



## DACA Renewal Day

*Deferred Action for Childhood Arrivals Renewal Paperwork Preparation*

*Free services— Sign-up mandatory*

**When:** Saturday, June 4, 2016—Registration starts at 9:30 A.M.

**Where:** Neighborhood Christian Legal Clinic—3333 N Meridian St., Indianapolis, IN 46208 (2nd flr)

**To sign up:** Each individual that plans to attend MUST SIGN UP by calling (317) 429-4131 ext. 174 OR by email at [bfitzsimmons@nclegalclinic.org](mailto:bfitzsimmons@nclegalclinic.org)

To confirm attendance, please leave a message with the following information:

- Full name, telephone number, and address where you may receive mail
- Date of approval and expiration of your Deferred Action for Childhood Arrivals

**You must bring:**

- Completed Deferred Action for Childhood Arrivals questionnaire (back of this sheet)
- Money order for \$465.00
- \$10.00 for mailing

**If applicable,**

-Any documents related to travel outside of the U.S. since the date your DACA was approved.

**NOTE: Event registration closes after first 50 registrants. Sign up today!**



[www.nclegalclinic.org](http://www.nclegalclinic.org)

# Please fill out before coming

## Deferred Action for Childhood Arrivals Renewal Questionnaire:

1. When does your DACA expire? \_\_\_\_\_
2. Is your expiration date more than 150 days (5 months) away? (Circle) YES or NO
3. *Since your initial DACA was approved*, have you traveled outside of the United States? (Circle) YES or NO

If you circled YES, please list the departure and entry dates from the United States:

Departure:

Entry:

\_\_\_\_\_ (mm/dd/yyyy)      \_\_\_\_\_ (mm/dd/yyyy)  
\_\_\_\_\_ (mm/dd/yyyy)      \_\_\_\_\_ (mm/dd/yyyy)  
\_\_\_\_\_ (mm/dd/yyyy)      \_\_\_\_\_ (mm/dd/yyyy)

4. Have you graduated High School, still a student in High School, enrolled in a GED program, or have obtained your GED diploma? (Circle) YES or NO

If you circled YES, please indicate which applied to you:

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5. Have you ever served in the U.S. Military? (Circle) YES or NO

If you circled YES, indicate if you are currently serving, how, or if you were discharged honorably:

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6. *Since your initial DACA was approved*, have you had contact with ICE or been placed in removal proceedings? (Circle) YES or NO

7. List all police contact *since your initial DACA was approved* with dates, ANY charges and convictions, and ANY criminal history; *MUST* include all juvenile charges. Please indicate whether you received probation, bail, etc.

Date: \_\_\_\_\_ Charge: \_\_\_\_\_ Place: \_\_\_\_\_ Result: \_\_\_\_\_

Date: \_\_\_\_\_ Charge: \_\_\_\_\_ Place: \_\_\_\_\_ Result: \_\_\_\_\_

Date: \_\_\_\_\_ Charge: \_\_\_\_\_ Place: \_\_\_\_\_ Result: \_\_\_\_\_