

PART 3 - INFORMATION ABOUT YOUR PRESENCE IN THE UNITED STATES

18) My first arrival into the United States was under the name of: *(Last, First, Middle)* _____ 19) My first arrival to the United States was on: *(Month, Day, Year)* _____

20) Place or port of first arrival: *(Place or Port, City, and State)* _____

21) I: was inspected and admitted.
 I entered using my Lawful Permanent Resident card which is valid until _____ *(Month, Day, Year)*.
 I entered using a _____ *(Specify Type of Visa)* visa which is valid until _____ *(Month, Day, Year)*.
 was not inspected and admitted.
 I entered without documents. Explain: _____
 I entered without inspection. Explain: _____
 Other. Explain: _____

22) I applied on _____ *(Month, Day, Year)* for additional time to stay and it was granted on _____ *(Month, Day, Year)* and valid until _____ *(Month, Day, Year)*, or denied on _____ *(Month, Day, Year)*.

23) Since the date of my first entry, I departed from and returned to the United States at the following places and on the following dates:
(Please list all departures regardless of how briefly you were absent from the United States.)

If you have never departed from the United States since your original date of entry, please mark an X in this box:

	Port of Departure <i>(Place or Port, City and State)</i>	Departure Date <i>(Month, Day, Year)</i>	Purpose of Travel	Destination
1	_____	_____	_____	_____
	Port of Return <i>(Place or Port, City and State)</i>	Return Date <i>(Month, Day, Year)</i>	Manner of Return	Inspected and Admitted? <input type="checkbox"/> Yes <input type="checkbox"/> No
2	_____	_____	_____	_____
	Port of Return <i>(Place or Port, City and State)</i>	Return Date <i>(Month, Day, Year)</i>	Manner of Return	Inspected and Admitted? <input type="checkbox"/> Yes <input type="checkbox"/> No

24) Have you ever departed the United States: a) under an order of deportation, exclusion, or removal?..... Yes No
b) pursuant to a grant of voluntary departure?..... Yes No

PART 4 - INFORMATION ABOUT YOUR MARITAL STATUS AND SPOUSE *(Continued on page 3)*

25) I am not married: 26) If married, the name of my spouse is: *(Last, First, Middle)* _____ 27) My spouse's name before marriage was: _____
I am married:

28) The marriage took place in: *(City and Country)* _____ 29) Date of marriage: *(Month, Day, Year)* _____

30) My spouse currently resides at:
_____ *Apt. number and/or in care of*
_____ *Number and Street*
_____ *City or Town* _____ *State/Country* _____ *Zip Code*

31) Place and date of birth of my spouse: *(City & Country; Month, Day, Year)* _____
32) My spouse is a citizen of: *(Country)* _____

33) If your spouse is other than a native born United States citizen, answer the following:
He/she arrived in the United States at: *(Place or Port, City and State)* _____
He/she arrived in the United States on: *(Month, Day, Year)* _____
His/her alien registration number(s) is: A# _____
He/she was naturalized on: *(Month, Day, Year)* _____ at _____ *(City and State)*

34) My spouse - is - is not employed. If employed, please give salary and the name and address of the place(s) of employment.

Full Name and Address of Employer	Earnings Per Week <i>(Approximate)</i>
_____	\$
_____	\$
_____	\$

PART 4 - INFORMATION ABOUT YOUR MARITAL STATUS AND SPOUSE (Continued)

35) I - have - have not been previously married: (If previously married, list the name of each prior spouse, the dates on which each marriage began and ended, the place where the marriage terminated, and describe how each marriage ended.)

Name of prior spouse: (Last, First, Middle)	Date marriage began: Date marriage ended:	Place marriage ended: (City and Country)	Description or manner of how marriage was terminated or ended:

Name of prior spouse: (Last, First, Middle)	Date marriage began: Date marriage ended:	Place marriage ended: (City and Country)	Description or manner of how marriage was terminated or ended:

36) Have you been ordered by any court, or are otherwise under any legal obligation, to provide child support and/or spousal maintenance as a result of a separation and/or divorce? - Yes - No

PART 5 - INFORMATION ABOUT YOUR EMPLOYMENT AND FINANCIAL STATUS

37) Since my arrival into the United States, I have been employed by the following named persons or firms: (Please begin with present employment and work back in time. Any periods of unemployment or school attendance should be specified. Attach a separate sheet for additional entries if necessary.)

Full Name and Address of Employer	Earnings Per Week (Approximate)	Type of Work Performed	Employed From: (Month, Day, Year)	Employed To: (Month, Day, Year)
_____	\$ _____			PRESENT
_____	\$ _____			
_____	\$ _____			

38) If self-employed, describe the nature of the business, the name of the business, its address, and net income derived therefrom:

39) My assets (and if married, my spouse's assets) in the United States and other countries, not including clothing and household necessities, are:

Self		Jointly Owned With Spouse	
Cash, Stocks, and Bonds..... \$ _____		Cash, Stocks, and Bonds..... \$ _____	
Real Estate..... \$ _____		Real Estate..... \$ _____	
Auto (dollar value minus amount owed)..... \$ _____		Auto (dollar value minus amount owed)..... \$ _____	
Other (describe on line below)..... \$ _____		Other (describe on line below)..... \$ _____	
_____ TOTAL \$ _____		_____ TOTAL \$ _____	

40) I - have - have not received public or private relief or assistance (e.g. Welfare, Unemployment Benefits, Medicaid, TANF, AFDC, etc.). If you have, please give full details including the type of relief or assistance received, date for which relief or assistance was received, place, and total amount received during this time: _____

41) Please list each of the years in which you have filed an income tax return with the Internal Revenue Service: _____

