

## DEPARTMENT OF THE INTERIOR

## National Park Service

**Notice of Inventory Completion for Native American Human Remains and an Associated Funerary Object From Park County, MT in the Possession of the Buffalo Bill Historical Center, Cody, WY**

AGENCY: National Park Service.

ACTION: Notice.

Notice is hereby given in accordance with provisions of the Native American Graves Protection and Repatriation Act (NAGPRA), 25 U.S.C. 3003 (d), of the completion of an inventory of human remains and an associated funerary object in the possession of the Buffalo Bill Historical Center, Cody, WY.

A detailed assessment of the human remains was made by Buffalo Bill Historical Center professional staff in consultation with representatives of the Crow Tribe of Montana.

In 1974, human remains representing one individual were removed from the Fricker Ranch by Federal Bureau of Investigation personnel following notification by the Park County Coroner that human remains had been discovered. In 1974, these human remains were donated to Buffalo Bill Historical Center by Mr. and Mrs. Eugene Gardner of the Fricker Ranch. No known individuals were identified. The associated funerary object is a nickel pendant with a date of 1835.

Based on posterior cradle deformation, shovel incisors, and dental wear patterns, this individual has been identified as Native American, specifically from the Northern Plains. Based on the date of the pendant, this burial is estimated to date to circa the mid-nineteenth century. Historical documents indicate that Park County was well within the Crow territory of the nineteenth century.

Based on the above mentioned information, officials of the Buffalo Bill Historical Center have determined that, pursuant to 43 CFR 10.2(d)(1), the human remains listed above represent the physical remains of one individual of Native American ancestry. Officials of the Buffalo Bill Historical Center have also determined that, pursuant to 25 U.S.C. 3001(3)(A), the one object listed above is reasonably believed to have been placed with or near individual human remains at the time of death or later as part of the death rite or ceremony. Lastly, officials of the Buffalo Bill Historical Center have determined that, pursuant to 25 U.S.C. 3001(2), there is a relationship of shared group

identity which can be reasonably traced between these Native American human remains and associated funerary object and the Crow Tribe of Montana.

This notice has been sent to officials of the Crow Tribe of Montana, the Blackfoot Tribe of the Blackfoot Indian Reservation, and the Shoshone Tribe of the Wind River Reservation. Representatives of any other Indian tribe that believes itself to be culturally affiliated with these human remains and associated funerary objects should contact Emma I. Hansen, Curator, Buffalo Bill Historical Center, 720 Sheridan Avenue, Cody, WY 82414; telephone: (307) 587-4771, before December 18, 1997. Repatriation of the human remains and associated funerary objects to the Crow Tribe of Montana may begin after that date if no additional claimants come forward.

Dated: November 5, 1997.

**Francis P. McManamon,**  
*Departmental Consulting Archeologist,  
Manager, Archeology and Ethnography  
Program.*

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## DEPARTMENT OF JUSTICE

## Immigration and Naturalization Service

**Agency Information Collection Activities: Proposed Collection; Comment Request**

**ACTION:** Extension of existing collection. Application for asylum and withholding of removal.

The Department of Justice, Immigration and Naturalization Service has submitted the following information collection request to the Office of Management and Budget (OMB) for review and clearance in accordance with the Paperwork Reduction Act of 1995. The information collection was previously published in the **Federal Register** on July 14, 1997 at 62 FR 37604, allowing for an emergency extension with 60-day public comment period. The INS received 11 comments on the information collection from members of the general public, immigration practitioner, various components of the Executive Office for Immigration Review and non-governmental organizations. The comments have been reconciled and the collection revised as appropriate.

The purpose of this notice is to allow an additional 30 days for public comments. Comments are encouraged and will be accepted until December 18,

1997. This process is conducted in accordance with 5 CFR 1320.10.

Written comments, and/or suggestions regarding the items contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the Office of Management and Budget, Office of Information and Regulatory Affairs, *Attention:* Ms. Debra Bond, 202-395-7316, Department of Justice Desk Officer, Room 10235, Washington, DC 20530.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information should address one or more of the following four points:

(1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(2) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(3) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

Overview of this information collection:

(1) *Type of Information Collection:* Extension of a currently approved collection.

(2) *Title of the Form/Collection:* Application for Asylum and Withholding of Removal.

(3) *Agency form number, if any, and the applicable component of the Department of Justice sponsoring the collection:* Form I-589. Office of International Affairs, Asylum Division, Immigration and Naturalization Service.

(4) *Affected public who will be asked or required to respond, as well as a brief abstract:* Primary: Individuals or Households. The information collected is used by the INS and EOIR to access eligibility of persons applying for asylum and withholding of deportation.

(5) *An estimate of the total number of respondents and the amount of time estimated for an average respondent to respond:* 80,000 responses at three and one half (3.16) hours per response.

(6) *An estimate of the total public burden (in hours) associated with the*

*collection: 252,800 annual burden hours.*

If you have additional comments suggestions, or need a copy of the proposed information collection instrument with instructions, or additional information, please contact Richard A. Sloan 202-514-3291, Director, Policy Directives and Instructions Branch, Immigration and Naturalization Service, U.S. Department

of Justice, Room 5307, 425 I Street, NW., Washington, DC 20536. Additionally, comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time may also be directed to Mr. Richard A. Sloan.

If additional information is required contact: Mr. Robert B. Briggs, Clearance Officer, United States Department of

Justice, Information Management and Security Staff, Justice Management Division, Suite 850, Washington Center, 1001 G Street, NW, Washington, DC 20530.

Dated: November 12, 1997.

**Robert B. Briggs,**

*Department Clearance Officer, United States Department of Justice.*

BILLING CODE 4410-18-M

U.S. Department of Justice  
Immigration and Naturalization Service

OMB NO. 1115-0086

**Instructions for Form I-589**  
**Application for Asylum and for Withholding of Removal**

**Purpose of This Form.**

This form is used to apply for asylum in the United States (U.S.), and for withholding of removal (formerly called "withholding of deportation"). You may file for asylum if you are physically present in the United States and you are not a United States citizen.

