection of this application. The information you provide may also be disclosed to other federal, state, local and foreign law enforcement and regulatory agencies during the course of the INS investigations.

#### **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 Immigration and Naturalization Service (INS) tries to create forms and instructions which are accurate and easily understood. Often this is difficult because immigration law can be very complex. The public reporting burden for this form is estimated to average three (3) hours and twenty-five (25) minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and completing and reviewing the collection of information. The INS welcomes your comments regarding this burden estimate or any other aspect of this form, including suggestions for reducing this burden to Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington, DC 20536; OMB No. 1115-0246. DO NOT MAIL YOUR COMPLETED APPLICATION TO THIS ADDRESS.

## Application for T Nonimmigrant Status

START HERE - Please Type or Print. Use black ink. See Instructions for information about eligibility and how to complete and file this application.						, F	FOR INS USE ONLY			
PART A. Purpose for Filing the Application							Bar Code			
status.  I have a T-1 applicat  I have received T-1				e not prev	viously filed for such	-	Date Stamp			
PART B. General Info	rmation About Applicant						Remarks			
Family Name	Given Name			Middle 1	Name					
Other Names Used (If any)	  ? (Include maiden name and al	iases)		<u> </u>		-				
Residence in the U.S. (Stre	et Number and Name)	Apt. N	No.	Home P	hone )	-				
City		State			ZIP Code					
SAFE Mailing Address in	the U.S., if other than above.	Apt.	No.	Daytime	Phone	_   B	ona Fide Applica	tion		
City	City State		ate		ZIP Code	Initials	Stamp #	Date		
						c	onditional Appro	oval		
Sex Male Female	Marital Status  Single Married	Г	Divo	rced	☐ Widowed					
A# (If any)	Social Security # (If an	y)	Date o	of Birth (M	M/DD/YYYY)	Initials	Stamp #	Date		
Country of Birth			Countr	y of Citiz	enship	-	Action Block			
Passport # Issue Date (MM/DD/YYYY)			Place of Issuance			-				
I-94 #			Date of Last Entry into U.S.			-				
Place of Last Entry into U.	S.		Current INS Status			_				
PART C. Details Re	lated to T Nonimmigrant	Status				<u> </u>				
claim that you are a vice applying for T derivative resubmitted with the new Instructions for further i  1. I am a victim of a second 2. I am submitting a La	fowing questions about your of the firm of a severe form of traffice status subsequent to the Privalent Form I-914. (Attach addition formation.) Check either You evere form of trafficking in passessing the for Victim of Trafficking in In Victim Of Trafficking In In Victim Of Trafficking In In Victim Of In Vict	cking in neipal 2 and she on al she ers or No ersons.	n perso Applica eets of p o, as ap (Attack ration or	ns and the nt's inition of the new ments in the new ments of the new ments	ne specific facts on wal filing, evidence sun al filing, evidence sun needed, labeling them e. e to support your cla 914, Supplement B, I	thich you are relying opporting the original on as Part C and the mim.)  Declaration of Law	g to support you. Il application is question numbe	r claim. If only not required to b		
	sent in the United States, Am on account of trafficking.							Yes No		
	er extreme hardship involving documents supporting this c		al and s	severe ha	rm upon removal. (Ḥ	f Yes, explain in de	tail and	Yes No		

