

# Sponsor Assessment (Form S-5)

## Data Entry

OMB 0970-0553 [valid through MM/DD/YYYY]

New Sponsor Assessment

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\* Sponsor Application

**Self Disclosed Criminal History**

Additional information on criminal .....

List any child abuse and neglect history

**Family Relationships**

Genogram completed?.....

**Family Relationships: Family in Country of Origin**

Do you have family in your home.....

Additional information on family.....

**Family Relationships: Family and Family Friends in the U.S.**

Do you have a partner?

What is your partner's name and age?

Do you live with your partner?

If no, where does your partner live?

Are you legally married...

What is your relationship?.....

Have you ever been involved.....

If yes, explain

Additional information on the sponsors.

Did any of your children come to the...

Do you have any children living?.....

Have any of your children.....

Who is caring for your children?.....

Additional information on the sponsors.

**Family Relationships: Children**

How do you discipline your children.....

Have you or your spouse/partner.....

If yes, explain

Have you ever been involved in a child..

If yes, explain

Do you provide court ordered financial..

If yes, explain

Have you ever had a child removed.....

If yes, why?  
(Obtain documentation)

Have any of your household members...  
If yes, why?  
(Obtain documentation)

### Household Composition

Describe your home

Describe where the minor will sleep

Do you expect the UAC to contribute.....  
If yes, explain

Does anyone in the household.....  
If yes, explain

Do any of the occupants have criminal...  
If yes, explain

### Previous Sponsorships: Sponsor

Have you ever attempted .....  
Have you ever attempted to sponsor  
If yes, then why did you withdraw?  
Have you ever been denied sponsorship...  
If yes, then why did ORR deny your.....  
Is the child still residing with you?  
If no, explain

What contact do you still have with...  
Did you undergo a home study?  
If yes, why?

Did the child received Post Release...  
If yes, explain

Is the child enrolled in or attending...  
What is the child's current legal status  
Does the child have an upcoming Court...  
Did you attend an LOPC presentation?  
Describe the UAC's current safety..

### Previous Sponsorships: Household Members & Alternate Adult Caregiver

Have any of your household members...  
Did he/she ever attempt to sponsor...  
If yes, then why did he/she withdraw?

Has he/she ever been denied..... 1 --None--

If yes, then why did ORR deny his/her... 1

Is the child still residing with him/her 1 --None--

If no, explain 1

What contact does he/she still have... 1

Did he/she undergo a home study? 1 --None--

If yes, why? 1

Did the child received Post Release.... 1 --None--

If yes, explain 1

Is the child enrolled in or attending... 1 --None--

What is the child's current legal status 1

Does the child have an upcoming Court... 1

Did you attend an LOPC presentation? 1 --None--

Describe the UAC's current safety..... 1

Sponsor's legal status verified with... 1 --None--

#### Proof of Relationship

For CAT 3 sponsor, explain how ... 1

#### Proof of Address

Smarty Streets Verified

Google Earth Verified

Additional proof of address information 1

Length of Stay at Current Address

Google Maps Verified

#### Proof of Financial Stability

Does the sponsor have a job? ..... 1 --None--

Name of Employer

Type of Employment

Location of Employment

Length of Time at present employer

Income

Work Hours/Schedule 1

Does the sponsor have financial needs? 1 --None--

If yes, explain 1

#### Sponsor Care Plan

What school will the UAC attend? 1

Does the sponsor know the school... 1 --None--

How will the UAC be transported to.... 1

Are you aware of any medical.... 1

- What are your plans to address...
- Are you aware of any mental health...
- What are your plans to address the UAC's
- Does the minor have any criminal...
- Explain how you plan to supervise...
- Did the sponsor watch the Sponsor Video?
- Did the sponsor read the Sponsor...

**Sponsor's Knowledge of UAC's Journey and Apprehension**

- Describe the UAC's day to day life...
- Do you know why the UAC decided...
- Did the potential sponsor mention...
- Did the potential sponsor mention...
- When did the UAC leave his/her home...
- How long did the trip take?
- If there is a debt still owed ...
- Who paid for the UAC's trip to the U.S.?
- How did the UAC get to the U.S.?
- Where was the UAC planning on living...
- Do you know if the UAC has ever been...
- If yes, when?

**Human Trafficking Indicators of Sponsor: Sponsor's Journey to the U.S.**

- When and why did you first decide...
- Who planned/organized your journey?
- Please explain the costs of your...
- Did you experience any challenges...
- Where did you first live in the U.S...
- If you have traveled back to your...
- Additional information on sponsor's ...

**Human Trafficking Indicators of the Sponsor: Coercion Indicators**

- Has anyone ever threatened you or your...
- If yes, explain

**Coercion Indicators: Have you ever experienced the following:**

- He'd against your will?