**NOTE:** You must submit an application for asylum within one (1) year of arriving in the United States, unless there are changed circumstances that materially affect your eligibility for asylum or extraordinary circumstances relating to a delay in filing for asylum. (See filing Instruction, Section V, Part D, for further explanation.)

You may include in your application your spouse and your unmarried children who are under 21 years of age and physically present in the United States. Married children and children 21 years of age or older must file a separate Form I-589 application. If your spouse and/or unmarried children under the age of 21 are outside the United States, you may file a petition for them to gain similar benefits, if you are granted asylum.

This instruction pamphlet is divided into two (2) sections. The first section has filing instructions. It discusses eligibility and will guide you through filling out and filing the application. The second section describes how your application will be processed. This section also describes potential interim benefits while your application is pending. You will not be authorized to work based on filing this application.

Please read these instructions carefully. The instructions will help you complete your application and understand how it will be processed.

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**WARNING:** Applicants who are in the United States illegally are subject to removal if their asylum or withholding claims 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. See INA Section 208(d)(6) and 8 CFR 208.18.

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## FILING INSTRUCTIONS

### I. Who May Apply and Filing Deadlines

You may apply for asylum irrespective of your immigration status, and even if you are in the United States unlawfully.

**You MUST file this application within one (1) year after you arrived in the United States, unless you can show that there are changed circumstances that affect your eligibility for asylum or extraordinary circumstances that prevented you from filing within one (1) year. (See Filing Instructions, Section V, Completing the Form, Part D, for further explanations of this requirement.)**

If you have previously been denied asylum by an Immigration Judge or the Board of Immigration Appeals, you must show that there are changed circumstances that affect your eligibility for asylum.

The determination of whether you are permitted to apply for asylum will be made once you have had an asylum interview with an asylum officer or a hearing before an Immigration Judge. Even if you are not eligible to apply for asylum because of the reasons stated above, you may still be eligible to apply for withholding of removal.

### II. Basis of Eligibility

#### A. Asylum

In order to qualify for asylum, you must establish that you are a refugee. A refugee is a person who is unable or unwilling to return to his or her country of nationality or last habitual residence, because of persecution on account of race, religion, nationality, membership in a particular social group, or political opinion.

If you are granted asylum, you and any eligible dependents included in your application will be permitted to remain and work in the United States and may eventually adjust to lawful permanent residence status. **If you are not granted asylum, the Immigration and Naturalization Service (INS) may use the information you provide in this application to establish that you are removable from the United States.**

#### B. Withholding of Removal

Your asylum application is also considered to be an application for withholding of removal under section 241(b)(3) of the Immigration and Nationality Act (INA), as amended. If asylum is not granted, you may still be eligible for withholding of removal.

In order to qualify for withholding of removal, you must establish that it is more likely than not that you would be persecuted on account of race, religion, nationality, membership in a particular social group, or political opinion, in the country to which you do not wish to be removed.

If you obtain an order withholding your removal, you cannot be returned to that country in which your life or freedom would be threatened. Withholding of removal does not apply to any spouse or child included in the application. They would have to apply for such protection on their own. If you are granted withholding of removal, this would not give you the right to bring dependents to the United States. It also would not give you the right to become a permanent resident of the United States.

### C. Legal Sources Relating to Eligibility

The documents listed below are some of the legal sources used in determining asylum eligibility. These sources are provided for reference only. You do not need to refer to them in order to complete your application.

- Section 101(a)(42) of the Immigration and Nationality Act, 8 U.S.C. 1101 (defining "refugee");
- Section 208 of the Immigration and Nationality Act, 8 U.S.C. 1158 (regarding eligibility for asylum);
- Section 241(b)(3) of the Immigration and Nationality Act, 8 U.S.C. 1251 (regarding eligibility for withholding of removal);
- Title 8 of the Code of Federal Regulations, section 208, et. seq.;
- The 1967 United Nations Protocol Relating to the Status of Refugees;
- The 1951 Convention Relating to the Status of Refugees;
- Office of the United Nations High Commissioner for Refugees, Handbook on Procedures and Criteria for Determining Refugee Status (Geneva, 1992).

### III. Confidentiality

The information collected will be used to make a determination on your application. It may also be provided to other government agencies (federal, state, local and/or foreign). All applicants are subject to a check of criminal and other information databases in order to determine eligibility. However, no information regarding this application will be provided to any government or country from which you claim a fear of persecution. There are regulations protecting the confidentiality of asylum claims.

### IV. Right to Counsel

Although we have tried to make this form easy to use, immigration law concerning asylum is complex.

You have a right to provide your own legal representation at an asylum interview and during removal proceedings before the Immigration Court, at no cost to the United States Government. If you need, or would like, help in completing this form and preparing your written statements, assistance from pro bono attorneys and/or voluntary agencies may be available. They may help you at no cost or for a reduced fee. If you have not already received from INS a list of attorneys and accredited representatives, you may obtain a list by calling 1-800-870-FORM (3676).

Representatives of the United Nations High Commissioner for Refugees (UNHCR) may be able to assist you in identifying persons to help you complete the application. You may, if you wish, forward a copy of your application and other supporting documents to the UNHCR. (For instructions on where to file the original, please see Filing Instructions, Section XI. "Where to File." The current address of the UNHCR is:

United Nations High Commissioner for  
Refugees  
1775 K Street, NW, Third Floor  
Washington, DC 20006  
Telephone: (202) 296-5191

### V. Completing the Form

Type or print all of your answers in black ink on the Form I-589. Your answers must be completed in English. Forms completed in a language other than English will be returned to you.

Provide the specific information requested about you and your family. **Answer ALL of the questions asked.** If any question does not apply to you, answer "none" or "not applicable." Provide detailed information and answer the questions as completely as possible. If you need more space, attach an additional sheet(s) indicating the question number(s) you are answering. You are strongly urged to attach additional written statements and documents that support your claim. Your written statements should include details of your experiences, events, and dates that relate to your claim for asylum.

NOTE: Please put your A# (if any), name (exactly as it appears in Part A of the form), signature and date on each supplemental sheet and on the cover page of any supporting documents.

You will be permitted to correct or supplement your application at the time of your asylum interview before an asylum officer and at your hearing in Immigration Court by providing additional information and explanations about your asylum claim.