PA	RT C. T Nonimmigrant Status (Co.	ntinued)				
5.	I have reported the crime of which I am cl office you have made the report, the addre please explain the circumstances.)				Yes	□No
	Law Enforcement Agency and Office	Address	Phone No	0.		
			Case No.			
			· · · · · · · · · · · · · · · · · · ·			
6.	I am under the age of 15 years. (If Yes, pr	oceed to question 8.)			Yes	□No
7.	or prosecution of acts king them Form I-914,	Yes	□No			
8.	This is the first time I have entered the United States for the past 5 years.		late, place of entry and und	er which status you	Yes	□No
	Date of Entry	Place of Entry	Status			
9.	My most recent entry was on account of t your most recent arrival.)	he trafficking that forms the b	asis for my claim. (Explain	the circumstances of	☐ Yes	□ No
10.	I want an Employment Authorization Do	cument.			Yes	☐ No
11.	I-914, Supplement A, are now applying. You	Yes	□ No			
PA	ART D. Processing Information					
	ease answer the following questions. (If you es not necessarily mean that you are not en				oer. Answe	ring "Yes"
1.	Have you ever, in or outside the U.S.:					
	<ul><li>a. knowingly committed any crime of m</li><li>b. been arrested, cited, charged, indicted</li></ul>		•		☐ Yes	∐ No □ No
	traffic violations?				_	_
	<ul><li>c. been the beneficiary of a pardon, amr</li><li>d. exercised diplomatic immunity to avo</li></ul>	•	-	lar action?	☐ Yes	□ No
2.	Have you ever received public assistance country, city or municipality (other than the future?				Yes	□ No
3.	Have you ever:  a. within the past ten years been a prosti activities in the future?	tute or procured anyone for p	rostitution, or intend to eng	age in any such	_	□ No
	b. engaged in any unlawful commerciali c. knowingly encouraged, induced, assis	<del>-</del>		gally?	☐ Yes ☐ Yes	☐ No ☐ No
	d. illicitly trafficked in any controlled su illegal trafficking?	ibstance, firearms, or persons	or knowingly assisted, abet	tted or colluded in	Yes	□ No

PA	PART D. Processing Information (Continued)									
4.	Have you ever engaged in, conspir assassination, hijacking or any other		to engage in, sabotage, l	kidnapping, political	☐ Yes ☐ No					
5.	Have you ever solicited membersh type of material support to, any per kidnapping, political assassination,	rson or organization that has enga	aged or conspired to enga	ted or provided any age in sabotage,	Yes No					
6.	Do you intend to engage in the U.S a. espionage?	5. in:			☐ Yes ☐ No					
	b. any activity a purpose of which is States, by force, violence or other	nment of the United	☐ Yes ☐ No							
	c. any activity to violate or evade a sensitive information?	oods, technology or	☐ Yes ☐ No							
7.	Have you ever been a member of, oparty?	or in any way affiliated with, the	Communist Party or any	other totalitarian	☐ Yes ☐ No					
8.	Did you, during the period from 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 order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national orgin or political opinion?									
9.	Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin or political opinion?									
10.	0. Have you ever been deported from the U.S., or removed from the U.S. at government expense, excluded within the past year, or are you now in exclusion or deportation proceedings?									
11.	11. Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States or any immigration benefit?									
12.	Have you ever left the United State	s to avoid being drafted into the	United States Armed For	rces?	☐ Yes ☐ No					
13.	Have you ever been a J nonimmigra requirement and not yet complied v			eign residence	☐ Yes ☐ No					
14.	Are you now withholding custody child?	of a U.S. citizen child outside the	U.S. from a person gran	ited custody of the	Yes No					
15.	Do you plan to practice polygamy i	in the U.S.?			☐ Yes ☐ No					
PA	ART E. Information about Your	Family Members								
Lis	t information for each family membe	er you are now applying to have jo	oin you in the United Sta	ates.						
	Name	Family Relationship	Date of Birth (MM/DD/YYYY)	Current Loc	cation					
		-								
_										

Complete Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, for each eligible family member listed above and attach it to this application.

PART F. Attestation and Release		
After reading the information regarding penalties in the instructions, he or she must complete Part G.	, complete and sign below. If someo	ne helped you prepare this application,
I have read, or had read to me, this form, the information provided on i under the laws of the United States of America, that all of the informat submitted with it, is true and correct.		
I authorize the release of any information from my record which the Imbenefit I am seeking, to investigate my claim, and to investigate fraudu release information to law enforcement agencies and prosecutors investigate.	lent claims. I further authorize the In	nmigration and Naturalization Service to
Signature of Applicant (The Person in Part A.)		
[(Sign your name within the brackets)	_]	Date (Month/Day/Year)
PART G. Preparer and/or Translator Certification		
To be completed and signed if form is prepared by a person other than	the applicant.	
I attest, under penalty of perjury, that I have assisted in the completion correct.	of this form and that to the best of my	y knowledge the information is true and
(Preparer's/Translator's Printed Name)	(Preparer's,	/Translator's Signature)
Address	Phone Number	
Date (Month/Day/Year)	Relationship to the Applicar	nt

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

START HERE - Please Type or Print. Use black ink. See Instructions for information about eligibility and how to complete and file this application.