If yes, explain **1**

Your documents stolen from you? **1** --None--

Someone trying to follow you? **1** --None--

Being threatened of report ... **1** --None--

Additional Information on coercion **1**

**Human Trafficking Indicators: Debt Bondage/Labor Trafficking Indicators**

Did you perform any work or provide... **1** --None--

Who arranged the work? **1**

What type of work did you perform.... **1**

How often did you have to work? **1**

If work conditions changed over time... **1**

Is there a debt? **1** --None--

What is the amount of the debt? **1**

Has the debt amount ever increased? **1** --None--

By how much? **1**

When did it increase? **1**

Why did it increase? **1**

Have you or your family ever been... **1** --None--

If yes, who threatened you and how? **1**

What did you think would happen if you... **1**

Were you ever made to work... **1** --None--

If yes, explain **1**

Were you paid what was promised... **1**

Were expenses taken out of the pay? **1** --None--

Did you receive pay or did someone.... **1**

If yes, what expenses? **1**

How did you get to the work site? **1**

Where did you live while working? **1**

Was your freedom of movement ever... **1**

Were you ever restricted from quitting... **1**

Were you ever restricted... **1**

Did anyone arrange for you to work.... **1** --None--

If yes, explain **1**

Additional Information on debt bondage.. **1**

Human Trafficking Indicators of the Sponsor: TVPRA

Based on the sponsor assessment...

If yes, provide a short summary

Referred to OTIP?

Date referral made to OTIP?

Based on the sponsor assessment...

If yes, provide a short summary

Fraud

Have you ever been contacted and asked...

If yes, explain

Have you ever been contacted and asked...

If yes, explain

Additional Information

Use this section to report any...

Case Manager's Assessment of Sponsor and Concluding Remarks

Use this section to provide a thorough...

Certification

I confirm that I have completed all...

Printed Name

Title

Cancel Save & New Save

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to document the suitability assessment of a potential sponsor to provide for the safety and well-being of a UAC. Public reporting burden for this collection of information is estimated to average 1.0 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information (Homeland Security Act, 6 U.S.C. 279, and Trafficking Victims Protection Reauthorization Act, 8 U.S.C. 1232). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information please contact [UACPolicy@acf.hhs.gov](mailto:UACPolicy@acf.hhs.gov).

# Sponsor Assessment Page

Sponsor Assessment  
SA-0032

Edit New Note Delete ▼

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Related **Details**

Sponsor Application [Entry-00001491](#)

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▼ UAC Basic Information

First Name	Status
Last Name	AKA
Date of Birth	Gender
A#	LOS
Age	Program
Country of Birth	Admitted Date

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▼ Sponsor Basic Information

First Name	AKA
Last Name	A #
Date of Birth	Country of Birth
Age	Country of Residency
Gender	Sponsor Type

---

▼ Sponsor Cultural Information

Primary Language Spoken	Religious Affiliation
Other Language Spoken	Additional cultural information

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▼ Self Disclosed Criminal History

Additional information on criminal ....	List any child abuse and neglect history
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▼ Family Relationships

Genogram completed?.....	
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▼ Family Relationships: Family in Country of Origin

Do you have family in your home.....	
Additional information on family.....	

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▼ Family Relationships: Family and Family Friends in the U.S.

Do you have any relatives.....	
If yes, do you know where they are?	
Additional Information on family.....	

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▼ Family Relationships: Spouse/Partner

Do you have a partner?	
What is your partner's name and age?	
Do you live with your partner?	
If no, where does your partner live?	
Are you legally married...	
What is your relationship ?.....	
Have you ever been involved.....	
If yes, explain	
Additional information on the sponsors..	
Did any of your children come to the...	
Do you have any children living ?....	
Have any of your children.....	
Who is caring for your children?.....	
Additional information on the sponsors..	

Family Relationships: Children

- How do you discipline your children..... 1
- Have you or your spouse/partner..... 1
- If yes, explain 1
- Have you ever been involved in a child.. 1
- If yes, explain 1
- Do you provide court ordered financial.. 1
- If yes, explain 1
- Have you ever had a child removed..... 1
- If yes, why? (Obtain documentation) 1
- Have any of your household members.... 1
- If yes, why? (Obtain documentation) 1