PART 6 - INFORMATION ABOUT YOUR FAMILY *(Continued on page 5)*

42) I have _____ *(Number of)* children. Please list information for each child below, include assets and earnings information for children over the age of 16 who have separate incomes:

Name of Child: <i>(Last, First, Middle)</i> Child's Alien Registration Number:	Citizen of What Country: Birth Date: <i>(Month, Day, Year)</i>	Now Residing At: <i>(City and Country)</i> Birth Date: <i>(City and Country)</i>	Immigration Status of Child
A#: Estimated Total of Assets: \$ _____ Estimated Average Weekly Earnings: \$ _____			
A#: Estimated Total of Assets: \$ _____ Estimated Average Weekly Earnings: \$ _____			
A#: Estimated Total of Assets: \$ _____ Estimated Average Weekly Earnings: \$ _____			

43) If your application is denied, would your spouse and all of your children accompany you to your:

Country of Birth - <input type="checkbox"/> Yes <input type="checkbox"/> No	If you answered "No" to any of the responses, please explain: _____ _____ _____
Country of Nationality - <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Last Residence - <input type="checkbox"/> Yes <input type="checkbox"/> No	

44) Members of my family, including my spouse and/or child(ren) - have - have not received public or private relief or assistance (e.g., Welfare, Unemployment Benefits, Medicaid, TANF, AFDC, etc.). If any member of your immediate family has received such relief or assistance, please give full details including identity of person(s) receiving relief or assistance, dates for which relief or assistance was received, place, and total amount received during this time: _____

45) Please give the requested information about your parents, brothers, sisters, aunts, uncles, and grandparents, living or deceased. As to residence, show street address, city, and state, if in the United States; otherwise show only country:

Name: <i>(Last, First, Middle)</i> Alien Registration Number:	Citizen of What Country: Birth Date: <i>(Month, Day, Year)</i>	Relationship to Me: Birth Date: <i>(City and Country)</i>	Immigration Status of Listed Relative
A#: Complete Address of Current Residence, if Living: _____ _____			
A#: Complete Address of Current Residence, if Living: _____ _____			

PART 7 - MISCELLANEOUS INFORMATION *(Continued on page 6)*

46) I - have - have not entered the United States as a crewman after June 30, 1964.

47) I - have - have not been admitted as, or after arrival in the United States acquired the status of, an exchange alien.

48) I - have - have not submitted address reports as required by section 265 of the Immigration and Nationality Act.

49) I - have - have never (either in the United States or in any foreign country) been arrested, summoned into court as a defendant, convicted, fined, imprisoned, placed on probation, or forfeited collateral for an act involving a felony, misdemeanor, or breach of any public law or ordinance (including, but not limited to, traffic violations or driving incidents involving alcohol). *(If answer is in the affirmative, please give a brief description of each offense including the name and location of the offense, date of conviction, any penalty imposed, any sentence imposed, and the time actually served.)*

50) Have you ever served in the Armed Forces of the United States? - Yes - No. If "Yes" please state branch (*Army, Navy, etc.*) and service number: _____

Place of entry on duty: (*City and State*) _____

Date of entry on duty: (*Month, Day, Year*) _____ Date of discharge: (*Month, Day, Year*) _____

Type of discharge: (*Honorable, Dishonorable, etc.*) _____

I served in active duty status from: (*Month, Day, Year*) _____ to (*Month, Day, Year*) _____.

51) Have you ever left the United States or the jurisdiction of the district where you registered for the draft to avoid being drafted into the military or naval forces of the United States?

Yes No

52) Have you ever deserted from the military or naval forces of the United States while the United States was at war?

Yes No

53) If male, did you register under the Military Selective Service Act or any applicable previous Selective Service (Draft) Laws?

Yes No

If "Yes," please give date, Selective Service number, local draft board number, and your last draft classification: _____

54) Were you ever exempted from service because of conscientious objection, alienage, or any other reason?

Yes No

55) Please list your present or past membership in or affiliation with every political organization, association, fund, foundation, party, club, society, or similar group in the United States or any other place since your 16th birthday. Include any foreign military service in this part. If none, write "None." Include the name of the organization, location, nature of the organization, and the dates of membership.

Name of Organization	Location of Organization	Nature of Organization	Member From: <i>(Month, Day, Year)</i>	Member To: <i>(Month, Day, Year)</i>

PART 8 - SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

(Read the following information and sign below)

I declare that I have prepared this application at the request of the person named in Part 1, 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 a language the applicant speaks fluently 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 EOIR-42A may subject me to civil penalties under 8 U.S.C. 1324c.

Signature of Preparer:		Print Name:	Date:
Daytime Telephone #: ()	Address of Preparer: <i>(Number and Street, City, State, Zip Code)</i>		

PART 9 - SIGNATURE

APPLICATION NOT TO BE SIGNED BELOW UNTIL APPLICANT APPEARS BEFORE AN IMMIGRATION JUDGE

I swear or affirm that I know the contents of this application that I am signing, including the attached documents and supplements, and that they are all true to the best of my knowledge, taking into account the correction(s) numbered _____ to _____, if any, that were made by me or at my request.

(Signature of Applicant or Parent or Guardian)

Subscribed and sworn to before me by the above-named applicant at _____

Immigration Judge

Date: (Month, Day, Year)

PART 10 - PROOF OF SERVICE

I hereby certify that a copy of the foregoing Form EOIR-42A was: - delivered in person - mailed first class, postage prepaid

on _____ to the Assistant Chief Counsel for the DHS (U.S. Immigration and Customs Enforcement-ICE)
(Month, Day, Year)

at _____
(Number and Street, City, State, Zip Code)

Signature of Applicant (or Attorney or Representative)