



**Notice of Entry of Appearance
as Attorney or Accredited Representative**
Department of Homeland Security

DHS
Form G-28
OMB No. 1615-0105
Expires 02/29/2016

**Part 1. Information About Attorney or
Accredited Representative**

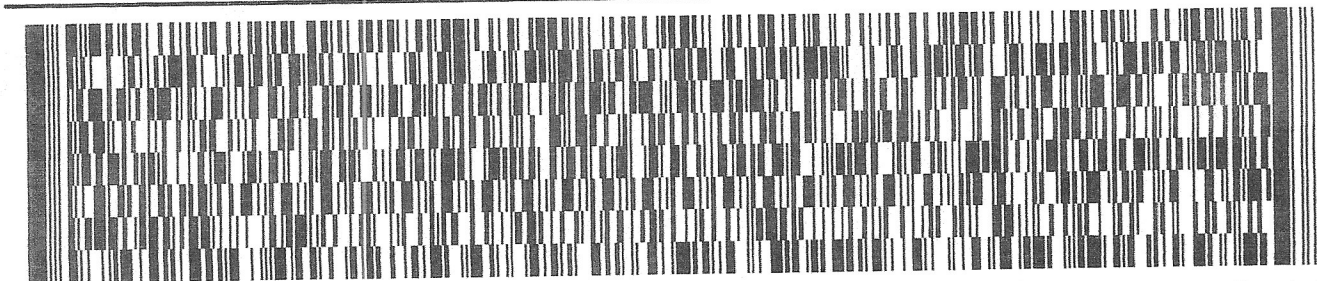
Name and Address of Attorney or Accredited Representative

- 1.a. Family Name (Last Name)
- 1.b. Given Name (First Name)
- 1.c. Middle Name
2. Name of Law Firm or Recognized Organization
3. Name of Law Student or Law Graduate
4. State Bar Number
- 5.a. Street Number
- 5.b. Street Name
- 5.c. Apt. ☐ Ste. ☒ Flr. ☐
- 5.d. City or Town
- 5.e. State 5.f. Zip Code
- 5.g. Postal Code
- 5.h. Province
- 5.i. Country
6. Daytime Phone Number () -
7. E-Mail Address of Attorney or Accredited Representative

**Part 2. Eligibility Information For Attorney or
Accredited Representative**

(Check applicable item(s) below)

1. ☒ I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest court(s) of the following State(s), possession(s), territory(ies), commonwealth(s), or the District of Columbia.
- 1.a.
- 1.b. I (choose one) ☒ am not ☐ am subject to any order of any court or administrative agency disbaring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law. (If you are subject to any order(s), explain fully in the space below.)
- 1.b.1.
2. ☐ I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States, so recognized by the Department of Justice, Board of Immigration Appeals pursuant to 8 CFR 292.2. Provide the name of the organization and the expiration date of accreditation.
- 2.a. Name of Recognized Organization
- 2.b. Date Accreditation expires
(mm/dd/yyyy) ►
3. ☐ I am associated with
- 3.a.
- the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative is at his or her request. If you check this item, also complete **number 1 (1.a. - 1.b.1.) or number 2 (2.a. - 2.b.) in Part 2 (whichever is appropriate).**
4. ☐ I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2)(iv).



Part 3. Notice of Appearance as Attorney or Accredited Representative

This appearance relates to immigration matters before (select one):

1. ☒ USCIS - List the form number(s)

1.a. I-918/I-192

2. ☐ ICE - List the specific matter in which appearance is entered

2.a.

3. ☐ CBP - List the specific matter in which appearance is entered

3.a.

I hereby enter my appearance as attorney or accredited representative at the request of:

4. Select only one: ☐ Applicant ☒ Petitioner
☐ Respondent (ICE, CBP)

Name of Applicant, Petitioner, or Respondent

5.a. Family Name (Last Name)

5.b. Given Name (First Name)

5.c. Middle Name

5.d. Name of Company or Organization, if applicable

NOTE: Provide the mailing address of Petitioner, Applicant, or Respondent and not the address of the attorney or accredited representative, except when a safe mailing address is permitted on an application or petition filed with Form G-28.