#### Part A. Information About You

This part asks for basic information about you. Alien Registration Number (A#) refers to your INS file number. If you do not already have an A#, the INS will assign one to you. You must provide your residential street address in the United States in Part A, Question 7, of the asylum application. You may also provide a mailing address if different from the address where you reside. In Question 12, use the current name of the country. Do not use historical, ethnic, province, or other local names.

The I-94#, referred to in Question 18e, is the number on Form I-94, Departure Record, given to you when you entered the United States. In Question 18f, enter the date as it appears on the Form I-94. If you did not receive a Form I-94, write "None". If you entered without being inspected by an immigration officer, write "No Inspection" in Question 18d.

#### Part B. Spouse and Children

You should list your spouse and all your children in this application regardless of whether they are in the United States when you file your asylum application.

You may ask to have included in your asylum application your spouse and/or any children who are unmarried, if they are in the United States. Children who are married and/or children who are 21 years of age or older must file separately for asylum by submitting their own asylum applications (Form I-589).

If you apply for asylum while in proceedings before the Immigration Court, the Immigration Judge may not have authority to grant asylum to any spouse or child included in your application who is not also in proceedings.

When including family members in your asylum application, for each family member you MUST submit an additional copy of your completed asylum application and the documentary evidence

establishing your family relationship, as described below.

- If you are including your spouse in your application, submit three (3) copies of your marriage certificate.
- If you are including any unmarried children under 21 in your application, submit three (3) copies of each child's birth certificate.

If you do not have, or are unable to obtain these documents, you may submit an affidavit from at least one (1) person for each event you are trying to prove. Affidavits may be provided by relatives or others. Persons providing affidavits need not be United States citizens or lawful permanent residents. **Affidavits must:**

- fully describe the circumstances or event in question and fully explain how the person acquired knowledge of the event(s);
- be sworn to, or affirmed by, persons who were alive at the time of the event(s) and have personal knowledge of the event(s) (date and place of birth, marriage, etc.) that you are trying to prove; and
- show the full name, address, date, and place of birth of each person giving the affidavit, and indicate any relationship between you and the person giving the affidavit.

If you have more than two (2) children, complete the Supplemental Form A, as needed, or attach additional pages and documentation providing the same information asked in Part B of the Form I-589.

#### Part C. Information About Your Claim for Asylum

This part asks specific questions relevant to eligibility for asylum and for withholding of removal. Check "yes" or "no" in the box provided for each question. If you answer "yes" to any question, explain in detail using the Supplemental Form continuation sheets as needed. You should clearly describe any of your experiences, or those of family members or others who have had similar experiences, that may show that you are a refugee.

If you have experienced harm that is difficult for you to write down and express, you should be aware that these experiences may be very important to the decision-making process regarding your request to remain in the United States. At your interview with an asylum officer or hearing with an Immigration Judge, you will need to be prepared to discuss the harm you have suffered. If you are having trouble remembering or talking about past events, it is suggested that you talk to a lawyer, a representative or health professional who may be able to help you explain your experiences and current situation.

**Part D. Additional Information about Your Application for Asylum**

Check "yes" or "no" in the box provided for each question. If you answer "yes" to any question, explain in detail using the Supplemental Form continuation sheets as needed.

If you answer "yes" to question 6, you must explain why you did not apply for asylum within the first year after you arrived in the United States. The government will accept as an explanation certain changes in the conditions in your country, certain changes in your own circumstances, and certain other events that may have prevented you from applying earlier. For example, some of the events the government might consider as valid explanations include, but are not limited to, the following:

- You have learned that human rights conditions in your country have worsened since you left;
- Because of your health, you were not able to submit this application within a year after you arrived;
- You submitted an application, but it was returned to you because it was not complete, and you submitted a complete application within a reasonable amount of time.

Federal regulations specify some of the other types of events that may also qualify as valid explanations for why you filed late. These regulations are found at Title 8, Section 208.4 of the Code of Federal Regulations. The list in the Code of Federal Regulations is not all-inclusive, and the government recognizes that there are many other circumstances that might be acceptable reasons for filing after one year of arrival.

If you are unable to explain why you did not apply for asylum within the first year after you arrived in the United States, or your explanation is not accepted by the government, you may not be eligible to apply for asylum, but you could still be eligible for withholding of removal.

**Part E. Your Signature**

You must sign your application in Part E and provide the information requested. Sign after you have completed and reviewed the application.

**If it is determined that you have knowingly made a frivolous application for asylum you can be permanently ineligible for any benefits under the Immigration and Nationality Act.** According to Title 8, Section 208.18 of the Code of Federal Regulations, an application is frivolous if any of its material elements is deliberately fabricated. (See Filing Instructions, Section IV, "Right to Counsel," in the event that you have any questions.)

**Part F. Signature of Person Preparing Form if Other than You**

Any person, other than an immediate family member (your spouse, parent(s), or children) who helped prepare your application must sign the application and provide the information requested.

**Penalty for Perjury.** All statements contained in response to questions contained in this application are declared to be true and correct under penalty of perjury. You and anyone, other than an immediate family member, who assists you in preparing the application must sign the application under penalty for perjury. Your signature is evidence that you are aware of the contents of this application. Any person assisting you in preparing this form, other than an immediate family member, must include his or her name and address and sign the application where indicated in Part F. Failure of the preparer to sign will result in the application being returned to you as an incomplete application. If the INS later learns that you received assistance from someone other than an immediate family member, and the person who assisted you failed to sign the application, this may result in an adverse ruling against you.

Title 18, United States Code, Section 1546, 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 shall be fined in accordance with this title or imprisoned not more than five years, or both.

If you knowingly provide false information on this application, you or the preparer of this application may be subject to criminal penalties under Title 18 of the United States Code and to civil penalties under Section 274C of the Immigration and Nationality Act, 8 U.S.C. 1324c.

#### Part G. To Be Completed at Interview

Do not sign your application in Part G before filing this form. You will be asked to sign your application in this space at the conclusion of the interview regarding your claim.

NOTE: You must, however, sign Part E of the application.

