Department of Homeland Security

U.S. Citizenship and Immigration Services

OMB No. 1615-0099; Expires 05/31/2014 Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons

START HERE - Type or print in blank ink. This form should be completed by Federal, State, or local law enforcement authorities for victims under the Victims of	For USCIS Use Only	
Trafficking and Violence Protection Act, Public Law 106-386, as amended.	Returned	Receipt
PART A. Victim Information	Date	
Family Name (Last Name) Given Name (First Name) Middle Name (if any)	Date	
	Resubmitted	
Other Names Used (include maiden name/nickname)		
	Date	
Date of Birth (mm/dd/yyyy) Gender	Date	
	Reloc Sent	
A # (if known) Social Security # (if known)		
	Date	
	Date	
Part B. Agency Information	Reloc Rec'd	
Name of Certifying Agency		
	Date	
Name of Certifying Official Title and Division/Office of Certifying Official	Date	
	Remarks	
Agency Address - Street Number and Name Suite #		
City State/Province Zip/Postal Code		
Daytime Phone # (area code and/or extension) Fax # (with area code)		
Agency Type Federal State Local		
Case Status On-going Completed Local		
Certifying Agency Category Judge Law Enforcement Prosecutor Other		
Case Number FBI # or SID # (if applicable)		
Part C. Statement of Claim		

1. The applicant is or has been a victim of a severe form of trafficking in persons. Specifically, he or she is a victim of: (*Check all that apply. Base your analysis on the practices to which the victim was subjected rather than on the specific violations charged, the counts on which convictions were obtained, or whether any prosecution resulted in convictions. Note that the definitions that control this analysis are not the elements of criminal offenses, but are those set forth at 8 CFR 214.11(a).*)

Sex trafficking in which a commercial sex act was induced by force, fraud, or coercion. Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act.

Sex trafficking and the victim is under the age of 18.

Part C.	Statement of Claim	(Continued)
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The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud, or coercion for subjection to involuntary servitude, peonage, debt bondage, or slavery.

Not applicable.

Other, specify on attached additional sheets.

2. Please describe the victimization upon which the applicant's claim is based and identify the relationship between that victimization and the crime under investigation/prosecution. Attach the results of any name or database inquiry performed in the investigation of the case, as well as any relevant reports and findings. Include relevant dates, etc. Attach additional sheets, if necessary.

3. Has the applicant expressed any fear of retaliation or revenge if removed from the United States? If yes, explain. Attach additional sheets, if necessary.

4. Provide the date(s) on which the acts of trafficking occurred.

Date (mm/dd/yyyy)	Date (<i>mm/dd/yyyy</i>)	Date (<i>mm/dd/yyyy</i>)	Date (<i>mm/dd/yyyy</i>)

5. List the statutory citation(s) for the acts of trafficking being investigated or prosecuted, or that were investigated or prosecuted.

6. Provide the date on which the investigation or prosecution was initiated.

Date (mm/dd/yyyy)

7. Provide the date on which the investigation or prosecution was completed (if any).

Date (mm/dd/yyyy)

Part D. Coopera	ation of Victim (Attach a	additional sheets, if necessary	v)
The applicant: Has compli Has failed t Has not bee Has not yet	ed with requests for assistar to comply with requests to a	nce in the investigation/prosecut ssist in the investigation/prosecu investigation/prosecution of any	ion of the crime of trafficking. (<i>Explain below.</i>) ation of the crime of trafficking. (<i>Explain below.</i>)
Part E. Family	Members Implicated In	Trafficking	
Yes No		•	e been involved in his or her trafficking to the United ement. Attach additional sheets if necessary.
	Full Name	Relationship	Involvement

Full Name	Relationship	Involvement

Part F. Attestation

Based upon investigation of the facts, I certify, under penalty of perjury, that the above noted individual is or has been a victim of a severe form of trafficking in persons as defined by the VTVPA. I certify that the above information is true and correct to the best of my knowledge, and that I have made, and will make, no promises regarding the above victim's ability to obtain a visa from U.S. Citizenship and Immigration Services, based upon this certification. I further certify that if the victim unreasonably refuses to assist in the investigation or prosecution of the acts of trafficking of which he/she is a victim, I will notify USCIS.

Signature of Law Enforcement Officer (identified in Part B)	Date (mm/dd/yyyy)
Signature of Supervisor of Certifying Officer	Date (mm/dd/yyyy)
Printed Name of Supervisor	