Household Composition

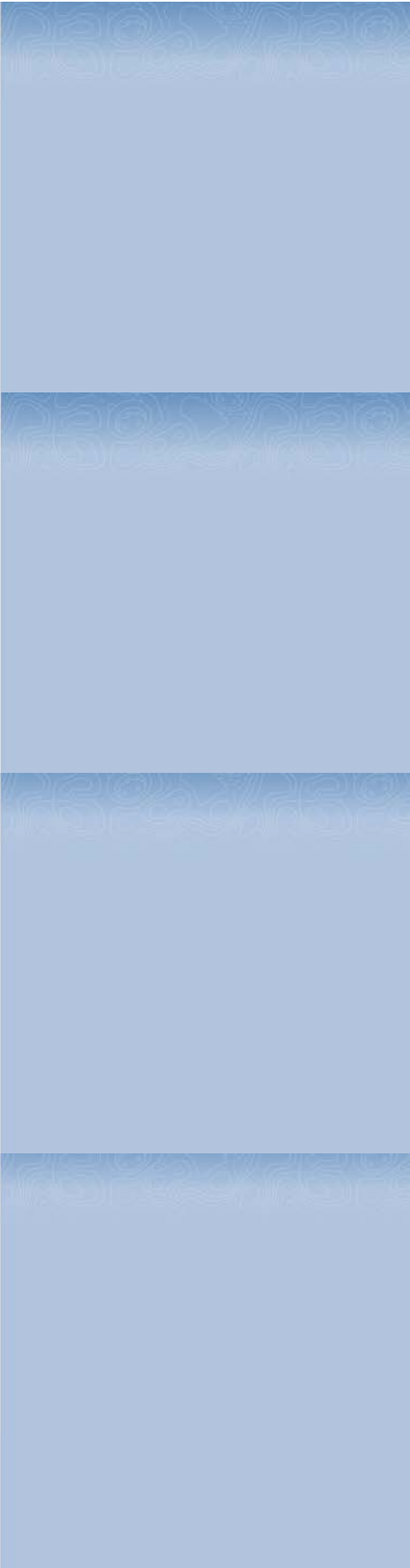
- Describe your home 1
- Describe where the minor will sleep 1
- Do you expect the UAC to contribute..... 1
- If yes, explain 1
- Does anyone in the household..... 1
- If yes, explain 1
- Do any of the occupants have criminal.. 1
- If yes, explain 1

Previous Sponsorships: Sponsor

- Have you ever attempted ..... 1
- Have you ever attempted to sponsor 1
- If yes, then why did you withdraw? 1
- Have you ever been denied sponsorship... 1
- If yes, then why did ORR deny your..... 1
- Is the child still residing with you? 1
- If no, explain 1
- What contact do you still have with... 1
- Did you undergo a home study? 1
- If yes, why? 1
- Did the child received Post Release... 1
- If yes, explain 1
- Is the child enrolled in or attending.. 1
- What is the child's current legal status 1
- Does the child have an upcoming Court... 1
- Did you attend an LOPC presentation? 1
- Describe the UAC's current safety.. 1

Previous Sponsorships: Household Members & Alternate Adult Caregiver

- Have any of your household members..... 1
- Did he/she ever attempt to sponsor... 1
- If yes, then why did he/she withdraw? 1
- Has he/she ever been denied..... 1
- If yes, then why did ORR deny his/her... 1
- Is the child still residing with him/her 1
- If no, explain 1
- What contact does he/she still have... 1
- Did he/she undergo a home study? 1
- If yes, why? 1





- Did the child received Post Release.....
- If yes, explain
- Is the child enrolled in or attending...
- What is the child's current legal status
- Does the child have an upcoming Court...
- Did you attend an LOPC presentation?
- Describe the UAC's current safety.....
- Sponsor's legal status verified with....

**Proof of Immigration Status**

Sponsor Legal Status

**Proof of Relationship**

Relationship to UAC  Sponsor Category   
 For CAT 3 sponsor, explain how ...  Relationship Verified

**Proof of Address**

Address  Home Phone   
 City  Alternate Phone Number   
 State  Email   
 Zip Code  Length of Stay at Current Address   
 Smarty Streets Verified  Google Maps Verified   
 Google Earth Verified   
 Additional proof of address information

**Proof of Financial Stability**

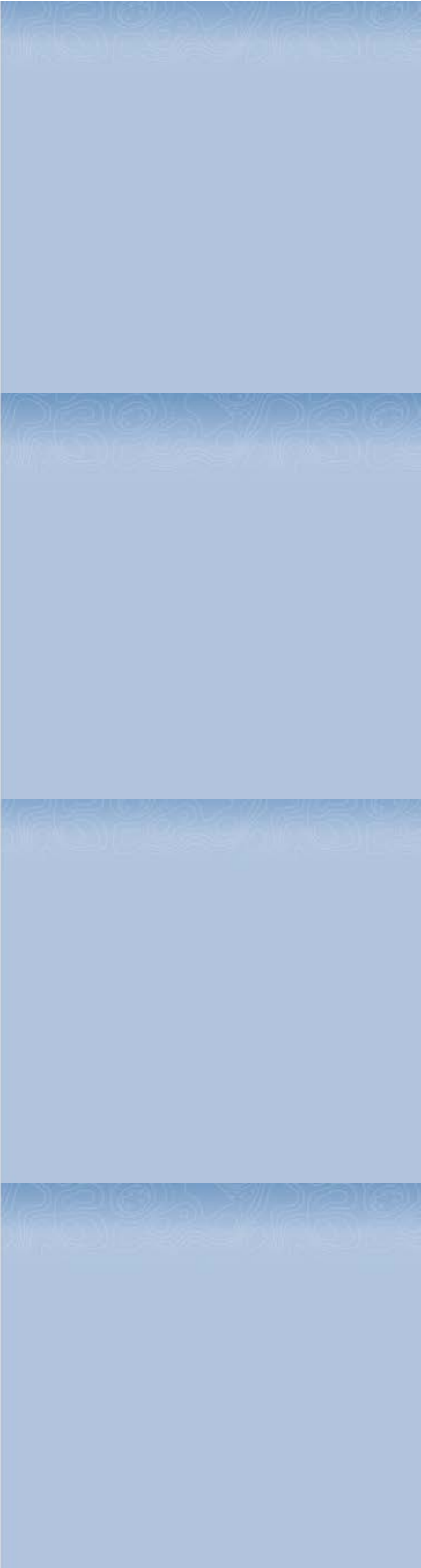
Does the sponsor have a job? .....   
 Name of Employer   
 Type of Employment   
 Location of Employment   
 Length of Time at present employer   
 Income   
 Work Hours/Schedule   
 Does the sponsor have financial needs?   
 If yes, explain