#### VI. Required Documents and Required Number of Copies that You Must Submit with Your Application

You must submit the following documents to apply for asylum and withholding of removal:

- The completed, signed original and two (2) copies of your completed application, Form I-589, and the original and two (2) copies of any supplementary sheets and supplementary statements. You must submit a total of three (3) copies of any other documentation such as supporting documentation. In addition, you should make and keep one (1) additional copy of the completed application for your own records.
- An additional copy of your completed application, Form I-589, with supplementary sheets and supplementary statements, for each family member listed in Part B who you want to have included in your application.
- Three (3) copies of any documentary evidence of relationship, such as birth records of your children, marriage certificate, or proof of termination of marriage, for each family member listed in Part B who you want to have included in your application. NOTE: If you do not have, and are unable to obtain, these forms of documentary evidence, you must submit an original and two (2) copies of an affidavit from a third person who knows of the relationship. (For affidavit requirements, see Filing Instructions, Section V, Completing the Form, Part B.)
- One (1) Fingerprint Card, FD-258, for you and each family member listed in Part B who is 14 years of age or older and who is included in your application. The FD-258 MUST be properly filled out and the fingerprints must be clear with no smudges. You must complete the information on the top of the card and write your A# (if any) in the space marked "Your No. OCA" or "Miscellaneous No. MNU." Do not sign the card until you have been fingerprinted, or are told to sign by the person who takes your fingerprints. The person who takes your fingerprints must also sign the card and write his or her title and the date you are fingerprinted in the space provided. Do not bend, fold, or crease the fingerprint card. You may obtain a fingerprint card, FD-258, by calling 1-800-870-FORM (3676).
- One (1) passport-style photograph of you and each family member listed in Part B who is included in your application. The photos must have been taken no more than 30 days before you file your application. Print the person's complete name and A# (if any) on the back of his or her photo with a pencil.

- A copy of all passports or other travel documents (cover to cover) in your possession, and a copy of any U.S. Immigration documents, such as an I-94 Departure Record, for you and each family member who you want included in your application, if you have such documents.
- If you have other identification documents (for example, birth certificate, military or national identification card, drivers license, etc.), it is recommended that you submit a copy with your application and bring the original(s) with you to the interview.

**Original documents may be retained if submitted.** If these instructions state that a copy of a document may be filed with this application and you choose to send the original, the INS or Immigration Court may keep that original for its records.

**Translation of documents not in English is required.** Any document in a language other than English must be accompanied by an adequate English translation that the translator has certified as complete and correct, and by the translator's certification that he or she is competent to translate into English the language used in the document.

#### VII. Additional Documents that You May Submit

You may also submit any supporting documents, such as newspaper articles, affidavits of witnesses or experts, medical and or psychological records, doctors statements, periodicals, journals, books, photographs, official documents, or personal statements. If you have difficulty discussing harm you have suffered in the past, you may wish to submit a doctor's report explaining this difficulty.

#### VIII. Fee

There is no fee for filing this application.

#### IX. Organizing Your Application

Put your application together in the following order (if possible, secure with binder clips and rubber bands so that material may be easily separated):

- Your original Form I-589, with all questions completed, and the application signed by you, in Part E, and signed by any preparer, in Part F; and
- One (1) passport-style photo of you stapled to the form at Part E.

Behind your original Form I-589, attach in the following order:

- One (1) Form G-28, if represented by an attorney or other representative, signed by you and the attorney/ representative;
- The original of all supplemental sheets and supplementary statements submitted with your application;
- One (1) copy of the evidence of your relationship to your spouse and unmarried children under 21 who you want included in your application, if any;
- One (1) completed Fingerprint Card (FD-258), if you are 14 years of age or older (do not bend, fold or crease this card); and
- Two (2) copies of the items in your original package, except photograph and fingerprints.

If you are including family members in your application, attach one (1) additional package for each family member. Arrange each family member's package as follows:

- One (1) copy of your completed, signed Form I-589 and supplemental sheets submitted with the original application. In Part B, staple in the upper right hand corner one (1) passport-style photo of the family member to be included;
- One (1) copy of Form G-28, if any; and
- One (1) completed Fingerprint Card (FD-258) if the dependent is 14 years of age or older (do not bend, fold or crease this card).

For example, if you include your spouse and two (2) children, you should submit your original package, plus two (2) duplicates for you, plus one (1) package for your spouse, plus one (1) package for each child, for a total of 6 (six) packages. Be sure each has the appropriate documentation.

NOTE: Any additional pages submitted should include the applicant's printed name (exactly as it appears in Part A of the form), A# (if any), signature and date. Fingerprints do NOT require additional copies.

#### X. Incomplete Asylum Applications

An asylum application that is incomplete shall be returned to you by mail within thirty (30) days of receipt of the application by the INS. An application that has not been returned to you within thirty (30) days of having been received by the INS shall be considered complete.

The filing of a complete application starts the 150-day period you must wait before you may apply for employment authorization. If your application is not complete and is returned to you, the 150-day period will not begin until you complete the application and resubmit it. (See Other Information, Section V, Employment Authorization, for further information regarding eligibility for employment authorization.)

An application will be considered incomplete in each of the following cases:

- The application does not include a response to each of the questions contained in the Form I-589;
- The application is unsigned;
- You do not submit one (1) completed Form FD-258 (Fingerprint Card) for you and for every family member who is 14 years of age or older and who is included in your application, or if the FD-258(s) submitted is/are not properly filled out or the fingerprints are smudged or otherwise not readable;
- The application is sent without the appropriate number of copies for any supporting materials submitted;
- You indicated in Part E that the application was prepared by someone other than yourself or an immediate family member and the preparer failed to complete Part F of the asylum application.

#### XI. Where to File

Although the INS will confirm in writing its receipt of your application, you may wish to send the completed forms by registered mail (return receipt requested).

##### *If you are in proceedings in Immigration Court:*

If you are currently in proceedings in Immigration Court (that is, if you have been served with Form I-221, Order to Show Cause; Form I-122, Notice to Applicant for Admission Detained for Hearing; Form I-862, Notice to Appear; or Form I-863, Notice of Referral to Immigration Judge), you are required to file your application, Form I-589, with the Immigration Court having jurisdiction over your case.

##### *If you are NOT in proceedings in Immigration Court:*

You are to mail your completed application for asylum and withholding of removal, Form I-589, and any other additional information, to the INS Service Center as indicated below.