6.a. Street Number and Name

6.b. Apt. ☒ Ste. ☐ Flr. ☐

6.c. City or Town

Summit

6.d. State IL

6.e. Zip Code 60501

7. Provide A-Number and/or Receipt Number

Pursuant to the Privacy Act of 1974 and DHS policy, I hereby consent to the disclosure to the named Attorney or Accredited Representative of any record pertaining to me that appears in any system of records of USCIS, ICE, or CBP.

- 8.a. Signature of Applicant, Petitioner, or Respondent

- 8.b. Date

(mm/dd/yyyy)

Part 4. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before the Department of Homeland Security. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. Signature of Attorney or Accredited Representative

2. Signature of Law Student or Law Graduate

3. Date

(mm/dd/yyyy)

Part 5. Additional Information

- 1.

Form I-918, Petition for U Nonimmigrant Status

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

START HERE - Please type or print in black ink.

Part 1. Information about you. (Person filing this petition as a victim)

Family Name Given Name Middle Name
[REDACTED] [REDACTED] [REDACTED]

Other Names Use (Include maiden name/nickname)

None

Home Address - Street Number and Name Apt. No.

[REDACTED] [REDACTED]

City State/Province Zip/Postal Code
Summit Illinois 60501

Safe Mailing Address (if other than above) - Street Number and Name Apt. No.

Same

C/O (in care of):

[REDACTED]

City State/Province Zip/Postal Code
[REDACTED] [REDACTED] [REDACTED]

Home Telephone No. Safe Daytime Phone No. (with area code) E-Mail Address (optional)
(with area code) [REDACTED] [REDACTED] None

A-No. (if any) U.S. Social Security No. (if any) Gender
[REDACTED] [REDACTED] ☐ Male ☒ Female

Marital Status
☒ Single ☐ Married ☐ Divorced ☐ Widowed

Date of Birth (mm/dd/yyyy) Country of Birth
[REDACTED] [REDACTED]

Country of Citizenship Passport No.
[REDACTED] [REDACTED]

Place of Issuance Date of Issue (mm/dd/yyyy)
Chicago, Illinois [REDACTED]

Place of Last Entry Date of Last Entry (mm/dd/yyyy)
[REDACTED] [REDACTED] 2010

I-94 No. (Arrival/Departure Document) Current Immigration Status
None Out of Status

For USCIS Use Only

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	

U.S. Embassy/Consulate:

Validity Dates

From: _____

To: _____

Remarks

Conditional Approval

Stamp No.: _____ Date _____

Action Block

To Be Completed by Attorney or Representative, if any.

☒ Fill in box if G-28 is attached to represent the applicant.

ATTY State License Number
6306574

Part 2. Additional information.

Answers to the questions below require explanations and supporting documentation. Attach relevant documents in support of your claims that you are a victim of criminal activity listed in the Immigration and Nationality Act (INA), section 101(a)(15)(U). You must also attach a personal narrative statement describing the criminal activity of which you were the victim. If you are only petitioning for U derivative status for a qualifying family member(s) subsequent to your (the principal petitioner) initial filing, evidence supporting the original petition is not required to be submitted with the new Form I-918.

Attach additional sheets of paper as needed. Write your name and Alien Registration Number (A #), if any, at the top of each sheet and indicate the number of the item that refers to your answer. Include the Part and letter or number relating to the additional information you provided (example: Part 2, Z).

Check either "Yes" or "No" as appropriate to each of the following questions.

1. I am a victim of criminal activity listed in the INA at section 101(a)(15)(U). ☒ Yes ☐ No
2. I have suffered substantial physical or mental abuse as a result of having been a victim of this criminal activity. ☒ Yes ☐ No
3. I possess information concerning the criminal activity of which I was a victim. ☒ Yes ☐ No
4. I am submitting a certification from a certifying official on Form I-918 Supplement B, U Nonimmigrant Status Certification. ☒ Yes ☐ No
5. The crime of which I am a victim occurred in the United States including Indian country and military installations) or violated the laws of the United States. ☒ Yes ☐ No
6. I am under the age of 16 years. ☐ Yes ☒ No
7. I want an Employment Authorization Document. ☒ Yes ☐ No
8. Have you ever been in immigration proceedings? ☒ Yes ☐ No

If "Yes," what type of proceedings? (Check all that apply.)

