OMB#1125-0006

Notice of Entry of Appearance as Attorney or Representative Before the Immigration Court

					_			
I hereby enter my appearance as attorney or representative for, and at the request of, DATE (mm/dd/yy):								
the following	ng named person:	A	LIEN NUMBER(S) and					
NIANGE						AME(S) (List lead alien number		
NAME: _	(First)	(Middle Initial)		(Last)		d all family member alien numbers d names, if applicable. Continue on		
	(1 115t)	(Middle initial)		(Last)		xt page as needed.)		
ADDRESS								
ADDRESS	(Number and Street)			(Apt. No.)				
				\ 1 /				
	(City)	(State)		(Zip Code)				
Please check one of the following:								
 1.	I am 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:							
		Full Name of Cour	f		State	Bar No. (if applicable)		
		run Name of Cour	ı	'	Jian	Dai 110. (ii applicable)		
	(Please use space on reverse side to list additional jurisdictions.)							
		1 ' C 11		\ 1		1		
	I am not (or am - explain fully on reverse side) subject to any order of any court or administrative agency disbarring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law and the courts listed above							
	comprise all of the jurisdictions (other than federal courts) where I am licensed to practice law.							
2.	I am an accredited representative of the following qualified non-profit religious, charitable, social service, or similar organization established in the United States, so recognized by the Executive Office for Immigration Review pursuant							
	to 8 C.F.R. § 1292.2 (provide name of organization and expiration date of accreditation):							
	C							
3.	I am a law student or law g	raduate, reputable indi	vidua	l, accredited official, or other	perso	on authorized to represent		
	I am a law student or law graduate, reputable individual, accredited official, or other person authorized to represent individuals pursuant to 8 C.F.R. § 1292.1 (explain fully on reverse side).							
I have read as	nd understand the statements	provided on the rever	se sid	of this form that set forth the	real	ulations and conditions		
				r of this form that set forth the irt. I declare under penalty of				
	of America that the foregoin					·		
SIGNATURE C	OF ATTORNEY OR REPRESE!	NTATIVE		l eoir id#		DATE (mm/dd/yy)		
SIGNATURE	TATIONNET ON KEI KESEI	VIAIIVE		LOIK ID#		DATE (IIIII/dd/yy)		
•								
X			1 , 5.	DDEGG				
NAME OF ATTORNEY OR REPRESENTATIVE (type or print)			AD	DRESS		Check here if new address		
PHONE NUMBER (with area code)			FAX	NUMBER (with area code)				
				,				

Proof of Service							
I(Name)	_ mailed or delivered a copy of the foregoing Form EOIR-28 on _	(Date-mm/dd/yy)					
to the DHS (U.S. Immigration and Customs Enforcem $oldsymbol{X}$	(Number and Street, City, State, Z Signature of Attorney or Representative	Zip Code)					

APPEARANCES - An appearance shall be filed on a Form EOIR-28 by the attorney or representative appearing in each case before an Immigration Judge (see 8 C.F.R. § 1003.17). When an appearance is made by a person acting in a representative capacity, his/her personal appearance or signature constitutes a representation that, under the provisions of 8 C.F.R. part 1003, he/she is authorized and qualified to represent individuals. Thereafter, substitution or withdrawal may be permitted upon the approval of the Immigration Judge of a request by the attorney or representative of record in accordance with 8 C.F.R. § 1003.17(b). Please note that appearances for limited purposes are not permitted, unless specifically authorized by the Immgration Judge. A separate appearance form (Form EOIR-27) must be filed with an appeal to the Board of Immigration Appeals (see 8 C.F.R. § 1003.38(g)). Further proof of authority to act in a representative capacity may be required.

Indicate type of appearance
I am entering an appearance as attorney or representative in this Form EOIR-28 in the capacity of:
☐ Primary Attorney or Representative ☐ Non-primary Attorney or Representative ☐ On behalf of
☐ Check this box if you are entering your appearance pro bono.

AVAILABILITY OF RECORDS - During the time a case is pending, a party to a proceeding or his/her attorney or representative shall be permitted to examine the Record of Proceeding in the Immigration Court having administrative control over the Record of Proceeding, in accordance with the standard procedures of the Court.

REPRESENTATION - A person entitled to representation may be represented by any of the following:

- (1) Attorneys in the United States as defined in 8 C.F.R. § 1001.1(f).
- (2) Law students and law graduates not yet admitted to the bar as defined in 8 C.F.R. § 1292.1(a)(2).
- (3) Reputable individuals as defined in 8 C.F.R. § 1292.1(a)(3).
- (4) Accredited representatives as defined in 8 C.F.R. § 1292.1(a)(4).
- (5) Accredited officials as defined in 8 C.F.R. § 1292.1(a)(5).

All representatives must comply with the specific requirements to represent aliens before the Board of Immigration Appeals. For more information on the requirements, see 8 C.F.R. § 1292.1 and the particular subsections referenced above as applicable. Note that law students and law graduates must submit additional materials pursuant to 8 C.F.R. § 1292.1(a)(2).

FREEDOM OF INFORMATION ACT - This form may not be used to request records under the Freedom of Information Act or the Privacy Act. The manner of requesting such records is contained in 28 C.F.R. §§ 16.1 - 16.11 and appendices. For further information about requesting records from the EOIR under the Freedom of Information Act, see How to File a Freedom of Information Act (FOIA) Request With the Executive Office for Immigration Review, available through the EOIR's website at http://www.usdoj.gov/eoir.

CASES BEFORE THE EOIR - Automated information about cases before the EOIR is available by calling 1-800-898-7180.

ADDITIONAL INFORMATION:

(Please attach additional sheets of paper if necessary.)

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to proved us with information. The estimated average time to complete this form is six (6) minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Executive Office for Immigration Review, Office of General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041.