**Sponsor Care Plan**

What school will the UAC attend?   
 Does the sponsor know the school...   
 How will the UAC be transported to....   
 Are you aware of any medical....   
 What are your plans to address...   
 Are you aware of any mental health...   
 What are your plans to address the UAC's   
 Does the minor have any criminal...   
 Explain how you plan to supervise...   
 Did the sponsor watch the Sponsor Video?   
 Did the sponsor read the Sponsor...

**Sponsor's Knowledge of UAC'S Journey and Apprehension**

Describe the UAC's day to day life...   
 Do you know why the UAC decided....   
 Did the potential sponsor mention....   
 Did the potential sponsor mention...



- When did the UAC leave his/her home... 1
- How long did the trip take?
- If there is a debt still owed ... 1
- Who paid for the UAC's trip to the U.S.?
- How did the UAC get to the U.S.?
- Where was the UAC planning on living... 1
- Do you know if the UAC has ever been... 1
- If yes, when? 1

Human Trafficking Indicators of Sponsor: Sponsor's Journey to the U.S.

- When and why did you first decide... 1
- Who planned/organized your journey?
- Please explain the costs of your... 1
- Did you experience any challenges... 1
- Where did you first live in the U.S... 1
- If you have traveled back to your... 1
- Additional information on sponsor's ... 1

Human Trafficking Indicators of the Sponsor: Coercion Indicators

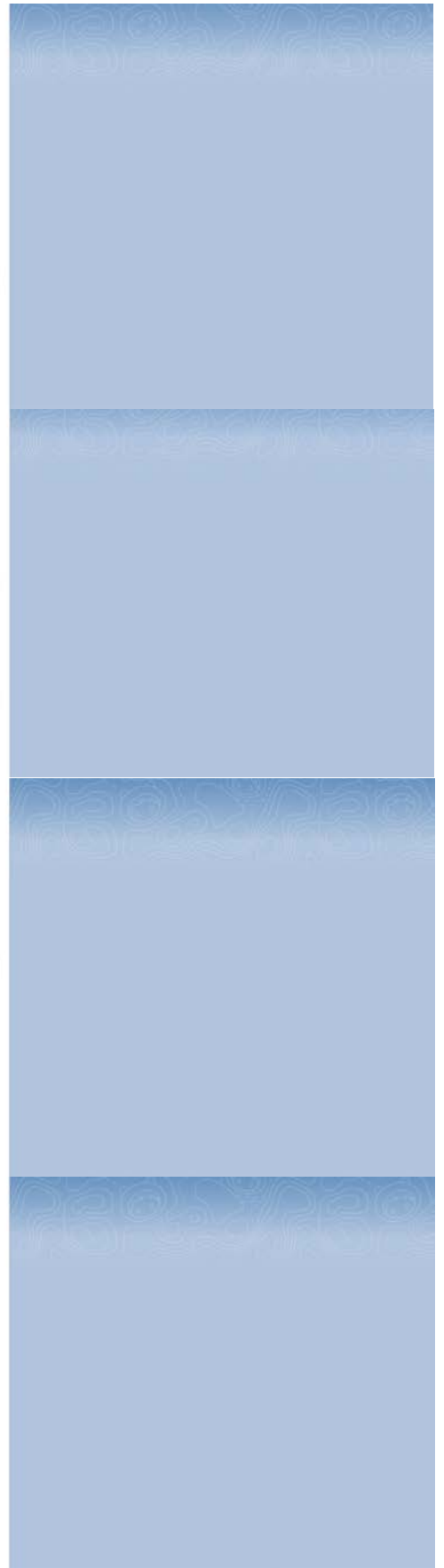
- Has anyone ever threatened you or your... 1
- If yes, explain 1

Coercion Indicators: Have you ever experienced the following:

- Held against your will?
- If yes, explain 1
- If yes, explain 1
- Your documents stolen from you?
- Someone trying to follow you?
- Being threatened of report .... 1
- Additional information on coercion 1