- ☒ Removal Date (mm/dd/yyyy) ☐ Exclusion Date (mm/dd/yyyy) ☐ Deportation Date (mm/dd/yyyy) ☐ Recission Date (mm/dd/yyyy) ☐ Judicial Date (mm/dd/yyyy)

2010

9. List each date, place of entry and status under which you entered the United States during the five years preceding the filing of this petition.

Date of Entry (mm/dd/yyyy)	Place of Entry	Status at Entry
2010		Entry Without Inspection

Part 2. Additional information. (Continued.)

10. If you are outside the United States, give the U.S. Consulate or inspection facility you want notified if this petition is approved.

Type of Office (Check one): ☐ Consulate ☐ Pre-flight inspection ☐ Port of Entry

Office Address (City)

U.S. State or Foreign Country

N/A

Safe Foreign Address Where You Want Notification Sent - Street Number and Name

Apt. No.

City

State/Province

Country

Zip/Postal Code

Part 3. Processing information.

Please answer the following questions about yourself. For the purposes of this petition, you must answer "Yes" to the following questions, if applicable, even if your records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer or attorney, told you that you no longer have a record. (Answering "Yes" does not necessarily mean that you will be denied U nonimmigrant status.)

1. Have you EVER:

- a. Committed a crime or offense for which you have not been arrested? ☐ Yes ☒ No
- b. Been arrested, cited or detained by any law enforcement officer (including DHS, former INS and military officers) for any reason? ☒ Yes ☐ No
- c. Been charged with committing any crime or offense? ☐ Yes ☒ No
- d. Been convicted of a crime or offense (even if violation was subsequently expunged or pardoned)? ☐ Yes ☒ No
- e. Been placed in an alternative sentencing or a rehabilitative program (for example: diversion, deferred prosecution, withheld adjudication, deferred adjudication)? ☐ Yes ☒ No
- f. Received a suspended sentence, been placed on probation or been paroled? ☐ Yes ☒ No
- g. Been in jail or prison? ☐ Yes ☒ No
- h. Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action? ☐ Yes ☒ No
- i. Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? ☐ Yes ☒ No

If you answered "Yes" to any of the above questions, complete the following table. If you need more space, use a separate sheet of paper to give the same information.

Why were you arrested, cited, detained or charged?	Date of arrest, citation, detention, charge. (mm/dd/yyyy)	Where were you arrested, cited, detained or charged? (City, State, Country)	Outcome or disposition. (e.g., no charges filed, charges dismissed, jail, probation, etc.)
No Immigration Status	2010		Notice to Appear
No Immigration Status	2014	Near	Order of Supervision

Part 3. Processing information. (Continued.)

2. Have you ever received public assistance in the United States from any source, including the U.S. government or any State, county, city or other municipality (other than emergency medical treatment), or are you likely to receive public assistance in the future? ☐ Yes ☒ No
3. Have you:
- a. Engaged in prostitution or procurement of prostitution or do you intend to engage in prostitution or procurement of prostitution? ☐ Yes ☒ No
- b. Ever engaged in any unlawful commercialized vice, including, but not limited to illegal gambling? ☐ Yes ☒ No
- c. Ever knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the United States illegally? ☐ Yes ☒ No
- d. Ever illicitly trafficked in any controlled substance, or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance? ☐ Yes ☒ No
4. Have you ever committed, planned or prepared, participated in, threatened to, attempted to, or conspired to commit, gathered information for, solicited funds for any of the following:
- a. Highjacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No
- b. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No
- c. Assassination? ☐ Yes ☒ No
- d. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? ☐ Yes ☒ No
- e. The use of any biological agent, chemical agent, or nuclear weapon or device, or explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No
5. Have you ever been a member of, solicited money or members for, provided support for, attended military training (as defined in section 2339D(c)(1) of title 18, United States Code) by or on behalf of, or been associated with an organization that is:
- a. Designated as a terrorist organization under section 219 of the Immigration and Nationality Act? ☐ Yes ☒ No
- b. Any other group of two or more individuals, whether organized or not, which has engaged in or has a subgroup which has engaged in: ☐ Yes ☒ No
- c. Highjacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No
- d. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No
- e. Assassination? ☐ Yes ☒ No
- f. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? ☐ Yes ☒ No