The recipient of the T nonimmigrant classification is referred to as the principal applicant. His/her family members are referred to as derivative applicants. The Form I-914, Supplement A, is to be completed by the principal applicant.

PART A. Relationsh	nip										
The derivative applicant	is my: (Chec	ck one)		Husband	/Wife		] Child		Parent		
PART B. Information	n about Pi	rincipal Ap <sub>l</sub>	olicant								
Family Name	Given 1	Name		Middle N	Name		Date of Birth	(MM/D	DD/YYYY)	A# (If ar	ny)
Principal applicant's application has been previously: (Check C						Submitted Found Bona	Granted C				Approval immigrant Status
PART C. Informatio	n about De	rivative Ap	plicant								
Family Name	Given 1	Name		Middle N	Name		A # (If any)			Social Se	ecurity # (If any)
Other Names Used (If any)	? (Include mo	aiden name an	d aliases)				1			1	
Intended Residence in U.S.	(Street Numb	er and Name)					Apt. No.		City		
State		ZIP Code		Home P	hone	)		Day	time Phor	ne )	
Mailing Address in the U.S	., if other than	n above.	Apt. No.		City				State		ZIP Code
Sex Male Female	Marital Statu	s Marri	ed	☐ Divo	orced	☐ Wie	dowed	Date	of Birth	(MM/DD/YY	YYY)
Names of Prior Husband/W	vives (if any) a	and Dates Mar	riages Enc	led				•			
Country of Birth	Cour	ntry of Citizen	ship	Passport #			Issue Date (MM/DD/YYYY)		Place of Issuance		
Is the Derivative Applicant currently in the United States?  Yes No (If Yes, complete the following.) He or she last arrived as a (visitor, student, stowaway, without inspection, other, please specify.)											
Has the Derivative Applica additional sheets, if necess		entered the U	nited State	s?	Yes	□ No (If Ye	es, list each prev	vious ei	ntry durin	ng the past f	ive years. Attach
Date of Entry Place		ce of Entry		Status							
Arrival/Departure Record (	(I-94) Number	r, Date arrived	, and Date	authorize	ed stay e	xpired, or will	expire. (As show	wn on I	Form I-94	4 or I-95)	

PA	RT C. Information abou	t Derivative App	licant (Continued)		
Has	family member for whom you a	re applying ever beer	under immigration proceedings	??	
	Yes No If Yes, answer the	he following:	Where:	When (MM/DD/YYYY):	
	Exclusion	Deportation	Recission	☐ Judicial Proceeding	
	your family member's spouse and tren.)	nd children. (Attach	additional sheets of paper, if ne	cessary. If family member is your spouse, list only	w his or her
	Name		Relationship	Date of Birth (MM/DD/YYYY)	Country of Birth
	you applying for employment and an action, for the family member		family member? Ye	es No (If Yes, submit a Form 1-765, Applica	ution for Employment
PA	RT D. Processing Informat	ion			
			ver is "Yes" to any one of thes will be denied T nonimmigrar	re questions, explain on a separate piece of pa nt status.)	per. Answering "Yes"
1.	Has the family member for a. knowingly committed an arrested?			nse for which he or she have not been	
	traffic violations?			r violating any law or ordinance, excluding	<ul><li>☐ Yes</li><li>☐ No</li><li>☐ Yes</li><li>☐ No</li></ul>
			esecution for a criminal offens	t of clemency or similar action? se in the U.S.?	Yes No
2.		state, country, city	or municipality (other than e	istance in the U.S. from any source, including mergency medical treatment), or is he or she	∐ Yes ☐ No
3.	Has the family member for a. within the past ten years in any such activities in the second s	been a prostitute of		ation, or does he or she intend to engage	☐ Yes ☐ No
	b. engaged in any unlawful	commercialized vi	ce, including, but not limited betted or aided any alien to try		☐ Yes ☐ No
			•	owingly assisted, abetted or colluded in	Yes No
4.	Has the family member for intend to engage in, sabotag	whom you are appl ge, kidnapping, poli	lying ever engaged in, conspiritical assassination, hijacking	red to engage in, or does he or she or any other form of terrorist activity?	Yes No
5.	Has the family member for ever assisted or provided ar	whom you are appl ny type of material	lying ever solicited membersh support to, any person or orga	nip or funds for, or through any means	Yes No
6.	Does the family member fo a. espionage?	r whom you are app	plying intend to engage in the	U.S. in:	Yes No
	b. any activity a purpose of States, by force, violence			ow of, the government of the United	☐ Yes ☐ No
	c. any activity to violate or sensitive information?	evade any law proh	libiting the export from the U	nited States of goods, technology or	
7.	Has the family member for Communist Party or any oth			or in any way affiliated with, the	☐ Yes ☐ No
8.	association with either the I	Nazi Government o of Germany, ever o	f Germany or any organization of Germany or any organization of the first of Germany or any organization of Germany organization of Germany organization organizati	March 23, 1933 to May 8, 1945, in or government associated or allied the participate in the persecution of any	☐ Yes ☐ No

