

Formulário I-589, Solicitação de Asilo e Retenção de Remoção

Informações para migrantes recém-chegados e solicitantes de asilo



Seattle
Office of Immigrant
and Refugee Affairs

Março de 2024

Northwest
IMMIGRANT
RIGHTS
Project

USCIS.gov/i589

uscis.gov/i-589

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I-589, Application for Asylum and for Withholding of Removal

ALERT: Applying for Asylum with USCIS for Ms. L. Settlement Class Members
[See more](#) ▼

ALERT: Filing Tips for Affirmative Asylum Applications
[See more](#) ▼

Activate Windows
Go to Settings to activate Windows.

Need help? Ask Emma

below to learn whether you may file your Form I-589 online, or if you must file by mail.

Form Details

[Close All](#) [Open All](#)

Forms and Document Downloads [^](#)

- [Form I-589 \(PDF, 391.82 KB\)](#)
- [Instructions for Form I-589 \(PDF, 143.49 KB\)](#)

Edition Date [▼](#)

Página 1. Informações sobre você

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

U.S. Department of Justice
Executive Office for Immigration Review

OMB No. 1615-0067; Expires 06/30/2026

I-589, Application for Asylum and for Withholding of Removal

START HERE - Type or print in black ink. See the instructions for information about eligibility and how to complete and file this application. There is no filing fee for this application.

NOTE: Check this box if you also want to apply for withholding of removal under the Convention Against Torture.

Part A.I. Information About You			
1. Alien Registration Number(s) (A-Number) (if any) A 123-456-789		2. U.S. Social Security Number (if any)	3. USCIS Online Account Number (if any)
4. Complete Last Name Doe		5. First Name Fulanito	6. Middle Name
7. What other names have you used (include maiden name and aliases)? John Doe			
8. Residence in the U.S. (where you physically reside)			
Street Number and Name 1234 56th St		Apt. Number 7	
City Seattle	State WA	Zip Code 98000	Telephone Number (206) 555-5555
(NOTE: You must be residing in the United States to submit this form.)			
9. Mailing Address in the U.S. (if different than the address in Item Number 8)			
In Care Of (if applicable): Cousin Mary		Telephone Number ()	
Street Number and Name PO BOX 98765		Apt. Number	
City Seattle	State WA	Zip Code 980000	

Página 1. Informações sobre você

10. Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		11. Marital Status: <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	
12. Date of Birth (mm/dd/yyyy) 01/01/1990		13. City and Country of Birth Caracas, Venezuela	
14. Present Nationality (Citizenship) Venezuelan/Colombian		15. Nationality at Birth Venezuelan	16. Race, Ethnic, or Tribal Group
		17. Religion Catholic	
18. Check the box, a through c, that applies: a. <input type="checkbox"/> I have never been in Immigration Court proceedings.			
b. <input checked="" type="checkbox"/> I am now in Immigration Court proceedings. c. <input type="checkbox"/> I am not now in Immigration Court proceedings, but I have been in the past.			
19. Complete 19 a through c.			
a. When did you last leave your country? (mm/dd/yyyy) <u>01/01/2023</u> b. What is your current I-94 Number, if any? _____			
c. List each entry into the U.S. beginning with your most recent entry. List date (mm/dd/yyyy), place, and your status for each entry. (Attach additional sheets as needed.)			
Date <u>01/01/2024</u>	Place <u>Texas</u>	Status <u>No Status</u>	Date Status Expires _____
Date _____	Place _____	Status _____	_____
Date _____	Place _____	Status _____	_____
20. What country issued your last passport or travel document? None		21. Passport Number _____ Travel Document Number _____	
		22. Expiration Date (mm/dd/yyyy) _____	
23. What is your native language (include dialect, if applicable)? Spanish		24. Are you fluent in English? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		25. What other languages do you speak fluently? _____	
For EOIR use only.		Action: Interview Date: _____ Asylum Officer ID No.: _____	
For USCIS use only.		Decision: Approval Date: _____ Denial Date: _____ Referral Date: _____	



Passport Number
813106636 11

Department of Homeland Security
CBP I-94A (11/04)
Departure Record

L1
12345
09/17/2007

Roll's Name
SAMPLE
First Name
AHMET
Country of Citizenship
PAKISTAN
20041122 US-VISIT 20050207 MULTIPLE

See Other Side STAPLE HERE



Página 2. Informações sobre sua família

Part A.II. Information About Your Spouse and Children

Your spouse

I am not married. (Skip to **Your Children** below.)

