DEPARTMENT OF HOMELAND SECURITY U.S. Immigration and Customs Enforcement

APPLICATION FOR A STAY OF DEPORTATION OR REMOVAL

A decision in a stay of deportation or removal application is within the sole discretion of the Secretary of Homeland Security or his or her designee, including the Field Office Director. You may not appeal his or her decision.

1. Who may file this application?

Anyone ordered deported or removed from the United States may apply for a stay of deportation or removal under 8 C.F.R. 241.6. Fill out a separate application with required documentation (see item 3) for each family member and others who will also seek a stay of deportation or removal.

2. Where should I submit this application?

Submit this application in person* to your local Enforcement and Removal Operations (ERO) Field Office. You can locate your nearest ERO Field Office at: http://www.ice.gov/contact/ero/index.htm

- **If you are detained**, file this application with the ERO Field Office that has jurisdiction over your custody.
- If you are not detained, file this application with the ERO Field
 Office closest to your residence. *If you have a problem
 delivering the application in person, contact your local ERO
 Field Office to see if delivery would be permitted by general
 mail or another delivery service.

3. What identity documents do you require from me?

Provide documentation from category A, B, or C below. All documents submitted will be retained by ERO pending final disposition in your case.

- (A) Original passport Valid for 6 months past the time period being requested OR
- (B) Copy of passport Valid for 6 months past the time period being requested AND a copy of birth certificate or other identity documents OR
- (C) If you have no valid passport If your country of citizenship requires a passport for entry and you do not have a valid passport or a passport that is valid for 6 months past the time period you requested, you must provide proof that you applied for a passport or similar travel document. A copy of your application, proof of fee being paid and a copy of all documentation you submitted is required. If you receive a response that your application has been received, include a copy of that correspondence.

4. What evidence or documentation should I submit with this application?

- Medical If the basis of your request is due to a medical condition, you must obtain documentation from your doctor regarding your medical condition, treatment, prognosis, and any assistance you need relating to your condition
- Arrests Submit police reports and disposition of all arrests
- Convictions Submit judgment, conviction and sentencing documents for all convictions
- Summary Submit your reasons why you are requesting a stay
 of deportation or removal. Provide any additional documentation
 or evidence that would support your basis for a stay.

5. What fees should I submit with this application?

The fee for processing this application is \$155.00. Include the fee with the application. There is no refund, regardless of the action taken. Payments must be made out to, "Department of Homeland Security" or "Immigration and Customs Enforcement". **Accepted methods of payment:** U.S. Cash, Money Order, or Cashier's Check.

6. Why could ICE reject this application?

- Incorrect fee (erroneous fee amounts will not be refunded)
- · Application filed at incorrect ERO Field Office
- Multiple applicants listed on same application
- · Failure to sign your application
- · Failure to submit application in person
- Failure to submit required identity documents. (see item 3)
- · Incorrect home (physical) address listed on application
- You are currently categorized as an ICE fugitive or you have made other attempts to hinder your deportation or removal
- When applicable, failure to completely and clearly fill out the section listed as, "Information if form prepared by other than applicant"

7. Why could ICE deny this application?

- Failure to submit medical documentation that supports your reason for this request, if applicable
- Failure to submit your statement or summary that explains why you submitted this request
- · Record of criminal activity
- · Threat to self or others
- · Inaccurate, incomplete or untruthful information
- Not currently under a final order of deportation or removal
- Discretion of the Field Office Director or designee

8. What will happen when I submit this application?

- You may be fingerprinted (if 14 years or older)
- · You may be photographed
- · Your criminal history (if any) will be reviewed
- Your information will be entered into Department of Homeland Security databases.

9. What if this application is approved?

- You will be issued an Order of Supervision (OSUP) and be required to comply with the conditions listed in the OSUP
- You may have other conditions to comply with set by the Field Office Director or designee
- You may be required to post an OSUP bond (minimum bond amount: \$1,500.00)

10. Why could ICE revoke my stay of deportation or removal after it is approved?

- · Arrest by any law enforcement officer
- Conviction of any crime(s)
- · A violation of the OSUP
- · A violation of the terms of an OSUP bond
- For any reason(s) at the discretion of the Field Office Director or designee

11. What can happen if I submit false information?

All statements made in response to questions in this application are declared to be true and correct under penalty of perjury pursuant to 18 U.S.C. 1546. The knowing placement of false information on the application may subject you, or the preparer of the application, to criminal penalties under 18 U.S.C. 1546, and you and the preparer to civil and criminal penalties pursuant to the Immigration and Nationality Act 274C and 8 U.S.C. 1324c.