PA	RT D. Processing Information (Continued)								
9.	Has the family member for whom you are applying ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin or political opinion?	☐ Yes ☐ No							
10.	10. Has the family member for whom you are applying ever been deported from the U.S., or removed from the U.S. at government expense, excluded within the past year, or is he or she now in exclusion or deportation proceedings?								
11.	11. Is the family member for whom you are applying under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act for use of fraudulent documents or has he or she, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States or any immigration benefit?								
12. Has the family member for whom you are applying ever left the United States to avoid being drafted into the United States Armed Forces?									
13.	13. Has the family member for whom you are applying ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver?								
14.	4. Is the family member for whom you are applying now withholding custody of a U.S. citizen child outside the U.S. from a person granted custody of the child?								
15.	Does the family member for whom you are applying plan to practice polygamy in the U.S.?	☐ Yes ☐ No							
PA	PART E. Attestation and Release								
	Derivative Applicant, the family member for whom you are applying, must sign below if he or she is presently in the Uniteone helped you prepare this supplementary application, he or she must complete Part F.	ited States. If							
und and I au bene the	I have read, or had read to me, this form, the information provided on it, and the evidence provided with it, and certify, under penalty of perjury under the laws of the United States of America, that the information on this supplementary application and the evidence submitted with it are true and correct.  I authorize the release of any information from the record which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking for the family member for whom I am applying, to investigate my claim, and to investigate fraudulent claims. I further authorize the Immigration and Naturalization Service to release information to law enforcement agencies and prosecutors investigating or prosecuting crimes of trafficking or related crimes.								
ſ	]								
_	nature of Derivative Applicant (The family member for whom you Date (Mon e applying.)	th/Day/Year)							
Г	]								
L	Signature of Principal (Sign your name within the brackets)  Date (Mon	nth/Day/Year)							
PA	RT F. Preparer and/or Translator Certification								
То	be completed and signed if form is prepared by a person other than the applicant.								
	test, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the inferect.	ormation is true and							
	(Preparer's/Translator's Printed Name) (Preparer's/Translator's Signatu	ure)							
Ado	dress Phone Number								
Dat	e (Month/Day/Year) Relationship to the Applicant								
WA.	RNING: Applicants who are in the United States illegally are subject to removal if their claims are not granted. Any	information							

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

PART G. Checklist	
<ul> <li>I completely filled out and signed the form.</li> <li>I have attached evidence that:</li> <li>I am a victim of a severe form of trafficking;</li> <li>I am physically present in the United States on account of trafficking;</li> <li>I am cooperating with the government in the investigation/prosecution of the traffickers (unless under age 15); and</li> <li>I would suffer extreme hardship involving unusual and severe harm upon removal from the United States.</li> </ul>	
<ul> <li>I have included three photographs of myself.</li> <li>I have attached a check or money order for the required fees.</li> </ul>	
<ul> <li>the fee for filing this application;</li> <li>the fingerprinting fee for the applicant, if the applicant is between the ages of 14 and 79 inclusive, and</li> <li>if the applicant is also currently filing for family members, the appliant is responsible for additional charges, as detailed in the instruction Form I-914, Supplement A.</li> </ul>	ns to
If I am applying for one or more family members:	
I have completed a Form I-914, Supplement A for each member for whom I am now applying and, if he or she is in the United States, each family member has signed that Form I-914, Supplement A.	
<ul> <li>I have submitted the required evidence, including evidence of:</li> <li>my relationship to the family member for whom I am applying;</li> <li>my age, if I am applying for my parent;</li> <li>my child's age, if I am applying for my child; and</li> <li>the extreme hardship that either I or my family member will suffer, if my family member is not permitted to join me in the United States.</li> </ul>	
<ul> <li>I have included three photographs of each family member for whom I am now applying.</li> <li>I have included a Form I-765 Application for Employment Authorization, if I am requesting employment authorization for my family member</li> <li>I have attached a check or money order for the required fees.</li> </ul>	er.
The required fees include:  • the fee for filing this supplementary application;	