1. Alien Registration Number (A-Number) <i>(if any)</i>	2. Passport/ID Card Number <i>(if any)</i>	3. Date of Birth (mm/dd/yyyy)	4. U.S. Social Security Number <i>(if any)</i>
5. Complete Last Name	6. First Name	7. Middle Name	8. Other names used (include maiden name and aliases)
9. Date of Marriage (mm/dd/yyyy)	10. Place of Marriage	11. City and Country of Birth	
12. Nationality (Citizenship)	13. Race, Ethnic, or Tribal Group	14. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
15. Is this person in the U.S.? <input type="checkbox"/> Yes (Complete Blocks 16 to 24.) <input type="checkbox"/> No (Specify location):			
16. Place of last entry into the U.S.	17. Date of last entry into the U.S. (mm/dd/yyyy)	18. I-94 Number (if any)	19. Status w <i>(Visa typ</i>
20. What is your spouse's current status?	21. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy)	22. Is your spouse in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	23. If previ previous
24. If in the U.S., is your spouse to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No			

Your Children. List all of your children, regardless of age, location, or marital status.

I do not have any children. (Skip to Part A.III., Information about your background.)

I have children. Total number of children: _____

(NOTE: Use Form I-589 Supplement A or attach additional sheets of paper and documentation if you have more than four children.)

1. Alien Registration Number (A-Number) <i>(if any)</i>	2. Passport/ID Card Number <i>(if any)</i>	3. Marital Status (Married, Single, Divorced, Widowed)	4. U.S. Social Security Number <i>(if any)</i>
5. Complete Last Name	6. First Name	7. Middle Name	8. Date of Birth (mm/dd/yyyy)
9. City and Country of Birth	10. Nationality (Citizenship)	11. Race, Ethnic, or Tribal Group	12. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S. ? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location):			
14. Place of last entry into the U.S.	15. Date of last entry into the U.S. (mm/dd/yyyy)	16. I-94 Number (If any)	17. Status when last admitted <i>(Visa type, if any)</i>
18. What is your child's current status?	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy)	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No			

Página 2. Informações sobre sua família

Part A.II. Information About Your Spouse and Children

Your spouse I am not married. (Skip to **Your Children** below.)

1. Alien Registration Number (A-Number) <i>(if any)</i>		2. Passport/ID Card Number <i>(if any)</i>		3. Date of Birth <i>(mm/dd/yyyy)</i>		4. U.S. Social Security Number <i>(if any)</i>	
123456789				01/01/1900			
5. Complete Last Name			6. First Name		7. Middle Name		8. Other names used <i>(include maiden name and aliases)</i>
Fulano de Tal			Don				
9. Date of Marriage <i>(mm/dd/yyyy)</i>			10. Place of Marriage			11. City and Country of Birth	
01/01/1900						Caracas, Venezuela	
12. Nationality <i>(Citizenship)</i>			13. Race, Ethnic, or Tribal Group			14. Gender	
Venezuela			Latino			<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	
15. Is this person in the U.S.? <input checked="" type="checkbox"/> Yes <i>(Complete Blocks 16 to 24.)</i> <input type="checkbox"/> No <i>(Specify location):</i> _____							
16. Place of last entry into the U.S.		17. Date of last entry into the U.S. <i>(mm/dd/yyyy)</i>		18. I-94 Number <i>(if any)</i>		19. Status when last admitted <i>(Visa type, if any)</i>	
Texas		01/01/1900				No status	
20. What is your spouse's current status?		21. What is the expiration date of his/her authorized stay, if any? <i>(mm/dd/yyyy)</i>		22. Is your spouse in Immigration Court proceedings?		23. If previously in the U.S., date of previous arrival <i>(mm/dd/yyyy)</i>	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
24. If in the U.S., is your spouse to be included in this application? <i>(Check the appropriate box.)</i>							
<input checked="" type="checkbox"/> Yes							
<input type="checkbox"/> No							

Páginas 2-3. Informações sobre sua família

Your Children. List **all** of your children, regardless of age, location, or marital status.

