

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

**Form I-212, Application for Permission to Reapply for Admission  
Into the United States After Deportation or Removal**

*For Government Use Only*

**Fee Stamp**

RECEIVED	TRANS. IN	RET'D-TRANS.-OUT	COMPLETED

Date

**This space for use by DHS officer**

File A -

Decision

Date of Action

DD  
or  
OIC  
Office

***Applicants Start Here (To be filed in duplicate)***

**PART I. INFORMATION ABOUT YOU**

Last Name

First Name

Middle Name

Alien registration number (A#) if known, or Alien File(s) or receipt number(s) and any immigration file(s) or case number(s) listed on correspondence from U.S. immigration authorities that relate to you

Other names used or known by

Name used when last deported or removed from the United States

Country of Citizenship or Nationality

Date of Birth

Place of Birth (City or Town)

State

Province

Country

**PART II. REASON FOR FILING THIS FORM**

**I am inadmissible to the United States for the following reason(s) and no others:**

**I have been removed as an arriving alien in expedited removal proceedings under INA section 235(b)(1), or I was removed at the end of proceedings under INA section 240 as an arriving alien (INA section 212(a)(9)(A)(i)).**

I have only been removed once, and my last removal was less than 5 years ago.

I have been removed at least twice or more, and my last removal was less than 20 years ago.

I have been convicted of an aggravated felony (in the United States or elsewhere, before or after my removal from the United States).

**I have been removed as a deportable alien under INA section 240 or any other provision of the law, or I departed the United States while an order or removal was outstanding (INA section 212(a)(9)(A)(ii)).**

I have only been removed once and less than 10 years ago.

I have been removed at least twice or more, and my last removal was less than 20 years ago.

I have been convicted of an aggravated felony (in the United States or elsewhere, before or after my removal from the United States).

---

**I entered or attempted to enter the United States without being admitted or paroled after having been removed (INA section 212(a)(9)(C)(i)(I)).**

Specify date of last departure from the United States after having become inadmissible: (Attach evidence that demonstrates the date of your last departure from the United States and that you have remained outside the United States for 10 years.)

**I entered or attempted to enter the United States without being admitted or paroled after having been unlawfully present in the United States for a period of more than 1 year, in the aggregate (INA section 212(a)(9)(C)(i)(I)).**

Specify date of last departure from the United States after having become inadmissible: (Attach evidence that demonstrates the date of your last departure from the United States and that you have remained outside the United States for 10 years.)

---

**PART III. INFORMATION ABOUT YOUR REMOVAL/DEPORTATION AND DEPARTURE**

Date of deportation or removal from the United States

If you have not been in removal proceedings, date of last departure from the United States (*Attach evidence*)

Length of residence in the United States (*years*)

Place of residence at time of deportation or removal from United States (*city and state*)

Place deportation or removal hearing held or application for removal made (*city and state*)

Country to which deported or removed

Detention facility or jail where detained (*city and state*) (*If not detained, write "None."*)

Port/location of departure from the United States

---

**PART IV. REASON(S) FOR YOUR REQUEST FOR PERMISSION TO REAPPLY**

Status desired if permitted to reenter the United States:

Permanent Resident    Visitor    Student    Other (*specify*) \_\_\_\_\_

Reason(s) for desiring to reenter the United States:

---

---

**REASON(S) FOR YOUR REQUEST FOR PERMISSION TO REAPPLY (Cont'd)**Location of U.S. Embassy/consulate where application for visa is/or will be made (*city and country*)

Name and relationship of U.S. citizen or lawful permanent resident alien spouse, parent or children, if any

---

---

**PART V. APPLICANT'S SIGNATURE AND CERTIFICATION**

I certify under penalty of perjury under the laws of the United States that this application and the evidence submitted with it are all true and correct to the best of my knowledge and abilities. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services (USCIS) or any other agency adjudicating this application needs to determine my eligibility for the benefits sought with this application.

Signature of Applicant or Legal Guardian

Date of Signature

Applicant's Street Address (You must provide a physical address.)

<input type="text"/>	City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>	Province	<input type="text"/>
----------------------	------	----------------------	-------	----------------------	----------	----------------------	----------	----------------------

P.O. Box (If applicable)

State

Province

Country

Applicant's Telephone Number

Applicant's Mobile Telephone Number

Applicant's E-mail Address (if any)

---

---

**PART VI. PREPARER'S SIGNATURE AND CERTIFICATION (If other than applicant)**

I declare that this document was prepared by me at the request of the applicant or legal guardian of the applicant, and that 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 of Preparer

Date of Signature

Preparer's Street Address

<input type="text"/>	City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>	Province	<input type="text"/>
----------------------	------	----------------------	-------	----------------------	----------	----------------------	----------	----------------------

P.O. Box (If applicable)

State

Province

Country

Preparer's Telephone Number

Preparer's Mobile Telephone Number

Preparer's E-mail Address (if any)