Part 3. Processing information. (Continued.)

g. The use of any biological agent, chemical agent, or nuclear weapon or device, or explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

h. Soliciting money or members or otherwise providing material support to a terrorist organization? ☐ Yes ☒ No

6. Do you intend to engage in the United States in:

a. Espionage? ☐ Yes ☒ No

b. Any unlawful activity, or any activity the purpose of which is in opposition to, or the control or overthrow of the government of the United States? ☐ Yes ☒ No

c. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information? ☐ Yes ☒ No

7. Have you ever been or do you continue to be a member of the Communist or other totalitarian party, except when membership was involuntary? ☐ Yes ☒ No

8. Have you, during the period of March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group or political opinion? ☐ Yes ☒ No

9. Have you EVER ordered, committed, assisted, helped with, or otherwise participated in any act that involved:

a. Torture or genocide? ☐ Yes ☒ No

b. Killing, beating, or injuring any person? ☐ Yes ☒ No

c. Displacing or moving any persons from their residence by force, threat of force, compulsion, or duress? ☐ Yes ☒ No

d. Engaging in any kind of sexual contact or relations with any person who was being subjected to force, threat of force, compulsion, or duress? ☐ Yes ☒ No

e. Limiting or denying any person's ability to exercise religious beliefs? ☐ Yes ☒ No

f. The persecution of any person because of race, religion, national origin, membership in a particular social group, or political opinion? ☐ Yes ☒ No

If you answer "Yes," please describe the circumstances on a separate sheet(s) of paper.

10. Have you EVER advocated that another person commit any of the acts described in the preceding question, urged, or encouraged another person, to commit such acts? (If you answer "Yes," describe the circumstances on a separate sheet(s) of paper.) ☐ Yes ☒ No

Part 3. Processing information. (Continued.)

11. Have you EVER been present or nearby when any person was:

- | | | |
|---|------------------------------|--|
| a. Intentionally killed, tortured, beaten, or injured? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Displaced or moved from his or her residence by force, compulsion or duress? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. In any way compelled or forced to engage in any kind of sexual contact or relations? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If you answer "Yes," please describe the circumstances on a separate sheet(s) of paper.

12. Have you (or has any member of your family) EVER served in, been a member of, or been involved in any way with:

- | | | |
|---|------------------------------|--|
| a. Any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, or insurgent organization? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Any prison, jail, prison camp, detention camp, labor camp, or any other situation that involved guarding prisoners? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Any group, unit, or organization of any kind in which you or other persons possessed, transported, or used any type of weapon? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If you answer "Yes," please describe the circumstances on a separate sheet(s) of paper.

13. Have your EVER received any type of military, paramilitary or weapons training? (If you answer "Yes," please describe the circumstances on a separate sheet(s) of paper.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
------------------------------	--

- | | | |
|--|---|--|
| 14. a. Are removal, exclusion, rescission or deportation proceedings pending against you? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Have removal, exclusion, rescission or deportation proceedings EVER been initiated against you? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Have you EVER been removed, excluded or deported from the United States? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Have you EVER been ordered to be removed, excluded or deported from the United States? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Have you EVER been denied a visa or denied admission to the United States? (If a visa was denied, explain why on a separate sheet of paper.) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Have you EVER been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
-

15. Are you under a final order or civil penalty for violating section 274C (producing and/or using false documentation to unlawfully satisfy a requirement of the Immigration and Nationality Act)?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
------------------------------	--

16. Have you ever, by fraud or willful misrepresentation of a material fact, sought to procure, or procured, a visa or other documentation, for entry into the United States or any immigration benefit?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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17. Have you ever left the United States to avoid being drafted into the U.S. Armed Forces?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
------------------------------	--

Part 3. Processing information. (Continued.)

18. Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver of such? ☐ Yes ☒ No
19. Have you ever detained, retained, or withheld the custody of a child, having a lawful claim to United States citizenship, outside the United States from a United States citizen granted custody? ☐ Yes ☒ No
20. Do you plan to practice polygamy in the United States? ☐ Yes ☒ No
21. Have you entered the United States as a stowaway? ☐ Yes ☒ No
22. a. Do you have a communicable disease of public health significance? ☐ Yes ☒ No
- b. Do you have or have you had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or welfare of yourself or others? ☐ Yes ☒ No
- c. Are you now or have you been a drug abuser or drug addict? ☐ Yes ☒ No

Part 4. Information about spouse and/or children.1. ☐ Spouse

Family Name	Given Name	Middle Name	
None			
Date of Birth (mm/dd/yyyy)	Country of Birth	Relationship	Current Location

2. ☐ Children

Family Name	Given Name	Middle Name	
None			
Date of Birth (mm/dd/yyyy)	Country of Birth	Relationship	Current Location

Family Name	Given Name	Middle Name	
Date of Birth (mm/dd/yyyy)	Country of Birth	Relationship	Current Location

(If more space is needed, attach additional sheet(s) of paper.)

Part 5. Filing on behalf of family members.

I am now petitioning for one or more qualifying family member(s). (If "Yes," complete and include Form I-918, Supplement A and Supplement B, for each family member for whom you are petitioning.)

☐ Yes ☒ No

Part 6. Attestation, release and signature. (Read information on penalties in the instructions before completing this part.)

I certify, under penalty of perjury under the laws of the United States of America, that the information provided with this petition is all true and correct. I certify also that I have not withheld any information that would affect the outcome of this petition.

Signature

Date (mm/dd/yyyy)

[Redacted Signature]

[Redacted Date] 2015

NOTE: If you do not completely fill out this form or fail to submit required documents listed in the instructions, you may not be found eligible for the benefit sought and this petition will be denied.

Part 7. Signature of person preparing form, if other than above. (Sign below.)

I declare that I prepared this petition at the request of the above person, and it is based on all information of which I have knowledge. I have not knowingly withheld any material information that would affect the outcome of this petition.

Attorney or Representative: In the event of a Request for Evidence, may USCIS contact you by Fax or E-Mail? ☒ Yes ☐ No

Preparer's Signature

Date (mm/dd/yyyy)

[Handwritten Signature]

[Redacted Date] 2015

Preparer's Printed Name

Preparer's Firm Name (if applicable)

William Gaston McLean III

Law Office of William Gaston McLean III, PC

Preparer's Address

401 S LaSalle St. Ste. #801R Chicago, IL 60605

Daytime Phone Number (with area code)

Fax Number (if any)

E-Mail Address (if any)

(312) 714-5603

(312) 268-7427

mcleanlaw.chicago@gmail.com

**I-192, Application for Advance
Permission to Enter as Nonimmigrant
[Pursuant to Section 212(d)(3)(A)(ii) of the INA]**

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

(Read instructions to the form.)
Type or Print in Black Ink

Fee Stamp

File No. A- [REDACTED]

I hereby apply to the Secretary of Homeland Security for permission to enter the United States temporarily under the provisions of section 212(d)(3)(A)(ii) of the Immigration and Nationality Act (INA).

1. Full Name [REDACTED] 2. Date of Birth (mm/dd/yyyy) [REDACTED]

3. Place of Birth (City-Town, State/Province, Country) [REDACTED] 4. Present Citizenship/Nationality [REDACTED]

5. Present Address, Telephone Number, and E-Mail address [REDACTED]

6. All addresses at which I have resided during the past 5 years (Use a separate sheet of paper, if necessary.)
(last address before coming to United States)
[REDACTED]

7. Desired Port of Entry into the United States [REDACTED]

8. Means of Transportation
Afoot

9. Proposed Date of Entry
[REDACTED] 2010

10. Approximate Length of Stay in the United States
Permanently

11. My purpose for entering the United States is: (Explain fully)

I wish to permanently escape gang and drug related violence in my home country of [REDACTED]
[REDACTED] I hope to live and work lawfully in the United States and to get started on
making a family of my own here as soon as I am financially stable.