I do not have any children. *(Skip to Part A.III., Information about your background.)*

I have children. Total number of children: 2

(NOTE: Use Form I-589 Supplement A or attach additional sheets of paper and documentation if you have more than four children.)

1. Alien Registration Number (A-Number) <i>(if any)</i> 123456789	2. Passport/ID Card Number <i>(if any)</i>	3. Marital Status <i>(Married, Single, Divorced, Widowed)</i> single	4. U.S. Social Security Number <i>(if any)</i>
5. Complete Last Name Doe	6. First Name Jane	7. Middle Name	8. Date of Birth <i>(mm/dd/yyyy)</i> 01/01/1990
9. City and Country of Birth Luanda, Angola	10. Nationality <i>(Citizenship)</i> Angolan	11. Race, Ethnic, or Tribal Group Ovimbundu	12. Gender <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
13. Is this child in the U.S. ? <input type="checkbox"/> Yes <i>(Complete Blocks 14 to 21.)</i> <input checked="" type="checkbox"/> No <i>(Specify location):</i> Angola			
14. Place of last entry into the U.S.	15. Date of last entry into the U.S. <i>(mm/dd/yyyy)</i>	16. I-94 Number <i>(If any)</i>	17. Status when last admitted <i>(Visa type, if any)</i>
18. What is your child's current status?	19. What is the expiration date of his/her authorized stay, if any? <i>(mm/dd/yyyy)</i>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? <i>(Check the appropriate box.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			

Página 4. Informações sobre o seu passado

Part A.III. Information About Your Background

1. List your last address where you lived before coming to the United States. If this is not the country where you fear persecution, also list the last address in the country where you fear persecution. *(List Address, City/Town, Department, Province, or State and Country.)*
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street <i>(Provide if available)</i>	City/Town	Department, Province, or State	Country	Dates	
				From <i>(Mo/Yr)</i>	To <i>(Mo/Yr)</i>
Colonia Lopez Arellano	San Pedro Sula	Cortes	Honduras	06/1996	02/2023

2. Provide the following information about your residences during the past 5 years. List your present address first.
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street	City/Town	Department, Province, or State	Country	Dates	
				From <i>(Mo/Yr)</i>	To <i>(Mo/Yr)</i>
3118 S 140th St	Tukwila	Washington	United States	03/2023	Present

Página 4. Informações sobre o seu passado

3. Provide the following information about your education, beginning with the most recent school that you attended.

(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name of School	Type of School	Location (Address)	Attended	
			From (Mo/Yr)	To (Mo/Yr)
School #4	University	Tegucigalpa, Honduras	08/2014	06/2016
School #3	High School	San Pedro Sula, Honduras	08/2010	05/2014
School #2	Middle School	San Pedro Sula, Honduras	08/2005	05/2010
School #1	Primary School	San Pedro Sula, Honduras	08/2001	05/2005

4. Provide the following information about your employment during the past 5 years. List your present employment first.

(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name and Address of Employer	Your Occupation	Dates	
		From (Mo/Yr)	To (Mo/Yr)
Tienda Feliz, Tegucigalpa, Honduras	Owner	01/2017	01/2023