Human Trafficking Indicators: Debt Bondage/Labor Trafficking Indicators

- Did you perform any work or provide... 1
- Who arranged the work?
- What type of work did you perform... 1
- How often did you have to work?
- If work conditions changed over time... 1
- Is there a debt?
- What is the amount of the debt?
- Has the debt amount ever increased? 1
- By how much? 1
- When did it increase? 1
- Why did it increase? 1
- Have you or your family ever been... 1
- If yes, who threatened you and how? 1
- What did you think would happen if you... 1
- Were you ever made to work... 1
- If yes, explain 1
- Were you paid what was promised... 1
- Were expenses taken out of the pay? 1
- Did you receive pay or did someone... 1



If yes, what expenses? ⓘ

How did you get to the work site? ⓘ

Where did you live while working? ⓘ

Was your freedom of movement ever...? ⓘ

Were you ever restricted from quitting...? ⓘ

Were you ever restricted...? ⓘ

Did anyone arrange for you to work...? ⓘ

If yes, explain ⓘ

Additional information on debt bondage.. ⓘ

Human Trafficking Indicators of the Sponsor: TVPRA

Based on the sponsor assessment... ⓘ

If yes, provide a short summary ⓘ

Referred to OTIP? ⓘ

Date referral made to OTIP? ⓘ

Based on the sponsor assessment... ⓘ

If yes, provide a short summary ⓘ

Fraud

Have you ever been contacted and asked...? ⓘ

If yes, explain ⓘ

Have you ever been contacted and asked...? ⓘ

If yes, explain ⓘ

Additional Information

Use this section to report any... ⓘ

Case Manager's Assessment of Sponsor and Concluding Remarks

Use this section to provide a thorough... ⓘ

Certification

I confirm that I have completed all... ⓘ

Printed Name ⓘ

Title ⓘ

Created By ⓘ Last Modified By ⓘ



OMB 0970-0553 [valid through MM/DD/YYYY]

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UAC-S-5 [Rev. MM/DD/YYYY]



OMB 0970-0553 [valid through MM/DD/YYYY]

**Administration for Children & Families**  
**Office of Refugee Resettlement**

## Sponsor Assessment

### UAC BASIC INFORMATION

First Name:	Status:
Last Name:	AKA:
Date of Birth:	Gender:
A #:	Length of Stay:
Age:	Current Program:
Country of Birth:	Admitted Date:

### SPONSOR BASIC INFORMATION

**Use this section to document the sponsor's linguistic and cultural background, including cultural, social, and communal norms and practices for the care of children.**

First Name:	AKA:
Last Name:	A #:
Date of Birth:	Country of Birth:
Age:	Country of Residency:
Gender:	Primary Sponsor: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Relationship to UAC:

### SPONSOR CULTURAL INFORMATION

**Use this section to document the sponsor's familial and other significant relationships in country of origin and in the U.S. A genogram (family tree) may be used as a tool to answer these questions and is required for distant relative Cat 3 potential sponsors.**

Primary Language Spoken:	Religious Affiliation:
Other Languages Spoken:	
Additional cultural information:	

### FAMILY RELATIONSHIPS

**Use this section to document the sponsor's familial and other significant relationships in country of origin and in the U.S. A genogram (family tree) may be used as a tool to answer these questions and is required for distant relative Cat 3 potential sponsors.**

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# Sponsor Assessment

## Office of Refugee Resettlement

Genogram completed? (Required for distant relative Cat 3 sponsors)  Yes  No

**Family in Country of Origin**

Do you have family in your home country? (If yes, describe below)  Yes  No

Additional information on family in country of origin: ok

**Family and Family Friends in the U.S.**

Do you have family or family friend in the U.S.? (If yes, list below)  Yes  No

Name	Age	DOB	Home Address	Gender	Relationship to Sponsor

Do you have any relatives who are also in ORR care?  Yes  No

If yes, do you know where they are? ok

Additional information on family and family friends in the U.S.:

**Spouse/Partner**

Do you have a partner? (If yes, answer below questions)  Yes  No

What is your partner's name and age?

Do you live with your partner?  Yes  No

If no, where does your partner live?

Are you legally married or is the relationship a partnership or cohabitation?

What is your relationship like with your spouse?

Have you ever been involved in a Dissolution of Marriage case?  Yes  No

If yes, explain:

Additional information on the sponsor's partner:

**Children**

Do you have any children (If yes, list below)

Name	Age	DOB	Gender	Current Location	Name of Mother/Father

Did any of your children come to the U.S. with you? (If not born in U.S.)  Yes  No

Do you have any children living in your home country?  Yes  No

Have any of your children ever been in ORR care?  Yes  No

Who is caring for your children?

Additional information on the sponsor's children:

# Sponsor Assessment

## Office of Refugee Resettlement

How do you discipline your children and how do you plan to discipline the minor?