If you live in Alabama, Arkansas, Colorado, Commonwealth of Puerto Rico, District of Columbia, Florida, Georgia, Louisiana, Maryland, Mississippi, New Mexico, North Carolina, western Pennsylvania, South Carolina, Tennessee, Texas, United States Virgin Islands, Utah, Virginia, West Virginia, or Wyoming, mail your application to:

USINS Southern Service Center  
P.O. Box 152122  
Department A  
Irving, TX 75015-2122

If you live in Alaska, northern California, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Michigan, Minnesota, Missouri, Montana, Nebraska, northern Nevada, North Dakota, Ohio, Oregon, South Dakota, Territory of Guam, Washington, or Wisconsin, mail your application to:

USINS Northern Service Center  
P.O. Box 87589  
Lincoln, NE 68501-7589

If you live in Arizona, southern California, or southern Nevada, mail your application to:

USINS Western Service Center  
P.O. Box 10589  
Laguna Niguel, CA 92607-0589

If you live in Connecticut, Delaware, Maine, Massachusetts, New Hampshire, New Jersey, New York, eastern Pennsylvania, Rhode Island, or Vermont, mail your application to:

USINS Eastern Service Center  
P.O. Box 9589  
St. Albans, VT 05479-9589

## OTHER INFORMATION

### I. Notification Requirements when Address Changes

If you change your address you must inform the INS in writing within ten (10) days of moving.

While your asylum application is pending before the asylum office, you must notify the asylum office on Form AR-11 (Change of Address Form) or by a signed and dated letter of any changes of address within ten (10) days after you change your address. The address that you provide on the application, or the last change of address notification you submitted, will be used by the INS for mailing. Any notices mailed to that address shall constitute adequate service of all notices. These notices include an interview notice, or other documents, except a Notice to Alien Detained for Hearing by an Immigration Judge (Form I-122), and an Order to Show Cause (Form I-221), and a Notice and Order of Expedited Removal (Form I-860), in which personal service may be required.

If you are already in proceedings in Immigration Court, you MUST notify the Immigration Court on Form EOIR 33 (Change of Address Form) or in writing of any changes of address within five (5) days of the change in address. You must send the notification to the Immigration Court with jurisdiction over your case.

### II. Asylum Interview Process

If you are not in proceedings in Immigration Court, you will be notified by the INS asylum office of the date, time and place (address) of a scheduled interview. The INS suggests that you bring a copy of your application with you when you have your asylum interview. An asylum officer will interview you under oath, make an assessment of your claim

and make a determination concerning your claim. In most cases, you will not be notified of the decision in your case until a date after your interview. You have the right to representation at your interview, at no cost to the United States government. You also may bring witnesses to testify on your behalf.

If you are unable to proceed with the asylum interview in fluent English, you must provide at no expense to the INS, a competent interpreter fluent in both English and a language that you speak fluently. Your interpreter must be at least 18 years of age. The following persons cannot serve as your interpreter: your attorney or representative of record, or a witness testifying on your behalf at the interview. Quality interpretation may be crucial to your claim. Such assistance must be obtained, at your expense, prior to the interview.

Failure without good cause to bring a competent interpreter to your interview may be considered an unexcused failure to appear for the interview. Any unexcused failure to appear for an interview may prevent you from receiving work authorization, and your asylum application may be dismissed or referred directly to the Immigration Court.

If available, you must bring some form of identification to your interview, including any passport(s), other travel or identification documents, or Form I-94 Departure Record. You may bring to the interview any additional available items documenting your claim that you have not already submitted with your application.

If members of your family are included in your application for asylum, they must also appear for the interview and bring any identity or travel documents they have in their possession.

### III. Status While Your Claim is Pending

While your case is pending, you will be permitted to remain in the United States. After your asylum interview, if you have not been granted asylum and appear to be deportable under Section 237 of the INA, 8 U.S.C. 1227, or inadmissible under Section 212 of the INA, 8 U.S.C. 1182, your application will be filed with the Immigration Court upon referral by the asylum office.

### IV. Travel Outside the United States

If you leave the United States without first obtaining advance parole, it will be presumed that you have abandoned your application. If you obtain advance parole and return to the country of claimed persecution, it will be presumed that you abandoned your application, unless you can show that there were compelling reasons for your return.

### V. Employment Authorization while Your Application is Pending

You will be granted permission to work if your asylum application is granted.

You may request permission to work if your asylum application is pending and 150 days have lapsed since your application was accepted by the INS. See 8 CFR. 208.7(a)(1). If your asylum application has not been denied within 180 days from the date of filing a complete asylum application, you may be granted employment authorization. You may request permission to work by filing an Application for Employment Authorization, Form I-765. Follow the instructions on that application and submit it with a copy of evidence that you have a pending asylum application. Each family member you have asked to have included in your application who also wants permission to work must submit a separate Form I-765. You may obtain a Form I-765 by calling 1-800-870-FORM (3676).

You may NOT apply for employment authorization until your application for asylum or withholding of removal has been pending for at least 150 days since acceptance by the INS or the Immigration Court. If you file an application for employment authorization before 150 days has expired, that application will be denied. Any delay in the processing of your asylum application that you request or cause shall not be counted as part of the 150-day time period.

### VI. Privacy Act Notice.

The authority to collect this information is contained in Title 8 of the United States Code. Furnishing the information on this form is voluntary; however, failure to provide all of the requested information may result in the delay of a final decision or denial of your request.