Página 4. Informações sobre o seu passado

5. Provide the following information about your parents and siblings (brothers and sisters). Check the box if the person is deceased.
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Full Name	City/Town and Country of Birth	Current Location
<i>Mother</i> Maria Perez de Lopez	San Pedro Sula, Honduras	<input checked="" type="checkbox"/> Deceased
<i>Father</i> Juan Lopez Carrion	Tegucigalpa, Honduras	<input type="checkbox"/> Deceased Honduras
<i>Sibling</i> Juanito Lopez Perez	San Pedro Sula, Honduras	<input type="checkbox"/> Deceased Honduras
<i>Sibling</i> Juanita Lopez Perez	San Pedro Sula, Honduras	<input type="checkbox"/> Deceased Seattle, WA, USA
<i>Sibling</i>		<input type="checkbox"/> Deceased
<i>Sibling</i>		<input type="checkbox"/> Deceased



Página 5. Informações sobre sua solicitação

Part B. Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part B.)

When answering the following questions about your asylum or other protection claim (withholding of removal under 241(b)(3) of the INA or withholding of removal under the Convention Against Torture), you must provide a detailed and specific account of the basis of your claim to asylum or other protection. To the best of your ability, provide specific dates, places, and descriptions about each event or action described. You must attach documents evidencing the general conditions in the country from which you are seeking asylum or other protection and the specific facts on which you are relying to support your claim. If this documentation is unavailable or you are not providing this documentation with your application, explain why in your responses to the following questions.

Refer to Instructions, Part 1: Filing Instructions, Section II, "Basis of Eligibility," Parts A - D, Section V, Completing the Form," Part B, and Section VII, "Additional Evidence That You Should Submit," for more information on completing this section of the form.

1. Why are you applying for asylum or withholding of removal under section 241(b)(3) of the INA, or for withholding of removal under the Convention Against Torture? Check the appropriate box(es) below and then provide detailed answers to questions A and B below.

I am seeking asylum or withholding of removal based on:

- | | |
|--|---|
| <input type="checkbox"/> Race | <input type="checkbox"/> Political opinion |
| <input checked="" type="checkbox"/> Religion | <input checked="" type="checkbox"/> Membership in a particular social group |
| <input type="checkbox"/> Nationality | <input checked="" type="checkbox"/> Torture Convention |

A. Have you, your family, or those friends or colleagues ever experienced harm or mistreatment or threats in the past by anyone?

- No Yes

If "Yes," explain in detail:

1. What happened;
2. When the harm or mistreatment or threats occurred;
3. Who caused the harm or mistreatment or threats; and
4. Why you believe the harm or mistreatment or threats occurred.

B. Do you fear harm or mistreatment if you return to your home country?

- No Yes

If "Yes," explain in detail:

1. What harm or mistreatment you fear;
2. Who you believe would harm or mistreat you; and
3. Why you believe you would or could be harmed or mistreated.

Raça

Opinião política

Religião

Grupo social específico

Nacionalidade

Convenção Contra a Tortura

O que aconteceu?

O quê, quem e por quê?

Páginas 6-7. Informações sobre sua solicitação

Part B. Information About Your Application (Continued)

2. Have you or your family members ever been accused, charged, arrested, detained, interrogated, convicted and sentenced, or imprisoned in any country other than the United States (including for an immigration law violation)?

No Yes

If "Yes," explain the circumstances and reasons for the action.

- 3.A. Have you or your family members ever belonged to or been associated with any organizations or groups in your home country, such as, but not limited to, a political party, student group, labor union, religious organization, military or paramilitary group, civil patrol, guerrilla organization, ethnic group, human rights group, or the press or media?

No Yes

If "Yes," describe for each person the level of participation, any leadership or other positions held, and the length of time you or your family members were involved in each organization or activity.

- 3.B. Do you or your family members continue to participate in any way in these organizations or groups?

No Yes

If "Yes," describe for each person your or your family members' current level of participation, any leadership or other positions currently held, and the length of time you or your family members have been involved in each organization or group.

4. Are you afraid of being subjected to torture in your home country or any other country to which you may be returned?

No Yes

If "Yes," explain why you are afraid and describe the nature of torture you fear, by whom, and why it would be inflicted.

Part C. Additional Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part C.)