12. I believe that I may be inadmissible to the United States for the following reason(s) and no others:
I unlawfully entered the United States on [REDACTED] 2010. An immigration judge ordered
me removed in absentia on [REDACTED] 2010. I have been unlawfully present at all times
in the United States. I have also worked unlawfully. I also broke Illinois law by [REDACTED]
[REDACTED]

13. ☐ have ☒ have not previously filed an application for advance permission to enter as a nonimmigrant

on _____, _____, at _____.

If you are an applicant for T and U nonimmigrant status, you do not need to answer questions 14 through 17.

14. Have you ever been in the United States for a period of 6 months or more? If yes, when, for how long, and in what immigration status?

N/A

15. Have you ever filed an application or petition for immigration benefits with the U.S. Government, or has one ever been filed on your behalf? If yes, list the applications and/or petitions, the filing locations, and describe the outcome of each application/petition (for example: denied, approved, pending).

N/A

16. Have you ever been denied or refused an immigration benefit by the U.S. Government, or had a benefit revoked or terminated (including but not limited to visas)? Describe in detail.

N/A

17. Have you ever, in or outside the United States, been arrested, cited, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding minor traffic violations? Describe in detail. Include all offenses where impaired driving may have been an issue.

N/A

18. Applicant's Signature and Certification

I understand that the information herein contained may be used in any proceedings (including civil, criminal, immigration, or any other judicial proceeding) hereafter instituted against me.

I certify that the statements above and all attachments hereto are true and correct to the best of my knowledge and belief.

(Signature of Applicant)

(Date)

Signature of the Applicant/Signature of Guardian or Family Member (if Applicant is unable to sign)

19. Preparer's Signature and Certification

I declare that this document was prepared by me at the request of the applicant or qualified relative/legal guardian of the applicant, and it is based on all information of which I have knowledge and/or was provided to me by the above named person in response to the exact questions contained on this form. I have not knowingly withheld any information.

(Signature)

401 S LaSalle #801R Chicago, IL 60605

(Address)

(Date)

RECEIVED	TRANS. IN	RET'D TRANS. OUT	COMPLETED

OMB No. 1615-0104; Expires 01/31/2016

Department of Homeland Security
U.S. Citizenship and Immigration ServicesForm I-918 Supplement B,
U Nonimmigrant Status Certification

START HERE - Please type or print in black ink.

Part 1. Victim Information

Family Name

Given Name

Middle Name

Other Names Used (Include maiden name/nickname)

None

Date of Birth (mm/dd/yyyy)

Gender

☐ Male☒ Female

Part 2. Agency Information

Name of Certifying Agency

Summit Police Department

Name of Certifying Official

Mel Ortiz

Title and Division/Office of Certifying Official

Detective

Name of Head of Certifying Agency

John Kosmowski

Agency Address - Street Number and Name

5810 S Archer Rd.

Suite No.

City

State/Province

Zip/Postal Code

Summit

Illinois

60501

Daytime Phone No. (with area code and/or extension)

(708) 563-4830

Fax No. (with area code)

(708) 458-9256

Agency Type

☐ Federal☐ State☒ Local

Case Status

☐ On-going☒ Completed☐ Other: _____

Certifying Agency Category

☐ Judge☒ Law Enforcement☐ Prosecutor☐ Other: _____

Case Number

FBI No. or SID No. (if applicable)

N/A

Part 3. Criminal Acts

1. The applicant is a victim of criminal activity involving or similar to violations of one of the following Federal, State or local criminal offenses. (Check all that apply.)

☐ Abduction☐ Female Genital Mutilation☐ Obstruction of Justice☐ Slave Trade☐ Abusive Sexual Contact☐ Hostage☐ Peonage☐ Torture☐ Blackmail☐ Incest☐ Perjury☒ Trafficking☐ Domestic Violence☒ Involuntary Servitude☐ Prostitution☐ Unlawful Criminal Restraint☐ Extortion☐ Kidnapping☐ Rape☐ Witness Tampering☐ False Imprisonment☐ Manslaughter☐ Sexual Assault☐ Related Crime(s)☒ Felonious Assault☐ Murder☐ Sexual Exploitation☐ Other: (If more space needed, attach separate sheet of paper.)☐ Attempt to commit any of the named crimes☐ Conspiracy to commit any of the named crimes☐ Solicitation to commit any of the named crimes

For USCIS Use Only	
Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	
Remarks	

Part 3. Criminal Acts (continued)

2. Provide the date(s) on which the criminal activity occurred.

Date (mm/dd/yyyy)

Date (mm/dd/yyyy)

Date (mm/dd/yyyy)

Date (mm/dd/yyyy)

[REDACTED]/2011

3. List the statutory citation(s) for the criminal activity being investigated or prosecuted, or that was investigated or prosecuted.