### VII. Paperwork Reduction Act Notice.

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this application is as follows: (1) 30 minutes to learn about the form; (2) 55 minutes to complete the form; and (3) 105 minutes to assemble and file the application; for a total estimated average burden hours of 3 hours and 10 minutes per application. The estimated time to complete the form will vary dependent on the complexity of your individual circumstances. If you have comments regarding the accuracy of this estimate or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, Policy Directives and Instructions Branch, 425 I Street, NW., Room 5307, Washington, DC 20536, OMB No. 1115-0086. **Do not mail your completed application to this address.**

U.S. Department of Justice  
Immigration and Naturalization Service

OMB # 1115-0086

**Application for Asylum and for Withholding of Removal**

**Start Here - Please Type or Print. USE BLACK INK. SEE THE SEPARATE INSTRUCTION PAMPHLET FOR INFORMATION ABOUT ELIGIBILITY AND HOW TO COMPLETE AND FILE THIS APPLICATION.**

**FOR INS USE ONLY**

**PART A. INFORMATION ABOUT YOU.**

1. Alien Registration Number(s), if any (A#'s)		2. Social Security Number	
3. Complete Last Name	4. First Name	5. Middle Name	
6. What Other Names Have You Used? (Include maiden name and aliases.)			
7. Mailing Address in the U.S. C/O			Telephone Number
Street Number and Name			Apt. No.
City	State	ZIP Code	
8. Residence if Other than Above			Telephone Number
Street Number and Name			Apt. No.
City	State	ZIP Code	
9. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	10. Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		
11. Date of Birth (Mo/Day/Yr)	12. City and Country of Birth		
13. Present Nationality (Citizenship)		14. Nationality at Birth	
15. Race, Ethnic or Tribal Group		16. Religion	
17. Check each box that applies.			
<input type="checkbox"/> I am not now in removal, deportation or exclusion proceedings.		<input type="checkbox"/> I am now in removal, deportation or exclusion proceedings.	
<input type="checkbox"/> I was previously in removal, deportation or exclusion proceedings.		<input type="checkbox"/> I have never been in removal, deportation or exclusion proceedings.	
18. Complete 18a through 18g.		d. What was your status when you last entered the U.S.? (What type of visa did you have, if any?)	
a. When did you last leave your country? (Mo/Day/Yr)		e. What is your I-94 Number?	
b. When did you last enter the U.S.? (Mo/Day/Yr)		f. What is the expiration date of your authorized stay, if any?	
c. Where did you last enter the U.S.?			
g. Have you previously entered the U.S.? <input type="checkbox"/> No <input type="checkbox"/> Yes. If YES, list place, date, and your status for each entry. (Attach additional sheets as needed.)			
Date	Place	Status	
Date	Place	Status	
Date	Place	Status	

Returned	Receipt
Resubmitted	
Reloc Sent	
Reloc Rec'd	
Action: Interview Date:	
Asylum: <input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Referred <input type="checkbox"/> Recommended Approval Date _____	
Date A.O. final decision or referral issued _____	
Total number of persons granted asylum _____	
<b>For EOIR Use Only</b>	

<b>To Be Completed by Attorney or Representative, if any</b>
<input type="checkbox"/> Check if G-28/EOIR-28 is attached showing you represent the applicant.
INS VOLAG or PIN # _____
ATTY State License # _____

**Information About You - Continued.**

19. What is your native language?	20. Are you fluent in English? <input type="checkbox"/> Yes <input type="checkbox"/> No	21. What other languages do you speak fluently?
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22. Have you ever applied to the United States government or to any other government(s) for refugee status, asylum, withholding of deportation, or withholding of removal?

No.

I was included in a pending application of my parent(s). However, I am now 21 years' old or married so I am filing my own application.

I was included in my spouses application, but now I wish to file my own application.

Yes. (In what country and what was the decision? Also specify the date of the decision.) Country \_\_\_\_\_ Date \_\_\_\_\_

24. What country issued your last passport or travel document?	25. Passport # Travel Document #	26. Expiration Date
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27. Prior address in last country of residence or country in which you fear persecution. (List Address, City/Town, Province, and Country)

28. Provide the following information about your education, beginning with the most recent.

Name of School	Type of School	Location	Attended	
			From (Mo/Yr)	To (Mo/Yr)

29. Provide the following information about your residences during the last five years. List your present address first. (Use additional sheets of paper if necessary.)

Number and Street	City	Province or State	Country	Dates	
				From (Mo/Yr)	To (Mo/Yr)

30. Provide the following information about your employment during the last five years. List your present employment first. (Use additional sheets of paper if necessary.)

Name and Address of Employer	Your Occupation	Dates	
		From (Mo/Yr)	To (Mo/Yr)

31. Provide the following information about your parents.

Name	Country and City of Birth	Location

**PART B. INFORMATION ABOUT YOUR SPOUSE AND CHILDREN.**

Your Spouse.  I am not married. (Skip to Part B, Your Children.)

1. Alien Registration Number (A#)		2. Passport/ID Card, etc.#	
3. Complete Last Name	4. First Name	5. Middle Name	6. Date of Birth (Mo/Day/Yr)
7. Date of Marriage (Mo/Day/Yr)	8. Place of Marriage		9. City and Country of Birth
10. Nationality (Citizenship)	11. Race, Ethnic or Tribal Group		12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this person in the U.S.? <input type="checkbox"/> Yes. (Complete blocks 13 to 24.) <input type="checkbox"/> No. (Specify Location)			14. Social Security #
15. Place of Last Entry in the U.S.?	16. Date of Last Entry in the U.S.? (Mo/Day/Yr)	17. I-94#	18. Status when Last Admitted (Visa type, if any)
19. Expiration of Status (Mo/Day/Yr)	20. Is your spouse in removal, deportation or exclusion proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No		21. If previously in the U.S., Date of Previous Arrival (Mo/Day/Yr)
22. Place of Previous Arrival		23. Status at Time of Previous Arrival	

24. If in the U.S., is this person to be included in this application? (Check the appropriate box.)

- Yes. (Attach one (1) photograph of your spouse in the upper right hand corner of Page 3 on the extra copy of the application submitted for this person.)
- No, because my spouse is/has:
  - Filing separately.
  - Separate application pending.
  - Other reasons.

All of Your Children, Regardless of Age or Marital Status. (Attach additional pages and documentation if you have more than two (2) children.)