1. Have you, your spouse, your child(ren), your parents or your siblings ever applied to the U.S. Government for refugee status, asylum, or withholding of removal?

No Yes

If "Yes," explain the decision and what happened to any status you, your spouse, your child(ren), your parents, or your siblings received as a result of that decision. Indicate whether or not you were included in a parent or spouse's application. If so, include your parent or spouse's A-number in your response. If you have been denied asylum by an immigration judge or the Board of Immigration Appeals, describe any change(s) in conditions in your country or your own personal circumstances since the date of the denial that may affect your eligibility for asylum.

- 2.A. After leaving the country from which you are claiming asylum, did you or your spouse or child(ren) who are now in the United States travel through or reside in any other country before entering the United States?

No Yes

- 2.B. Have you, your spouse, your child(ren), or other family members, such as your parents or siblings, ever applied for or received any lawful status in any country other than the one from which you are now claiming asylum?

No Yes

If "Yes" to either or both questions (2A and/or 2B), provide for each person the following: the name of each country and the length of stay, the person's status while there, the reasons for leaving, whether or not the person is entitled to return for lawful residence purposes, and whether the person applied for refugee status or for asylum while there, and if not, why he or she did not do so.

3. Have you, your spouse or your child(ren) ever ordered, incited, assisted or otherwise participated in causing harm or suffering to any person because of his or her race, religion, nationality, membership in a particular social group or belief in a particular political opinion?

No Yes

If "Yes," describe in detail each such incident and your own, your spouse's, or your child(ren)'s involvement.

Página 8. Informações sobre sua solicitação

Part C. Additional Information About Your Application (Continued)

4. After you left the country where you were harmed or fear harm, did you return to that country?

No Yes

If "Yes," describe in detail the circumstances of your visit(s) (for example, the date(s) of the trip(s), the purpose(s) of the trip(s), and the length of time you remained in that country for the visit(s).)

5. Are you filing this application more than 1 year after your last arrival in the United States?

No Yes

If "Yes," explain why you did not file within the first year after you arrived. You must be prepared to explain at your interview or hearing why you did not file your asylum application within the first year after you arrived. For guidance in answering this question, see Instructions, Part I: Filing Instructions, Section V, "Completing the Form," Part C.

6. Have you or any member of your family included in the application ever committed any crime and/or been arrested, charged, convicted, or sentenced for any crimes in the United States (including for an immigration law violation)?

No Yes

If "Yes," for each instance, specify in your response: what occurred and the circumstances, dates, length of sentence received, location, the duration of the detention or imprisonment, reason(s) for the detention or conviction, any formal charges that were lodged against you or your relatives included in your application, and the reason(s) for release. Attach documents referring to these incidents, if they are available, or an explanation of why documents are not available.

Você perdeu o prazo de um ano?



Página 9. Sua assinatura

Escreva seu nome

E

Não se esqueça
de assinar
seu formulário!

Part D. Your Signature

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it are all true and correct. Title 18, United States Code, Section 1546(a), provides in part: Whoever knowingly makes under oath, or as permitted under penalty of perjury under Section 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 or which fails to contain any reasonable basis in law or fact - shall be fined in accordance with this title or imprisoned for up to 25 years. I certify that I am physically present in the United States or seeking admission at a Port of Entry when I execute this application. I authorize the release of any information from my immigration record that U.S. Citizenship and Immigration Services (USCIS) needs to determine eligibility for the benefit I am seeking.

WARNING: Applicants who are in the United States unlawfully are subject to removal if their asylum or withholding claim: are not granted by an asylum officer or an immigration judge. 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. Applicants determined to have knowingly made a frivolous application for asylum will be permanently ineligible for any benefits under the Immigration and Nationality Act. You may not avoid a frivolous finding simply because someone advised you to provide false information in your asylum application. If filing with USCIS, unexcused failure to appear for an appointment to provide biometrics (such as fingerprints) and your biographical information within the time allowed may result in an asylum officer dismissing your asylum application or referring it to an immigration judge. Failure without good cause to provide DHS with biometrics or other biographical information while in removal proceedings may result in your application being found abandoned by the immigration judge. See sections 208(d)(5)(A) and 208(d)(6) of the INA and 8 CFR sections 208.10, 1208.10, 208.20, 1003.47(d) and 1208.20.