Have you or your spouse/partner ever had Child Protective Services involvement?  Yes  No

*If yes, explain:*

Have you ever been involved in a child support case?  Yes  No

*If yes, explain:*

Do you provide court ordered financial support to your children?  Yes  No

*If yes, explain:*

Have you ever had a child removed from your custody?  Yes  No

*If yes, why? (Obtain documentation)*

Have any of your household members ever had a child removed from his/her custody?  Yes  No

*If yes, why? (Obtain documentation)*

### HOUSEHOLD COMPOSITION

Use this section to document the sponsor's household composition, including the sponsor's knowledge of any household members who may have a serious, contagious disease; or criminal convictions or charges.

Does anyone else live in your home? *(If yes, list below)*

Name	Age	DOB	Gender	Phone Number	Relationship to Sponsor	Employed	Dependent on Sponsor Income	Background Checks

Describe your home:

Describe where the minor will sleep:

Do you expect the UAC to contribute to your household?  Yes  No

*If yes, explain:*

Does anyone in the household have a serious, contagious disease?  Yes  No

*If yes, explain:*

Do any of the occupants have criminal convictions or charges, other than minor traffic violations?  Yes  No

*If yes, explain:*

### PREVIOUS SPONSORSHIP

Use this section to document if the sponsor and/or the sponsor's household members have ever sponsored or attempted to sponsor another child. If the sponsor and/or the sponsor's household members did sponsor or attempt to sponsor a child, document the status of the child's safety and well-being.

Sponsor



## Sponsor Assessment Office of Refugee Resettlement

Have you ever attempted to sponsor another child that is/was in ORR care?  Yes  No  
(If yes, list below and answer the following questions)

Name	A No.	DOB	Gender	Sponsor's Relationship to UAC	Current Location	ORR Release Decision	Date of Discharge	Discharge Program Name

Have you ever attempted to sponsor a child from ORR, but decided to withdraw your application?  Yes  No  
*If yes, then why did you withdraw?*

Have you ever been denied sponsorship by ORR?  Yes  No  
*If yes, then why did ORR deny your sponsorship application?*

Is the child still residing with you?  Yes  No  
*If no, explain:*

What contact do you still have with the child?

Did you undergo a home study?  Yes  No  
*If yes, why?*

Did the child receive Post Release Services?  Yes  No  
*If yes, explain*

Is the child enrolled in or attending school?  Yes  No

What is the child's current legal status?

Does the child have an upcoming Court hearing? If so, what is the date?

Did you attend an LOPC presentation?  Yes  No

Describe the UAC's current safety and well-being since release from ORR care to the sponsor:

### Household Members & Alternate Adult Caregiver

Have any of your household members attempted to sponsor another child that is/was in ORR care?  Yes  No  
(If yes, list below and answer the following questions)

HMM / AACG Name	UAC Name	A No.	DOB	Gender	Sponsor's Relationship to UAC	Current Location	ORR Release Decision	Date of Discharge	Discharge Program Name

Did he/she ever attempted to sponsor a child from ORR, but decided to withdraw your application?  Yes  No  
*If yes, then why did he/she withdraw?*

Has he/she ever been denied sponsorship by ORR?  Yes  No  
*If yes, then why did ORR deny his/her sponsorship application?*

## Sponsor Assessment Office of Refugee Resettlement

Is the child still residing with him/her?  Yes  No

*If no, explain:*

What contact does he/she still have with the child?

Did he/she undergo a home study?  Yes  No

*If yes, why?*

Did the child receive Post Release Services?  Yes  No

*If yes, explain*

Is the child enrolled in or attending school?  Yes  No

What is the child's current legal status?

Does the child have an upcoming Court hearing? If so, what is the date?

Did he/she attend an LOPC presentation?  Yes  No

Describe the UAC's current safety and well-being since release from ORR care to the sponsor:

### PROOF OF IDENTIFY

**Use this section to document information and documents provided by the sponsor to establish the sponsor's identity and confirm that the sponsor's identity was verified. If the sponsor's identity was unable to be verified, provide an explanation under the "Additional information on identity" section below.**

#### Sponsor

List proof of identity documents provided:

Identity Document Type	Expiration Date (if applicable)	Document Verified by Government Agency	Picture ID
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

#### Household Members

List proof of identity documents provided:

Household Member Name	Identity Document Type	Expiration Date (if applicable)	Document Verified by Government Agency	Picture ID
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

#### Adult Caregivers

List proof of identity documents provided:

Adult Caregiver Name	Identity Document Type	Expiration Date (if applicable)	Document Verified by Government Agency	Picture ID
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No



# Sponsor Assessment

## Office of Refugee Resettlement

### PROOF OF IMMIGRATION STATUS OR U.S. CITIZENSHIP

**Sponsor Legal Status:**

Sponsor's legal status verified with non-expired document(s):  Yes  No

List proof of immigration status or U.S. citizenship document(s) provided:

Proof of Immigration Document Type	Expiration Date (if applicable)	Date Document Issued (if applicable)	Verified by Government Agency or Consulate
			<input type="checkbox"/> Yes <input type="checkbox"/> No

### PROOF OF RELATIONSHIP

Use this section to document information and documents provided by the sponsor to establish the sponsor's relationship to the UAC and to confirm that the relationship was verified. If the sponsor's relationship to the UAC was unable to be verified, provide an explanation under the "Explain how the sponsor is related to or knows the UAC and/or the UAC's family" section below.

