



CARECEN

DACA Renewal Personal Information Form

DATE: _____ **TIME:** _____ **Sex:** Female Male Transgender **Age:** _____

Social Security #: ___ - ___ - ____ **USCIS A# (See work permit):** ___ - ___ - ____ **Date of Birth:** ___ / ___ / ____

Full Legal Name: _____

Cell Phone: (____) ___ - ____ **Home Phone:** (____) ___ - ____ **Email:** _____

Present Address: _____ **Apartment #** _____

City: _____ **State:** _____ **Zip:** _____

Is this your first time at CARECEN? Yes No If "yes," how did you hear about us? _____

Have you changed your address since you last renewed DACA? Yes No

(If NO, skip to marital status question. If YES, complete the question below and enter your address history in the box.)

Did you file a change of address (AR-11) with USCIS? Yes No

Provide all addresses where you have resided since you last renewed DACA and moved to your present address.

Full Address	From (mm/dd/yyyy)	To (mm/dd/yyyy)

Marital Status: Single Married Widowed Divorced Partnered/living together.

Do you have children? Yes No

Sexual Orientation: Bisexual Gay Lesbian Heterosexual Decline to state Other: _____

Race/Ethnicity: White (Hispanic) Black (Hispanic) White (Non-Hispanic) Black (Non-Hispanic) Other: _____

Highest Level of Education Completed: None Completed Primary High School Some College College Degree Grad. Degree

IMMIGRATION HISTORY:

City of Birth: _____ **State/Department of Birth:** _____

Country of Birth: _____

Date of 1st entry into the US: ___ / ___ / ____ **Where did you enter the U.S.?** _____

How did you enter? Without Permission Visa Parole Other: _____

Have you ever had a passport? Yes No **If YES, is your passport:** Valid or Expired?

Have you departed the U.S. since you applied for DACA? Yes No

If YES, did you obtain permission (advance parole) from USCIS before you traveled? Yes No

PROVIDE ALL DEPARTURES FROM THE U.S. SINCE FIRST APPLYING FOR DACA

Depart: (___ / ___ / ___) Return (___ / ___ / ___) Reason: _____

Depart: (___ / ___ / ___) Return (___ / ___ / ___) Reason: _____

Have you ever been detained by Immigration? Yes No If "Yes," how many times? _____
When? _____ Where? _____

Have you ever been in deportation proceedings? Yes No When? _____ Where? _____

Have you ever had any contact with law enforcement since you first applied for DACA? Yes No
If YES, what type of contact? Arrest
 Ticket/Citation only
 Stopped and questioned only

If YES, please briefly explain (reason, date, location, and whether case has terminated or is ongoing):

Have you or a member of your immediate family ever been the VICTIM of a crime in the U.S. (including domestic violence)?
 Yes No

If yes, when? _____ Where? _____

Please describe the crime in the space below:

HOUSEHOLD income (you and your dependents or income of person that claims you as a dependent):

Please provide your household's annual income: \$ _____ How many people live in your household? _____

TOTAL ANNUAL INCOME. Add all your income sources (employment, public assistance, child support, Social Security benefits, unemployment benefits, etc.)	\$
TOTAL ANNUAL EXPENSES. Add all your expenses (rent, utilities, school loans, child support, creditcards and other loans, medical monthly expenses, etc.)	\$
TOTAL VALUE OF ASSETS. Add the value of vehicle/s, home (home value minus mortgage still owed), savings, certificates of deposit, etc.	\$

I CERTIFY THAT THE INFORMATION I HAVE PROVIDED ON THIS FORM IS CORRECT:

Signature: _____

Date: _____

CONTRACT FOR LEGAL CONSULTATION

I. SERVICE: Legal Consultation

This agreement is made by and between the Central American Resource Center (hereafter, "CARECEN") and _____ (hereafter, the "Client"). The Client hereby contracts with CARECEN for a **legal consultation**. The Client makes this agreement with CARECEN, and not with any specific employee of the organization. CARECEN may assign the consultation to any employee of the CARECEN legal department, or any attorney or law student collaborating with or volunteering for the organization.

II. COST

The Client will pay the amount of **\$0** for the legal consultation.

III. LIMITATIONS OF CONTRACT

- A. The Client understands that a legal consultation is solely for advice and does not include or imply any obligation on the part of CARECEN to provide any additional legal services or representation. This contract is for legal advice on one occasion only, and does not provide the Client the right to ongoing or future legal advice.
- B. The Client understands that there may be legitimate differences of opinion regarding a situation, and the legal advice and opinions of CARECEN may differ from those of other attorneys.
- C. The Client has provided complete and correct contact information to CARECEN, including telephone and address. The Client understands that it is his/her responsibility to provide truthful information about his/her case to CARECEN, US Citizenship & Immigration Services and/or the Immigration Court. If the Client provides false or incomplete information, or fails to provide documentation requested by CARECEN (citations or arrests by police, arrests by immigration, prior deportation orders, etc) CARECEN is not required to complete the legal consultation or provide additional advice or services.

IV. CONFIDENTIALITY

The CARECEN legal department respects the confidentiality of each client seeking advice or services. CARECEN will not provide information about a client to any individual or entity without prior consent from the client.

Client	Signature	Date
CARECEN Representative	Signature	Date



CENTRAL AMERICAN RESOURCE CENTER / CENTRO DE RECURSOS CENTROAMERICANOS

Acknowledgement of Guidelines for Legal Services

At this point CARECEN has not agreed to take your case and is only offering a legal consultation.

These guidelines apply now and if we accept your case, will apply throughout the case process until your case is closed.

These guidelines apply now and throughout the case process until your case is closed.

Communication and deadlines

Individuals seeking legal services should submit documents requested by caseworker by deadline given. () (*initials*)

Documents requested should be mailed, emailed or sent by text according to caseworker's instructions. () (*initials*)

Individuals seeking legal services should be patient with CARECEN caseworkers since it is taking longer to access the office and review documents. () (*initials*)

Individuals seeking legal services should only contact CARECEN caseworkers during working hours 9-5pm Monday-Friday. () (*initials*)

If you cannot reach us, please only leave one message with your full name and telephone and wait 1 week before calling again unless you have an emergency. **Please wait for caseworker to call you back and please do not leave multiple messages through different forms of communication.** If you don't leave a voice message with your name and number, it's possible we might not be able to return your phone call. () (*initials*)

Individuals seeking legal services should be respectful and courteous to all CARECEN employees including volunteers. () (*initials*)

Individuals seeking legal services should be responsive to caseworker's calls and other forms of communication like email messages. () (*initials*)

Individuals seeking legal services should review documents provided including contracts and ask any questions at intake. () (initials)

Individuals must provide their own interpreters for interviews. CARECEN is not responsible for providing you with an interpreter. () (initials)

Individuals may NOT record any conversation with CARECEN staff, whether by phone or video, without prior written consent from CARECEN. () (initials)

CARECEN reserves the right to withdraw representation, even if the individual does not respond or cooperate, becomes hostile or disrespectful, or if an individual takes actions contrary to legal advice or contrary to the stipulations in the contract. Please refer to the service contract. () (initials)

I have read through and agree to these guidelines. I understand that failure to follow these guidelines may result in CARECEN not offering me a legal consultation, CARECEN not taking my case or withdrawing their legal representation if they have already accepted the case.

NAME

SIGNATURE

DATE