Print your complete name _____ Write your name in your native alphabet _____

Did your spouse, parent, or child(ren) assist you in completing this application? No Yes (If "Yes," list the name and relationship.)

(Name) (Relationship) _____ (Name) (Relationship)

Did someone other than your spouse, parent, or child(ren) prepare this application? No Yes (If "Yes," complete Part E.)

Asylum applicants may be represented by counsel. Have you been provided with a list of persons who may be available to assist you, at little or no cost, with your asylum claim? No Yes

Signature of Applicant (The person in Part A.I.)

➔ [_____] _____
Sign your name so it all appears within the brackets Date (mm/dd/yyyy)

Part E. Declaration of Person Preparing Form, if Other Than Applicant, Spouse, Parent, or Child

I declare that I have prepared this application at the request of the person named in Part D, that the responses provided are based on all information of which I have knowledge, or which was provided to me by the applicant, and that the completed application was read to the applicant in his or her native language or a language he or she understands for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information on the Form I-589 may also subject me to civil penalties under 8 U.S.C. 1324c and/or criminal penalties under 18 U.S.C. 1546(a).

Signature of Preparer _____		Print Complete Name of Preparer _____	
Daytime Telephone Number _____ () _____		Address of Preparer: Street Number and Name _____	
Apt. Number _____	City _____	State _____	Zip Code _____
To be completed by an attorney or accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney State Bar Number (if applicable) _____	Attorney or Accredited Representative USCIS Online Account Number (if any) _____



Documentos a serem apresentados com sua solicitação de asilo

Northwest
IMMIGRANT
RIGHTS
Project

Arquive sua solicitação de asilo

Northwest
IMMIGRANT
RIGHTS
Project

Arquivamento no Tribunal de Imigração

An official website of the United States government [Here's how you know](#)

EOIR | Automated Case Information

Court Closures Today June 15, 2022 | Please check <https://www.justice.gov/eoir-operational-status> for up to date closures.

English

Automated Case Information

Welcome to the Automated Case Information system. The following information relates to the primary case only. Please contact your local court if you need bond hearing information.

If you are a recent arrival and were apprehended between ports of entry on or after May 28, 2021, placed in removal proceedings, and enrolled in Alternatives to Detention, please see the [Family Group Legal](#)

Enter your A-Number

A-Number *Required [? What's an A-Number?](#)

SUBMIT

ⓘ Case information from this automated resource is provided for convenience only. Documents the immigration court or Board of Immigration Appeals issue to you or your representative are the only official determinations related to your case.

Enter your A-Number

A-Number *Required [? What's an A-Number?](#)

No case found for this A-Number.

SUBMIT

ⓘ Case information from this automated resource is provided for convenience only. Documents the immigration court or Board of Immigration Appeals issue to you or your representative are the only official determinations related to your case.

Arquivamento no Serviço de Cidadania e Imigração dos EUA (USCIS)



The screenshot displays the USCIS My Account website interface. At the top left is the USCIS logo and the text "U.S. Citizenship and Immigration Services". To the right is a "My Account" link with a user icon. Further right are links for "My Account", "Resources", and "Sign Out". The main content area features a blue header with the text "Welcome To Your USCIS Account" and "Select What You Want To Do". Below this are four white boxes, each with an icon and a title: "Add a paper-filed case" (with a folder icon), "File a form online" (with a document icon), "Enter a representative passcode" (with a lock icon), and "Verify your identity" (with a person icon). Each box contains a brief description of the service. At the bottom, there is a "Return to top" link and a navigation bar with links for "Topics", "Citizenship", "Schedule an Appointment", "Find a Doctor", and "Find a Class".