1. Alien Registration Number (A#)		2. Passport/ID Card, etc.#	
3. Complete Last Name	4. First Name	5. Middle Name	6. Date of Birth (Mo/Day/Yr)
7. City and Country of Birth	8. Nationality (Citizenship)	9. Race, Ethnic or Tribal Group	10. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
11. Is this child in the U.S.? <input type="checkbox"/> Yes. (Complete blocks 12 to 23.) <input type="checkbox"/> No. (Specify Location)			12. Social Security #
13. Place of Last Entry in the U.S.?	14. Date of Last Entry in the U.S.? (Mo/Day/Yr)	15. I-94#	16. Status when Last Admitted (Visa type, if any)
17. Expiration of Status (Mo/Day/Yr)	18. Is your spouse in removal, deportation or exclusion proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No		19. If previously in the U.S., Date of Previous Arrival (Mo/Day/Yr)
20. Place of Previous Arrival		21. Status at Time of Previous Arrival	

22. If in the U.S., is this person to be included in this application? (Check the appropriate box.)

- Yes. (Attach one (1) photograph of your child in the upper right hand corner of Page 3 on the extra copy of the application submitted for this person.)
- No, because child is/has:
  - Filing separately.
  - Separate application pending.
  - Over 21 years of age.
  - Married.
  - Other reasons.

**Information About Your Spouse and Children - Continued.****All of Your Children, Regardless of Age or Marital Status.**

1. Alien Registration Number (A#):		2. Passport/ID Card, etc. #	
3. Complete Last Name	4. First Name	5. Middle Name	6. Date of Birth (Mo/Day/Yr)
7. City and Country of Birth	8. Nationality (Citizenship)	9. Race, Ethnic or Tribal Group	10. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
11. Is this person in the U.S.? <input type="checkbox"/> Yes. (Complete blocks 11 to 22.) <input type="checkbox"/> No. (Specify Location)			12. Social Security #
13. Place of Last Entry in the U.S.?	14. Date of Last Entry in the U.S.? (Mo/Day/Yr)	15. I-94 #	16. Status when Last Admitted (Visa type, if any.)
17. Expiration of Status (Mo/Day/Yr)	18. Is this child in removal, deportation or exclusion proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No		20. If previously in the U.S., Date of Previous Arrival (Mo/Day/Yr)
21. Place of Previous Arrival		22. Status at Time of Previous Arrival	
23. If in the U.S., is this person to be included in this application? (Check the appropriate box.)			
<input type="checkbox"/> Yes. (Attach one (1) photograph of your child in the upper right hand corner of Page 3 on the extra copy of the application submitted for this person.)			
<input type="checkbox"/> No, because spouse is/has:			
<input type="checkbox"/> Filing separately.			
<input type="checkbox"/> Separate application pending.			
<input type="checkbox"/> Over 21 years of age.			
<input type="checkbox"/> Married.			
<input type="checkbox"/> Other reasons.			

**PART C. INFORMATION ABOUT YOUR CLAIM TO ASYLUM.**

1. Why are you seeking asylum? Explain in detail what the basis is for your claim. (Attach additional sheets of paper as needed.)

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**Information About Your Claim to Asylum - Continued.**

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2. What do you think would happen to you if you returned to the country from which you claim you would be subjected to persecution? Explain in detail and provide information or documentation to support your statement, if available. *(Attach additional sheets of paper as needed.)*

3. Have you or any member of your family 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, provide a detailed explanation of your or your relatives' involvement with each group and include the name of each organization or group; the dates of membership or affiliation; the purpose of the organization; your duties or your relatives' duties or responsibilities in the group or organization; and whether you or your relatives are still active in the group(s). *(Attach additional sheets of paper as needed.)*

4. Have you or any member of your family ever been mistreated or threatened by the authorities of your home country or any other country or by a group or groups that are controlled by the government, or that the government of the country is unable or unwilling to control?

No.  Yes. If YES, was it because of any of the following reasons? *(Check each of the following boxes that apply.)*

Race  Religion  Nationality  Membership in a particular social group  Political Opinion

On a separate sheet of paper, specify for each instance, what occurred and the circumstances; the relationship to you of the person involved; the date; the exact location; who it was who took such action against you or your family member; his/her position in the government or group; the reason why the incident occurred. Attach documents referring to these incidents, if they are available. *(Attach additional sheets of paper as needed.)*

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**Information About Your Claim to Asylum - Continued.**

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5. Have you or any member of your family ever been accused, charged, arrested, detained, interrogated, convicted and sentenced, or imprisoned in your country, any other country, including the United States?

No.  Yes. If YES, for each instance, specify what occurred and the circumstances; dates; location; the duration of the detention or imprisonment; the reason(s) for the detention or conviction; the treatment received during the detention or imprisonment; any formal charges that were lodged against you or your relatives; the reason for release; treatment after release. Attach documents referring to these incidents if they are available. *(Attach additional sheets of paper as needed.)*

6. Describe in detail your trip to the United States from your home country. 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. If YES, for each person, identify each country and indicate the length of stay; the person's status while there; the reasons for leaving; whether the person is entitled to return for residence purposes; and if the person applied for refugee status or for asylum while there; or why he or she did not do so. *(Attach additional sheets of paper as needed.)*

7. Do you fear being subjected to torture (severe physical or mental pain or suffering, including rape or other sexual abuse) in your home country or any other country if you return?

No.  Yes. If YES, please explain why. *(Attach additional sheets of paper as needed.)*

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**PART D. ADDITIONAL INFORMATION ABOUT YOUR APPLICATION FOR ASYLUM.**

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1. Do you, your spouse, or your child(ren) now hold, or have you ever held, permanent residence, other permanent status, or citizenship, in any country other than the one from which you are now claiming asylum?  
 No.  Yes. If YES, please explain. *(Attach additional sheets of paper as needed).*
  
2. Have you, your spouse, your child(ren), your parents ever filed for, been processed for, or been granted or denied refugee status or asylum by the United States Government?  
 No.  Yes. If YES, please explain the decision and what happened to any status you received as a result of that decision. If you have been denied asylum by an immigration judge or the Board of Immigration Appeals, please describe any change in country conditions or your own circumstances since the date of the denial that may affect your eligibility for asylum. *(Attach supplemental sheets of paper as needed.)*
  
3. Have you, your spouse, your child(ren), or your parents ever filed for, been processed for, or been granted or denied refugee status or asylum by any other country?  
 No.  Yes. If YES, please explain the decision and what happened to any status you received as a result of that decision. *(Attach supplemental sheets of paper as needed.)*
  
4. Have you, your spouse, or child(ren) ever caused 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, or ever ordered, assisted, or otherwise participated in such acts?  
 No.  Yes. If YES, describe, in detail, each such incident and your own or your spouse's or child(ren)'s involvement. *(Attach supplemental sheets of paper as needed.)*
  
5. After you left your country of claimed persecution for the reasons you have described, did you return to that country?  
 No.  Yes. If YES, describe, in detail, the circumstances of your visit, 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). *(Attach supplemental sheets of paper as needed.)*
  
6. Are you filing the application more than one year after your last arrival in the United States?  
 No.  Yes. If YES, please explain why you did not file within the first year after you arrived. For guidance in answering this question see Filing Instructions, V. Completing the Form, Part D.