Sponsor's Relationship to UAC:  Father

Sponsor Category:

Sponsor's Relationship to UAC is Verified:  Yes  No

List proof of relationship documents provided:

Relationship Document Type	Expiration Date (if applicable)	Date Document Issued (if applicable)	Verified by Government Agency or Consulate	Picture ID
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Explain how the sponsor is related to or knows the UAC and/or the UAC's family:

### PROOF OF ADDRESS

Use this section to document information and documents provided by the sponsor to establish that the sponsor lives at the address he/she reported to ORR and that the reported address is a residence. If the sponsor's address was unable to be verified, provide an explanation under the "Additional proof of address information" section below.

What is your current address and contact information? *(enter below)*

Address:

Home Phone:

City:

Alternate Phone:

State:

Email:

Zip Code:

How long have you lived at the current address?

Was address where the sponsor currently resides verified as a residence on Google Maps?  Yes  No

Was address where the sponsor currently resides verified as a residence on Google Earth?  Yes  No

Was address where the sponsor currently resides verified as a residence on Smarty Streets?  Yes  No

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List proof of address documents provided:

Address Document Type	Date Document Issued (if applicable)

Additional proof of address information:

Address History (Required for the past 5-years)

Address	City	State	Zip Code	Date Range Resided at Address

**PROOF OF STABILITY**

Discusses with the sponsor, his/her ability to support and financially provide for the minor while in their care.

Does the sponsor have a job? (If yes, answer the following questions)  Yes  No

- Name of Employer:
- Location of Employment:
- Length of Time at present employer:
- Income:
- Work Hours/Schedule:

Does the sponsor have financial needs?  Yes  No

If yes, explain:

List proof of address documents provided:

Proof of Stability Document Type	Date Document Issued (if applicable)

**SPONSOR CARE PLAN**

Use this section to document that the sponsor's plan to care for the minor adequately addresses the care, supervision, safety, education, and resources required to meet the UAC's needs.

Care Plan

What school will the minor attend?

Does the sponsor know the school enrollment process?  Yes  No

How will the UAC be transported to and from school?

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Are you aware of any medical conditions of the UAC which will need treatment?

What are your plans to address the UAC's health care needs? List the medical services in your area. (If the UAC is pregnant or with child, also address the health care plans for the UAC's child)

Are you aware of any mental health conditions of the UAC which will need treatment?

What are your plans to address the UAC's mental health care and counseling needs? List the mental health services in your area.

Does the minor have any criminal history or behavior issues that you are aware of?

Did the sponsor watch the Sponsor Video?  Yes  No

Did the sponsor read the Sponsor Handbook?  Yes  No

### Safety Plan

Explain how you plan to supervise and ensure the safety of the UAC:

### Supervision Plan

Does the sponsor have family or friends nearby that will be helping in caring for the minor? (If yes, list the individual(s))

Name	Age	DOB	Gender	Phone Number	Relationship to Sponsor	Employed	Dependent on Sponsor Income	Background Checks

### Alternate Adult Caregiver Plan

List the adult caregiver who will assume responsibility for the UAC if Sponsor becomes unavailable?

Name	Age	DOB	Gender	Phone Number	Relationship to Sponsor	Employed	Dependent on Sponsor Income	Background Checks

### SELF-DISCLOSED CRIMINAL HISTORY

Use this section to document the sponsor's self-disclosures of any criminal charges, sexual offenses or child abuse/neglect charges or arrests.

Any criminal history? (If yes, list below)

#### History of Incarceration or Detention

Crime	Date	Conviction	Location

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Additional information on criminal history:

List any child abuse and neglect history:

### UAC JOURNEY AND APPREHENSION

Use this section to document if the UAC journeyed to the U.S. to live with this sponsor and to assess if the potential sponsor had a role in coordinating or financing the journey. Also, this section will help assess how much the potential sponsor knows about the UAC's journey, which should be compared against the UAC Assessment responses.

Describe the UAC's day to day life in home country:

Do you know why the UAC decided to travel to the U.S. at this time?

Did the potential sponsor mention any U.S. immigration policy or practice as a factor in the UAC's decision to travel to the U.S.?  Yes  No

Did the potential sponsor mention economic, job, or educational opportunities as a factor in the UAC's decision to travel to the U.S.?  Yes  No

When did the UAC leave his/her home country (month, day, and year)?

How long did the trip take?