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DEPARTMENT OF HOMELAND SECURITY U.S. Immigration and Customs Enforcement

APPLICATION FOR A STAY OF DEPORTATION OR REMOVAL

PRIVACY NOTICE

Authority: The collection of this information is authorized by 8 U.S.C. § 1231 and 8 CFR § 241.6.

Purpose: The information requested is being collected to enable U.S. Immigration and Customs Enforcement (ICE) to determine your eligibility under the Immigration and Nationality Act for a stay of deportation or removal from the United States.

Agency Disclosure of Information: For United States Citizens, Lawful Permanent Residents, or individuals whose records are covered by the Judicial Redress Act of 2015 (5 U.S.C. § 552a note), your information may be disclosed in accordance with the Privacy Act of 1974, 5 U.S.C. § 552a(b), including pursuant to the routine uses published in the DHS/ICE-011 Criminal Arrest Records and Immigration Enforcement Records (CARIER) and DHS/USCIS-ICE-CBP-001 Alien File (A-File), Index, and National File Tracking Systems of Records Notices (SORNs), which can be viewed at www.dhs.gov/privacy.

For all others, as appropriate under United States law and DHS policy, the information you provide may be shared internally within the U.S. Department of Homeland Security (DHS), as well as federal, state, local, tribal, territorial, and foreign law enforcement; other government agencies; and other parties for collection, enforcement, investigatory, litigation, or other purposes.

Providing Information to DHS: Furnishing this information is voluntary. However, requests for stays of deportation or removal will not be considered unless this form is completed.

PUBLIC REPORTING BURDEN

U.S. Immigration and Customs Enforcement is collecting this information as a part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the data needed and completing and reviewing this collection of information is 30 minutes (0.50 hours) per response. Responses to this collection of information are voluntary for anyone ordered deported or removed from the United States. An agency may not conduct or sponsor, and a person is not required to respond to, an information collection unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:

Office of the Chief Information Officer/Forms Management Officer U.S. Immigration and Customs Enforcement 801 I Street, NW STOP 5800 Washington, DC 20536-5800

(Do not mail your completed application to this address.)

NOTICE - A pending application does not preclude the execution of a final order of deportation or removal. The Field Office Director may at his or her discretion revoke the approval of this application and execute the order of removal at a date and time of his or her choosing. No advance notice is required for the execution of a final order of removal. Additionally, provision of false information could result in the denial of your application.

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DEPARTMENT OF HOMELAND SECURITY U.S. Immigration and Customs Enforcement

OMB No. 1653-0021 Expires: 07/31/2019

APPLICATION FOR A STAY OF DEPORTATION OR REMOVAL

Action Block - For ICE Use Only						Fe	e/Date Stamp	
☐ GRANTED ☐ One Year ☐ Six Months ☐ Three Months ☐ Other:								
□ DENIED □ Denial letter attached. □ REJECTED □ Incorrect Fee □ Application was not submitted in person □ Other:								
	Application	was not subn	nitted in	person Otner:				
Additional information attached.								
Date: Decision r	nade by:		/D	rinted Name/Title)				
(Printed Name/Title) Deciding Official Signature								
(Sign in ink):				Office:				
A-File Number:	Date:	Date: If you		are currently detained by ICE	he name of the o	etention facility:		
Last Name:		First Nam	ne:	ə: V		Middle Name:	fiddle Name:	
Address (Number and Street):				Country of Citizenship:	Passport	t No:	Expiration Date:	
An arter and Niverbary				Length of stay requested:				
Apartment Number:				one year six months three months other:				
Town/City:	State:	Zip Code	:					
Telephone Number:	Cell Telephone			Arrested by police or other immigration reasons)				
Tolophono Hambe	rumber.							
REASON(S) FOR REQUESTING	Δ STAY OF DE	PORTATIO	N OR I	REMOVAL:				
EVIDENCE SUBMITTED (attache	d):							
Medical Brief Othe	r (specify):							
I certify under penalty of perjury that	the information pr	ovided and c	ontained	d herein is true and correct to t	he best of	my knowledge a	and belief:	
(Printed Name)				(Signature) (Sign in ink)				
INFORMATION IF FORM PREPA	RED BY OTHE	R THAN A	PPLICA	NT:				
I declare under penalty of law that thi knowledge. I understand that providir imprisonment or both.								
(Printed Name)				(Signature) (Sign in ink)				
(Tolonbono Niverban)		troot Address	-\		(1 , ,)	(01-1-)	(7in Cada)	
(Telephone Number) (Street Address)			(Ci	ity)	(State)	(Zip Code)		

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