720 ILCS 5/12 3.05(c), 720 ILCS 5/10-9(b), 720 ILCS 5/10-9(d)

4. Did the criminal activity occur in the United States, including Indian country and military installations, or the territories or possessions of the United States?
- ☒
- Yes
- ☐
- No

- a. Did the criminal activity violate a Federal extraterritorial jurisdiction statute?
- ☐
- Yes
- ☒
- No

- b. If "Yes," provide the statutory citation providing the authority for extraterritorial jurisdiction.

- c. Where did the criminal activity occur?

5. Briefly describe the criminal activity being investigated and/or prosecuted and the involvement of the individual named in Part 1. Attach copies of all relevant reports and findings.

The Summit Police Department responded to a disturbance call from the victim [REDACTED] at [REDACTED] on [REDACTED] 2011. The owner of [REDACTED], [REDACTED], had struck Ms. [REDACTED] with high-heeled shoes. Mr. [REDACTED] also did not pay Ms. [REDACTED], and pressured her to perform sexual favors for customers as repayment for having trafficked her to the US.

6. Provide a description of any known or documented injury to the victim. Attach copies of all relevant reports and findings.

It was noted that Mr. [REDACTED] struck Ms. [REDACTED] with one or two high-heeled shoes during the assault.

Part 4. Helpfulness of the Victim

The victim (or parent, guardian or next friend, if the victim is under the age of 16, incompetent or incapacitated.):

1. Possesses information concerning the criminal activity listed in Part 3. ☒ Yes ☐ No
2. Has been, is being or is likely to be helpful in the investigation and/or prosecution of the criminal activity detailed above. (Attach an explanation briefly detailing the assistance the victim has provided.) ☐ Yes ☒ No
3. Has not been requested to provide further assistance in the investigation and/or prosecution. (Example: prosecution is barred by the statute of limitation.) (Attach an explanation.) ☒ Yes ☐ No
4. Has unreasonably refused to provide assistance in a criminal investigation and/or prosecution of the crime detailed above. (Attach an explanation.) ☐ Yes ☒ No

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February 19, 2015

USCIS - Vermont Service Center
75 Lower Welden Street
St. Albans, VT 05479-0001

Re: [REDACTED]
A#: [REDACTED]

Dear Officer,

I am writing this letter on behalf of my client, [REDACTED] ("Petitioner") in support of her I-918, Petition for U Nonimmigrant Status. Petitioner was the victim of a felonious assault, involuntary servitude, and trafficking in or around [REDACTED] 2010 in Summit, Illinois and was helpful to the Summit Police Department in the subsequent investigation. Petitioner now finds herself suffering from emotional abuse, including post-traumatic stress disorder, depression, and anxiety as a result of this incident. Please find the required evidence, as proof of Petitioner's eligibility for U Nonimmigrant Status, in the order below:

Forms:

- G-28, Notice of Entry of Appearance as Attorney;
- I-918, Petition for U Nonimmigrant Status;
- I-918 Supplement B, U Nonimmigrant Status Certification;
- I-192, Application for Advance Permission to Enter as Nonimmigrant;

Exhibits:

- Petitioner's sworn declaration;
- Petitioner's [REDACTED] passport;
- Letter from Summit, Illinois police officers;
- Psychological Assessment of Petitioner by Caren Ex, M.A. LCSW

Petitioner hopes that you will look favorably upon her request for U Nonimmigrant Status. It is Petitioner's desire to live and work permanently in the United States. We ask that you please approve the application. Thank you very much and we look forward to your reply.

Sincerely,

William McLean
Attorney for Petitioner