Su nombre, *pro se* NON-DETAINED

Su dirección

**UNITED STATES DEPARTMENT OF JUSTICE**

**EXECUTIVE OFFICE FOR IMMIGRATION REVIEW**

**IMMIGRATION COURT**

**[Ciudad, Estado de su corte de inmigración]**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the Matter of: )

)

Su Nombre ) Número A

)

El nombre de su familiar si tiene la misma audiencia ) Número A

)

El nombre de su familiar si tiene la misma audiencia ) Número A

)

In Removal Proceedings )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

Immigration Judge: Nombre del Juez Next Hearing: Fecha y hora de la audiencia

***PRO SE* MOTION TO ALLOW VIRTUAL APPEARANCE**

***PRO SE* MOTION TO ALLOW VIRTUAL APPEARANCE**

1. My name is [Nombre]. My next hearing is on [Fecha de audiencia] at [Hora de audiencia]. [Opcional: My family members [nombres de sus familiares] also have the same hearing.]
2. I respectfully request the Court to allow me to appear by Webex or by phone for my next hearing as permitted under INA § 240(b)(2) and 8 C.F.R. § 1003.25(c). The Immigration Court Practice Manual at Chapter 4.6 and 4.7 also allows for hearings to be conducted by video or telephone conference.
3. Therefore, I ask to be allowed to attend the hearing virtually because [Escriba las razones verdaderas por las que le resulta difícil asistir a la audiencia en persona. Por ejemplo, si corresponde, puede describir cualquier problema de transporte para llegar a la corte de inmigración. Si usted o un miembro de su familia tiene una enfermedad, lesión o discapacidad grave, también puede describirla. O puede describir cualquier otra circunstancia que le dificulte asistir en persona. Puede incluir varias razones]
4. If the hearing is by phone, I can be reached at [su número de teléfono].
5. If the hearing is internet-based (Webex), I have access to internet, video capabilities, and a private place to attend the hearing.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**United States Department of Justice**

**Executive Office for Immigration Review**

**Immigration Court**

**[Ciudad, Estado de su corte de inmigración]**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the Matter of: )

)

Su nombre ) Número A

)

In Removal Proceedings )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ORDER OF THE IMMIGRATION JUDGE**

Upon consideration of the Respondent’s Motion to Allow Virtual Appearance, it is HEREBY ORDERED that the motion be □ GRANTED or □ DENIED because:

□ DHS does not oppose the motion.

□ The respondent does not oppose the motion.

□ A response to the motion has not been filed with the court.

□ Good cause has been established for the motion.

□ The court agrees with the reasons stated in the opposition to the motion.

□ The motion is untimely per \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

□ Other:

Deadlines:

□ The applications for relief must be filed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

□ The respondent must comply with DHS biometrics instructions by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Immigration Judge

Certificate of Service

This document was served by: [ ] Mail [ ] Personal Service

To: [ ] Alien [ ] Alien c/o Custodial Officer [ ] Alien’s Atty/Rep [ ] DHS

By: Court Staff\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CERTIFICATE OF SERVICE**

On \_\_\_\_\_\_[ Fecha]\_\_\_\_\_\_\_\_\_, I, \_\_\_\_\_\_\_[ Nombre]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, served a copy of this **Motion to Allow Virtual Appearance to** the Office of Chief Counsel at \_\_\_\_[Escriba la dirección del abogado del gobierno. Puede encontrar la dirección aquí: <https://www.ice.gov/es/contactenos/oficinas-de-campo?state=All&office=12&keyword=>. Necesitará enviar una copia de la moción a esa dirección.] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

by \_\_\_\_\_\_\_\_\_[Método de entrega, como el correo de USPS.]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date