**PART E. SIGNATURE.**

After reading the information on penalties in the instructions, complete and sign below. If someone helped you prepare this application, he or she must complete Part F.

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it is all true and correct. Title 18, United States Code, Section 1546, 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 not more than five years, or both". I authorize the release of any information from my record which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking.

Staple your  
photograph  
here.

**WARNING:** Applicants who are in the United States illegally are subject to removal if their asylum or withholding claims 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. See INA 208(d)(6) and 8 CFR 208.18.

Signature of Applicant (The person named in Part A)

[ \_\_\_\_\_ ]  
Sign your name so it all appears within the brackets.

\_\_\_\_\_ Date (Mo/Day/Yr)

Print 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, please list their name(s) and relationship.)

(Name) \_\_\_\_\_ (Relationship) \_\_\_\_\_ (Name) \_\_\_\_\_ (Relationship) \_\_\_\_\_

Did someone other than you or your spouse, parent or child(ren) prepare this application?  No  Yes (Complete Part F)

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

**PART F. SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN ABOVE. Sign below.**

I declare that I have prepared this application at the request of the person named in Part F, 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 for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information of the Form I-589 may also subject me to civil penalties under 8 U.S.C. Section 1324(c).

Signature of Preparer		Print Name		Date (Mo/Day/Yr)	
Daytime Telephone Number ( )		Address of Preparer: Street Number and Name			
Apt. No.	City	State	ZIP Code		

**PART G. TO BE COMPLETED AT INTERVIEW.**

You will be asked to complete this Part when you appear before an asylum officer of the Immigration and Naturalization Service (INS), or an immigration judge of the Executive Office for Immigration Review (EOIR) for examination.

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are  all true or  not all true to the best of my knowledge and that corrections numbered \_\_\_\_\_ to \_\_\_\_\_ were made by me or at my request.

Signed and sworn to before me by the above-name applicant on:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (Mo/Day/Yr)

\_\_\_\_\_  
Write your Name in your Native Alphabet

\_\_\_\_\_  
Signature of Asylum Officer or Immigration Judge

SUPPLEMENT A FORM I-589

A# (If available)	Date
Applicant's Name	Applicant's Signature

**ALL OF YOUR CHILDREN, REGARDLESS OF AGE OR MARITAL STATUS.**

*(Attach additional pages and documentation if you have more than two (2) children.)*

1. Alien Registration Receipt Number (A#):		2. Passport/ID Card, etc. #	
3. Complete Last Name	4. First Name	5. Middle Name	6. Date of Birth (Mo/Day/Yr)
7. City and Country of Birth	8. Nationality (Citizenship)	9. Race, Ethnic or Tribal Group	10. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
11. Is this child in the U.S.? <input type="checkbox"/> Yes. (Complete blocks 12 to 23.) <input type="checkbox"/> No. (Specify Location)			12. Social Security #
13. Place of Last Entry in the U.S.?	14. Date of Last Entry in the U.S.? (Mo/Day/Yr)	15. I-94 #	16. Status when Last Admitted (Visa type if any.)
17. Expiration of Status (Mo/Day/Yr)	18. Is this child in removal, deportation or exclusion proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	19. If previously in the U.S., Date of Previous Arrival (Mo/Day/Yr)	
20. Place of Previous Arrival		21. Status at Time of Previous Arrival	

22. If in the U.S., is this person to be included in this application? (Check the appropriate box.)

- Yes. (Attach one (1) photograph of your child in the upper right hand corner of Page 3 on the extra copy of the application submitted for this person.)
- No, because child is/has:
  - Filing separately.
  - Separate application pending.
  - Over 21 years of age.
  - Married.
  - Other reasons.

1. Alien Registration Receipt Number (A#):		2. Passport/ID Card, etc. #	
3. Complete Last Name	4. First Name	5. Middle Name	6. Date of Birth (Mo/Day/Yr)
7. City and Country of Birth	8. Nationality (Citizenship)	9. Race, Ethnic or Tribal Group	10. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
11. Is this child in the U.S.? <input type="checkbox"/> Yes. (Complete blocks 12 to 23.) <input type="checkbox"/> No. (Specify Location)			12. Social Security #
13. Place of Last Entry in the U.S.?	14. Date of Last Entry in the U.S.? (Mo/Day/Yr)	15. I-94 #	16. Status when Last Admitted (Visa, type if any.)
17. Expiration of Status (Mo/Day/Yr)	18. Is this child in removal, deportation or exclusion proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	19. If previously in the U.S., Date of Previous Arrival (Mo/Day/Yr)	
20. Place of Previous Arrival		21. Status at Time of Previous Arrival	

22. If in the U.S., is this person to be included in this application? (Check the appropriate box.)

- Yes. (Attach one (1) photograph of your child in the upper right hand corner of Page 3 on the extra copy of the application submitted for this person.)
- No, because child is/has:
  - Filing separately.
  - Separate application pending.
  - Over 21 years of age.
  - Married.
  - Other reasons.

**SUPPLEMENT B FORM I-589**

**ADDITIONAL INFORMATION ABOUT YOUR CLAIM TO ASYLUM.**

A# (If available)	Date
Applicant's Name	Applicant's Signature

Use attached blank response sheet to supplement any information requested. Please copy and complete as needed.

**PART** \_\_\_\_

**QUESTION** \_\_\_\_

ADDITIONAL INFORMATION ABOUT YOUR CLAIM TO ASYLUM.

A# (If available)	Date
Applicant's Name	Applicant's Signature

Use attached blank response sheet to supplement any information requested. Please copy and complete as needed.

PART \_\_\_\_

QUESTION \_\_\_\_