- the fingerprinting this supplementary application,
  the fingerprinting fee for the applicant, if the applicant is between 14 and 79; and
- the filing fee for Form I-765, Application for Employment Authorization, if the family member is requesting employment authorization.

NOTE: The required fees are posted at the INS website, at http://www.ins.usdoj.gov, and are also available from the INS National Customer Service Center, at 1-800-375-5283.

additional sheets, if necessary.

### Declaration of Law Enforcement Officer for Victim of Trafficking in Persons

**Instructions to Certifying Officer:** This applicant is applying for immigration benefits based upon a claim of having been a victim of a severe form of trafficking in persons. Please complete the form below based upon your knowledge of the case, including evidence developed by other law enforcement officers investigating the case.

In order to be granted immigration benefits, the applicant must demonstrate that he or she is present in the United States as a result of being a victim of a severe form of trafficking in persons. Unless the applicant is less than 15 years old, the applicant must also demonstrate that he or she is cooperating with law enforcement in the investigation and prosecution of the trafficking crime of which he or she was a victim.

To be completed by Federal Law Enforcement Officers for victims under the Victims of Trafficking and Violence Protection Act, Public Law 106-386.

PART A. General Information									
Name of Government Agency:  Immigration and Naturalization Service, DOJ  Civil Rights Division, DOJ	☐ U.S. Marshall's Service, DOJ ☐ Federal Bureau of Investigation, DOJ ☐ Criminal Division, DOJ			U.S. Attorney's Office Dept. of State Diplomatic Security Other					Date
Address of Agency/Official				Name and	Title of C	Certify	ring Officer of	or Offi	icial
City	State ZIP Code		Phone No.				Fax	No. <b>)</b>	
Victim's Name		Other Names	Used		Sex		Male Female	Date	e of Birth (MM/DD/YYYY)
Date of Crime	Charges							Case	e No.
Date Initiated (MM/DD/YYYY)	ate Initiated (MM/DD/YYYY)  Case Status  On-going Completed N/A				e Comple	eted (M	MM/DD/YYYY	Y)	FBI Identification No., if any
PART B. Statement of Claim									
1. The applicant is a victim of a s							,		****
☐ Sex trafficking in which a transportation, provision,								g mea	ns the recruitment, harboring,
☐ Sex trafficking and the vi	ctim is und	er the age of	18.						
The recruitment, harboring coercion for the purpose of								ough	the use of force, fraud or
☐ Not applicable.									
Other, please specify on a	attached add	ditional shee	ts.						
Please describe the victimization upon which the applicant's claim is based and identify the relationship between that victimization and the crime under investigation/prosecution. Attach the results of any name or database inquiry performed in the investigation of the case. Please include relevant dates, etc. Has the applicant expressed any fear of retaliation or revenge if removed from the United States? Explain. Attach									

PART C. Cooperation of Victim (Attach additional sheets,	if necessary.)					
The applicant:  Has complied with requests for assistance in the inve Has failed to comply with requests to assist in the inv Has not been requested to assist in the investigation/p Has not yet attained the age of 15.  Other, please specify on attached additional sheets.	vestigation/prosecution of the crime of trafficking					
PART D. Family Members						
the relatives and describe that relative's	s involvement in the applicant's trafficking.					
PART E. Attestation						
Based upon investigation of the facts, I certify, under penalty of perjury, that the above noted individual is or has been a victim of a severe form of trafficking in persons as defined by the VTVPA. 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 above victim's ability to obtain a visa from the Immigration and Naturalization Service, based upon this certification.						
(Signature of Law Enforcement Officer identified in Box A above)		Date (Month/Day/Year)				
(Signature of Supervisor of Certifying Officer)	(Printed Name of Supervisor)	Date (Month/Day/Year)				