U.S. Citizenship and Immigration Services

My Account

My Account ▾ Resources ▾ Sign Out

Welcome To Your USCIS Account

Select What You Want To Do

- Add a paper-filed case**
View your case status and case history by adding your case to your account
- File a form online**
Start a new form, upload evidence, and pay and submit online
- Enter a representative passcode**
Review and sign forms prepared for you by your attorney or representative
- Verify your identity**
Answer questions about your immigration history to verify your personal identity

[Return to top](#)

Topics Citizenship Schedule an Appointment Find a Doctor Find a Class

Consulta de Biometria



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

Form I-797C, Notice of Action

THIS NOTICE DOES NOT GRANT ANY IMMIGRATION STATUS OR BENEFIT.

ASC Appointment Notice	APPLICATION NUMBER 111-1234567890	APPLICANT'S NAME JOHN DOE	APPOINTMENT DATE 11/15/12
Case File BGD: Cons-Action of Deferral Action For Children's Arrivals	APPLICANT'S ADDRESS 123 Main St Main City, ST 12345	APPLICANT'S PHONE 555-123-4567	APPLICANT'S SIGNATURE [Signature]

John Doe
123 Main St
Main City, ST 12345

To process your application, the U.S. Citizenship & Immigration Services (CIS) must capture your biometrics. PLEASE APPEAR AT THE BELOW APPLICATION SUPPORT CENTER AT THE DATE AND TIME SCHEDULED. IF YOU FAIL TO APPEAR AS SCHEDULED, YOUR APPLICATION WILL BE CONSIDERED ABANDONED.

APPLICATION SUPPORT CENTER: USCIS Main City, 123 Main City Rd, Main City, ST 12345
PLEASE READ THIS ENTIRE NOTICE CAREFULLY.
DATE AND TIME OF APPOINTMENT: 11/15/12, 11:00 PM

WHEN YOU GO TO THE APPLICATION SUPPORT CENTER TO HAVE YOUR BIOMETRICS TAKEN, YOU MUST BRING:
1. THIS APPOINTMENT NOTICE, and
2. PROVE IDENTIFICATION. Applicants must bring their Permanent Resident Card/Student Status Card, or a passport, driver's license, national ID, military ID, or state-issued photo ID. If you appear without proper identification, your biometrics may not be taken.

CELL PHONES, CAMERAS, OR OTHER RECORDING DEVICES ARE NOT PERMITTED.
REQUEST FOR BENCH SCHEDULING

Please reschedule this appointment. Upon receipt of your request, we will try to provide a new appointment earlier. Make a copy of this notice for your records. Download the only real work management to PDF. Download PDF. Scan 100. 8000. Download PDF. Download PDF. Download PDF.

BIOMETRICS PROCESSING STAMP
ASC SITE CODE: 111
BIOMETRICS QA REVIEW BY: 202703 ON 9-5-12
BIOMETRICS QA REVIEW BY: 202707 ON 9-5-12

If you have any questions regarding this notice, please call 1-800-375-5282.

WARNING: This is a limited mailing distribution to our highly sensitive and personal information. It is not to be disseminated or published. The biometrics will be used for your application. If you have any questions or concerns, please contact the USCIS. We are available to you approximately 24 hours a day, 7 days a week, including weekends and holidays.

Entrevista de Asilo e Tribunal de Imigração



Entrevista com um agente de asilo do USCIS



Uma representação de uma audiência típica em um Tribunal de Imigração. Ilustração de Michael Elizabeth Johnson.

Benefícios de asilo

- Status sem limite de tempo
- Autorização de trabalho
- Acesso a certos benefícios públicos e assistência a refugiados
- Status derivado para cônjuge e filhos solteiros com menos de 21 anos (solicitação dentro de 2 anos após a concessão de asilo)
- Poder viajar com documento de viagem de refugiado
- Ajuste de status (“green card”) após 1 ano
- Caminho para a cidadania

Para obter mais ajuda
sobre imigração,
visite nwirp.org

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