If there is a debt still owed for the UAC's journey, please explain

Who paid for the UAC's trip to the U.S.?

How did the UAC get to the U.S.?

Where was the UAC planning on living in the U.S. and with whom?

Do you know if the UAC has ever been to the U.S. before?  Yes  No  
If yes, when?

### HUMAN TRAFFICKING

Use this section to document any trafficking concerns in the sponsor's country of origin and in the U.S. and to determine if additional services or referrals are needed. It should be explained to the sponsor that this information is not for immigration purposes, but to have a better understanding of his/her journey and any challenges they may have faced during this time.

Sponsor's Journey to the U.S. (if applicable)

Use this section to document information regarding the sponsor's journey from their country of origin will be gathered here.

When and why did you first decide to travel to the U.S.?

Who planned/organized your journey?

Please explain the costs of your journey, and any outstanding debt that needs

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to be repaid:

Did you experience any challenges, trauma, or abuse by family in home country?  Yes  No

Where did you first live in the U.S. and with whom?

If you have traveled back to your country of origin since your arrival in the U.S., please explain

Additional information on sponsor's journey to the U.S.:

### Coercion Indicators

Use this section to assess for indicators of trafficking by force, fraud, or coercion in the sponsor's country of origin, during the sponsor's journey, and in the U.S. This includes any pressure, threats, deception, or harm experienced by the sponsor or the sponsor's family members.

Has anyone threaten you or your family?  Yes  No

*If yes, explain:*

Have you ever experienced the following:

Held against your will?  Yes  No

*If yes, explain*

Your documents stolen from you?  Yes  No

Someone trying to follow you?  Yes  No

Being threatened of report to police or immigration?  Yes  No

Additional information on coercion indicators:

### Debt Bondage/Labor Trafficking Indicators

Use this section to assess for indicators of debt bondage and labor trafficking in the sponsor's country of origin, during the sponsor's journey, and in the U.S. This includes any information regarding contracts, commitments, arrangements, or debt the sponsor is aware of or responsible for repaying and whether the sponsor felt unsafe or scared in their working environment.

Did you perform any work or provide any services?  Yes  No

*Who arranged the work?*

*What type of work did you perform and where?*

*How often did you have to work?*

*If work conditions changed over time, please explain?*

Is there a debt?  Yes  No

*What is the amount of the debt?*

Has the debt amount ever increased?  Yes  No

*By how much?*

*When did it increase?*

*Why did it increase?*

Have you or your family ever been threatened over payment or work for the journey?  Yes  No

*If yes, who threatened you and how?*

What did you think would happen if you left the job or stopped working?

Were you ever made to work or do anything you did not want to do?  Yes  No



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*If yes, explain:*

Did you receive pay or did someone else keep the pay?

Were you paid what was promised when you started working and were those promises kept?

Were expenses taken out of the pay?  Yes  No

*If yes, what expenses?*

How did you get to the work site?

Where did you live while working?

Was your freedom of movement ever restricted or closely monitored?

Were you ever restricted from quitting or leaving the work?

Were you ever restricted from communicating or socializing with others, not allowed to speak for yourself, told what to say, or isolated from others?

Did anyone arrange for you to work after arriving in the U.S.?  Yes  No

*If yes, explain:*

Additional information on debt bondage/labor trafficking indicators:

#### TVPPRA

**Use this section to document whether the case requires a TVPPRA-mandated home study based information gathered in this assessment and from any other relevant sources.**

Based on the sponsor assessment, does the sponsor present signs of being abused, maltreated, exploited, or trafficked?  Yes  No

*If yes, provide a short summary:*

Referred to OTIP?  Yes  No

*Date referral made to OTIP?*

Based on the sponsor assessment, does the sponsor clearly present a risk of abuse, maltreatment, exploitation, or trafficking to the UAC?  Yes  No

**If "Yes" is checked, the case must be referred for a mandatory home study.**

*If yes, provide a short summary:*

#### FRAUD

**Use this section to document if any individual or entity has attempted to defraud the sponsor in relation to the ORR reunification process.**

Have you ever been contacted and asked to pay fees/money related to the release of the minor?  Yes  No

*If yes, explain:*

Have you ever been contacted and asked to pay fees/money related to the release of a minor you previously sponsored or attempted to sponsor and not reported it to ORR?  Yes  No

*If yes, explain:*

# Sponsor Assessment

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### ADDITIONAL INFORMATION

Use this section to report any additional information that may be pertinent to the sponsor's assessment that has not been covered in the sections above or that require further elaboration.

### CASE MANGER'S ASSESSMENT OF SPONSOR AND CONCLUDING REMARKS

Use this section to provide a thorough assessment of the sponsor's ability to safely care for the UAC, provide for the UAC's individual needs, and ensure the safety and well-being of the UAC.

### CERTIFICATION

I confirm that I have completed all of the required sections and the information is accurate.

Print Name:

Created By:

Title:

Date: