DC Metro Families United Guide

A Comprehensive Resource on Legal Protections for Child Custody, Security of Financial Assets, and Immigration Rights for Individuals in the DC Area Facing Detention or Deportation

www. Familiesuniteddcmetro.org

Please feel free to distribute this guide to any individuals or organizations.

Created by **AYUDA**, **Amica Center for Immigrant Rights**, **Children's Law Center**, **Catholic Charities of the Archdiocese of Washington Immigration Legal Services**, **DC Affordable Law Firm,** and **Steptoe LLP**.

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PURPOSE OF THIS GUIDE

The purpose of this site is to help immigrant families and their allies understand their rights and to prepare for immigration emergencies that might happen. You will find resources and learn information and steps you can take to:

- Create a childcare plan so another adult has authority to take care of your children if you are unable to do so.
- Make a financial plan so another adult has authority to take care of your financial matters.
- Know your immigration rights if the government tries to arrest you related to immigration issues; if you are arrested and are detained; and if you are ordered to be deported.
- Learn about what schools can do to support students and families if there is immigration enforcement activity at school.
- Get information about what organizations might be able to help you if you want to talk to a lawyer about your family law or immigration questions.

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Part 1: Make a Plan to Care for Your Children and Financial Affairs

There are things you can do now to plan for a family emergency where you might not be available to take care of your children and your affairs. If you are arrested, detained, or deported by immigration, it is important that there is someone who can legally care for your children. DC, Maryland, and Virginia all have different rules about how to do this. Look at the DC, Maryland, or Virginia sections for specific information.

You can identify a caretaker for your children, make a financial plan for someone to handle your finances, gather documents, and prepare legal documents that reflect your wishes and plans.

Before you fill out the paperwork for your state, you will need to make decisions and gather certain information. The decisions and information to gather is the same for all states.

Identify a Caretaker for Your Children

What is a caretaker?

A caretaker is a term used in the US to describe a person who would take care of your children if something were to happen to you.

Who can be a caretaker?

Anyone over 18 who you trust to care for your child can be named a caretaker. But, if that person does not have legal immigration status, they may also be at risk for detention or deportation. If you pick someone who does not have legal immigration status, you may want to pick another back up caretaker. If you have a back up caretaker, fill out the forms to show that there is a backup caretaker.

Do I have to pick a caretaker formally?

It's a good idea to choose a caretaker and create a written plan which you will learn how to do in this guide. If you do not pick a caretaker and fill out the legal paperwork, then it will be more difficult for your chosen caretaker to show proof that you made a plan for your children to be cared for by them. If you do not make a plan, the caretaker may need to rush to court to ask a judge to name them a caretaker without any proof that you want them to be the caretaker. A judge might not let them become a caretaker. There is also a risk that child protective services will become involved because there is no one with legal rights to take care of your child.

Should I tell the caretaker that I picked them?

Yes, you should talk to the caretaker and make sure that they agree to take care of your

children. You should give them a copy of all the paperwork in the custody checklist in section here.

Identify who you want to manage your finances and accounts for you

You can create a legal document to have someone pick up your last check, manage your bank account, your cell phone, public benefits (or your child's public benefits), and handle any other financial matters you want. The document you create may be called a Financial Power of Attorney or a Durable General Power of Attorney. These are two names for the same document.

Who should I pick?
You can pick anyone over 18 who you trust to manage your financial accounts.

Do I need to pick the same person as my child's caretaker?
No. But if you do not, you need to trust them to give the caretaker money to take care of your child if you want that.

Gather and Prepare Documents

What documents do I need to pick a caretaker?
In some states, you may select a caretaker by completing a Custodial Power of Attorney or Standby Guardian. These documents for those states are in this guide. In others you should use the checklist to gather needed documents and fill out forms about your family. Please make copies of these documents to keep with the legal documents picking your caretaker.

What documents do I need to have someone help with my finances?
You can use a Durable General Power of Attorney (Financial Power of Attorney) in Maryland, DC, and Virginia. This document for each state is in this guide.

Complete and Sign Legal Documents

More information on each of these options is in Part 2: Legal Protections for Family and Finances in DC, Maryland, and Virginia

DC:

- Custodial Power of Attorney
- Financial Power of Attorney (Durable Power of Attorney)

Maryland:

- Standby Guardianship
- Financial Power of Attorney (Durable General Power of Attorney)

Virginia:

- Financial Power of Attorney (Durable General Power of Attorney)
- complete court paperwork to be ready for caretaker to file if needed

Know your immigration rights!

Look at the part of the guide that tells you about what your rights are:

If you encounter ICE
If ICE comes to your door without a warrant
If ICE comes with a warrant
If you are detained
If you are deported

Part 2:

Legal Protections for Families & Finances in

DC, Maryland, and Virginia

What Documents and Information Should I Gather?

There are many important documents and information to organize now so you are prepared. These checklists can help you collect the papers and information you might need to share with caregivers about your kids and your money. It's important to have these papers along with any legal papers that let people make decisions and take actions for you.

The first section is forms that anyone from any state can use to gather information and documents for a caretaker for their children.

The next sections are for DC, Maryland, or Virginia to learn about the specific legal documents needed in each state for (1) a caretaker or (2) to choose someone to take care of your finances.

Fillable Forms to Leave with Family Planning Documents Important Information About Each of Your Children

You should have several sets of copies of each of these documents for each of your children. Make separate sets of copies even if the information is the same for each child.

The documents you should gather for each of your children include:

- Birth certificate
- Social Security card
- Two originals, with notary seal, of the Custodial Power of Attorney or Standby Guardianship, and also two originals in your first language if you have trouble reading English well
- Two originals, with notary seal, of the Durable General Power of Attorney or Financial Power of Attorney, and also two originals in your first language if you have trouble reading English well
- Passport (if your children do not have a passport, you should get each child a passport as soon as possible)
- Medical information sheet
- School, activity, and church information sheet
- Helpful things to know about each child
- Names, phone numbers, and email addresses of family, friends, and neighbors who your designated caretaker or others may wish to communicate with
- Emergency Contact Sheets
- You should put your A number on these forms so they can find you in case you are detained or deported

Make three photocopies of each child's documents and then put the original documents in a safe place.

- Give the designated caretaker one photocopy of all the documents for each child. Also give the designated caretaker one of the original Custodial Power of Attorney or Standby Guardianship (including, if you have one, an original in your first language) with notary seal.
- Put the second photocopy of all the documents for each child in a safe place where your designated caretaker, a trusted relative or friend, and an older child knows to find them.
- Put the third photocopy of each child's individual documents in a plastic bag in that child's backpack.
- Also make an electronic copy for yourself and your designated caretaker.

MEDICAL INFORMATION SHEET FOR

_____

name of child

use back of page for additional space for answers

Name of Doctor or Medical Practice_____

Address & Telephone Number_____

Health Insurance Information_____

Date of Last Physical Exam_____

Name of Medications taken by Child_____

Reason for the Medication_____

Dose & Frequency_____

Allergies to Food or Medication, Seasonal Allergies_____

Frequent Illness or Medical Conditions of Child, such as ear infections, allergies, etc. and treatment_____

Name of Dentist or Dental Practice_____

Address and Phone Number_____

Date of Last Dental Exam_____

Ongoing Dental Treatment_____

Name of Eye Doctor or Practice, if any_____

Wears glasses or contact lenses? Yes/ No_____

SCHOOL ACTIVITY AND CHURCH INFORMATION SHEET FOR

_____
name of child

[Make sure that designated caretaker and emergency contact are on the list of people authorized to pick up your children from school or other activities.]

use back of page for additional space for answers

School

Name, Address, and Phone Number of School_____

Grade and Name of Teacher (younger children) or Guidance Counselor (older children)_____

Special Educational or Language Services, if any_____

If your child has an Individualized Educational Plan (IEP), attach a copy to this form.

Medications Child Receives at School, if any _____

_____

Frequency of Medication _____

_____

Activities

Weekday Activities: Activity (e.g., music, sports, dance, etc.), Time, Address, Phone Number

Monday _____

Tuesday_____

Wednesday_____

Thursday_____

Friday _____

Weekend Activities: Activity (e.g., music, sports, dance, church group, etc.), Time, Address, Phone Number

Saturday_____

Sunday_____

Church

Name, Address, and Phone Number of Church attended, if any

Religious School and Religious Activities, Days, Times, Addresses

HELPFUL THINGS TO KNOW ABOUT child's name

use back of page for additional space for answers

Favorite Foods _____

Disliked Foods and Any Food Allergies _____

Bedtime and Bedtime Routines _____

Favorite Toys, Books, Games, and Activities _____

_____

TV Shows, Movies, and Computer Games, and How Much Time Allowed _____

_____

Names of Close Friends, their Parents, and Contact Information _____

_____

Curfew (for Older Children) _____

Driving Restrictions (for Older Children with License) _____

Other Restrictions (for Older Children, such as, where allowed to go, who they can go out with, whose car they can be a passenger in, sleepovers, etc.) _____

_____

You can find my child's original passport _____

_____

My A# is: _____

NAMES, PHONE NUMBERS, AND EMAIL ADDRESSES OF FAMILY, FRIENDS, and NEIGHBORS FOR

_____

name of child

use back of page for additional space for answers

Adult Sisters and Brothers

_____

_____

_____

Grandparents

_____

_____

_____

Godparents

_____

_____

_____

Aunts and Uncles

_____

_____

_____

Cousins

_____

_____

_____

Family Friends

_____

_____

_____

Neighbors

_____

_____

_____

Emergency Contact Sheet For Designated Caretaker

Dear_____,

Please keep this sheet with you at all times.

If you learn that I have been taken into custody, please get my children right away. If they are not at home or school, they may be _____ _____.

If my children cannot be located, contact the **DC Child and Family Services Agency's 24 hour, toll-free Hotline, 202-671-SAFE (202-671-7233)**. Tell them the names of my children, their birth dates, and your name and phone number or the name and phone number of other persons who may be able to care for my children.

Full Name, Date of Birth, and the Name, Phone Number, and Address of School or Daycare

_____
_____
_____

Full Name, Date of Birth, and the Name, Phone Number, and Address of School or Daycare

_____
_____
_____

Full Name, Date of Birth, and the Name, Phone Number, and Address of School or Daycare

_____
_____
_____

Names. Relationship (Family or Friend), and Phone Numbers of Others to Contact

_____

_____

_____

Emergency Contact Sheet for People Other Than Designated Caretaker

If you learn that I have been taken into custody, immediately call my designated caretaker _____ (name and phone number) to let them know I have been taken into custody.

If you cannot reach my designated caretaker, please get my children right away. If they are not at home or school, they may be _____

_____

Also, please contact _____

_____

(names and phone numbers) who also might be able to help with my children.

If my children cannot be located, contact the **DC Child and Family Services Agency's 24 hour, toll-free Hotline, 202-671-SAFE (202-671-7233).** Tell them the names of my children, their birth dates, and the name and phone number of the designated caretaker or other persons who may be able to care for my children. Tell them that the designated caretaker has a signed DC Custodial Power of Attorney and has legal rights to take care of my children.

Full Name, Date of Birth, and the Name, Address, and Phone Number of School or Daycare

_____

_____

_____

Full Name, Date of Birth, and the Name, Address, and Phone Number of School or Daycare

_____

_____

_____

Full Name, Date of Birth, and the Name, Address, and Phone Number of School or Daycare

_____

_____

_____

Names, Relationships (Family or Friend) and Phone Numbers of Others to Contact

_____

_____

_____

Financial Information Plan

1. I work at**:** _____. My manager is:_____. The phone number there is: _____. The address is: _____ _____. If I am detained or deported, please contact them to get my last paycheck if this section is filled out.

If you want the Agent under your Financial Power of Attorney (FPOA) to pick up your last paycheck, you should put that specifically in the FPOA.

2. I have bank accounts at the following banks. With the FPOA, you will be able to access them to send me money and to use the money to care for my children.

   Bank:
   Type of Account: Checking/Savings
   Account Number:

   Bank:
   Type of Account: Checking/Savings
   Account Number:

   Bank:
   Type of Account: Checking/Savings
   Account Number:

3. I have the following other accounts that I would like you to access to manage for me. I have specified this in the FPOA:

   Cell phone ProviderAccount number:
   Login:
   Password:

   Internet Provider:
   Account number:
   Login:
   Password:

   Credit Card Provider/type of card:
   Account number:
   Login:
   Password:

Family Preparedness Checklist

Preparing Your Family for Immigration Enforcement

Safety Plan for your Children

☐Emergency Contact Sheet

- for preferred caretaker
- for other trusted people
- for your child's daycare or school

☐ Medical Information
☐ School, Church, Activities Information
☐ Helpful Things to Know
☐ Information about Preferred Caregiver
☐ Family and Neighbors Contact Information
☐ Family Safety Documents You Signed or Gathered

Make copies of these documents. Keep one copy with the legal documents you create in a fireproof envelope and give one copy to your preferred caretaker. List your A number on the sheet for your designated caretaker so they can find you if you are detained or deported.

Important Information About Each of Your Children
Make three photocopies of each child's documents and then put the original documents in a safe place.

- Give the designated caretaker one photocopy of all the documents for each child. Also give the designated caretaker one of the original Custodial Power of Attorney or Standby Guardianship (including, if you have one, an original in your first language) with notary seal.
- Put the second photocopy of all the documents for each child in a safe place where your designated caretaker, a trusted relative or friend, and an older child, knows to find them, as a spare set.
- Put the third photocopy of each child's individual documents in a plastic bag in that child's backpack.
- **Also make an electronic copy for yourself and your designated caretaker. This can be a picture you take on your phone of each document. You could also use a program like genius scan (which is free to download to your phone).**

Financial Information

☐ Job information
☐ Account information

☐ Other important financial information

Gather documents showing the length of time you have been in the US; the most recent two years are the most important. This can include:

☐ US and state income tax returns
☐ Utility Bills
☐ Leases
☐ Mortgages
☐ School Records
☐ Medical Records
☐ Bank Records
☐ Credit Card Statements

Make copies of these documents. Keep one copy with the legal documents you create in a fireproof envelope. Make sure your emergency contact can access all of these documents.

F A M I L Y S A F E T Y P L A N F O R:

(name of child/nombre del niño/a)

INFORMACIÓN DE CONTACTO DE FAMILIARES Y VECINOS FAMILY AND NEIGHBORS CONTACT INFORMATION

Para cada persona que apunta, asegúrese de incluir su nombre, número de teléfono y dirección de email. For each person you list make sure to include the person's name, phone number, and email address.

Hermanos Adultos (Adult Sisters and Brothers):

Abuelos/as (Grandparents):

Padrino/Madrina (Godparents):

Tios/as (Aunts and Uncles):

Primos/as (Cousins):

Amigos/as de la Familia (Family Friends):

Vecinos/as (Neighbors):

FAMILY SAFETY PLAN FOR:

(name of child/nombre del niño/a)

PLAN PARA LA SEGURIDAD FAMILIAR

FAMILY SAFETY PLAN

Use este formulario para apuntar información importante sobre su hijo/a. Si tiene más de un hijo, tiene que usar un nuevo formulario para cada hijo. Esto significa que va a tener que apuntar información más de una vez.

Use this form to write down important information about your child. If you have more than one child, you need to use a new form for each child. This means you may need to write down information more than one time.

Un plan completo incluye las siguientes secciones: (A full family safety plan includes the following sections)

(1) Hoja de Contacto de Emergencia para Personas Aparte del Cuidador Preferido
Emergency Contact Sheet for People Other than Preferred Caregiver

(2) Información médica
Medical information

(3) Información de la escuela, iglesia, y otras actividades School, Church, and Activities Information

(4) Información útil que debe saber
Helpful Things to Know

(5) Información sobre el cuidador preferido
Information About Preferred Caregiver

(6) Información de contacto de amigos/vecinos
Family and Neighbors Contact Information

(7) Documentos de Seguridad Familiar Que Usted Firmó o Reunió
Family Safety Documents You Signed or Gathered.

(8) Hoja de Contacto de Emergencia para el/la Cuidador/a Preferido/a
Emergency Contact Sheet for Preferred Caregiver

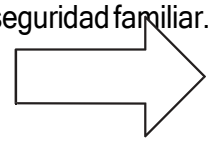
Después de que escriba sus respuestas, ponga una copia de las secciones 1 a 6 en la mochila de su hijo.

After you write down your answers, put a copy of sections 1-6 in your child's backpack.

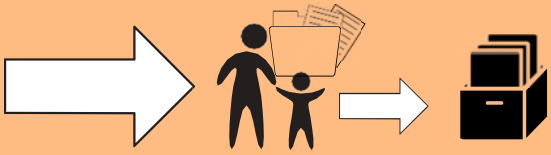
Entregue una copia de la sección 8 a su cuidador preferido y dígales donde encontrar su carpeta de seguridad familiar.

Give a copy of section 8 to your preferred caregiver, and let them know where to find your family safety folder.

Ponga las secciones 1 a 8 en su carpeta de plástico de seguridad familiar. Put sections 1-8 in your plastic family safety folder.



Pro Bono Resource Center of Maryland thanks Ayuda and Steptoe & Johnson for drafting the initial worksheets for this packet.



FAMILY SAFETY PLAN FOR: _____

(name of child/nombre del niño/a)

HOJA DE CONTACTO DE EMERGENCIA PARA PERSONAS APARTE DEL CUIDADOR PREFERIDO
EMERGENCY CONTACT SHEET FOR PEOPLE OTHER THAN PREFERRED CAREGIVER

NIÑOS/AS DEBEN DE GUARDAR ESTE FORMULARIO EN SUS MOCHILAS. CHILD, PLEASE KEEP THIS FORM IN YOUR BACKPACK.

(PARA PADRES COMPLETANDO ESTE FORMULARIO: Si tiene menos hijos que los espacios abajo, tache los espacios vacíos. Si tiene más hijos que los espacios abajo, escriba su información en el otro lado de esta página). (TO PARENTS FILLING OUT THIS FORM: If you have fewer children than listed below, please cross off the blank spaces. If you have more children than listed below, write their information on the other side of this page).

Querido (Dear): _____

Si usted se entera de que yo he estado detenido, llame de inmediato a mi cuidador preferido:
If you learn that I have been taken into custody, immediately call my preferred caregiver:

_____ _____

(nombre de cuidador preferido - name of preferred caregiver) #de teléfono de cuidador preferido - # of preferred caregiver)

para avisarle de que yo he estado detenido. Si no puede contactar a mi cuidador preferido, por favor vaya a recoger a mis hijos de inmediato. Si no están en casa o en la escuela, tal vez están:/to let them know that I have been taken into custody. If you cannot reach my preferred caregiver, please get my children right away. If they are not at home or school, they may be:

_____

Favor de contactar también a (please also contact): _____ (nombres y números de teléfono), quien también tal vez podría ayudar con mis hijos/(names and phone numbers) who also might be available to help with my children.

Si no puede encontrar a mis hijos, contacte al Número directo, gratuito y 24 horas al día del Servicio de Protección de Niños del Departamento de Servicios Humanos de Maryland, 800-332-6347. Dígales los nombres de mis hijos, sus fechas de nacimiento y el nombre y número de teléfono de usted, o el nombre y número de teléfono de otras personas que tal vez pueden cuidar de mis hijos. If my children cannot be located, contact the Maryland Department of Human Services Child Protective Services' 24 hour, toll-free Hotline, 800-332-6347. Tell them the names of my children, their birth dates, and your name and phone number or the name and phone number of other persons who may be able to care for my children.

Lo que sigue contiene los nombres completos de mis hijos, sus fechas de nacimiento y el nombre, número de teléfono y dirección de o su escuela o su proveedor de guardería. Más información se encuentra en el resto de este paquete. /The following contains the full name of my children, their dates of birth, and the name, phone number, and address of either their school or daycare provider. More information can be found earlier on in this packet.

Nombre Legal Complete de Hijo #1 /Full Legal Name of Child #1: Fecha de Nacimiento: DOB:

Nombre de su escuela o proveedor de guardería/Name of their school or daycare provider:

Dirección /Street Address:

Ciudad/City: Estado/State: Código Postal/Zip: #de Teléfono/Phone:

Nombre Legal Complete de Hijo #1 /Full Legal Name of Child #2: Fecha de Nacimiento: DOB:

Nombre de su escuela o proveedor de guardería/Name of their school or daycare provider: Dirección/Street Address:

Ciudad/City: Estado/State: Código Postal/Zip: #de Teléfono/Phone:

Nombre Legal Complete de Hijo #1 /Full Legal Name of Child #3: Fecha de Nacimiento: DOB:

Nombre de su escuela o proveedor de guardería/Name of their school or daycare provider:

Dirección /Street Address:

Ciudad/City: Estado/State: Código Postal/Zip: #de Teléfono/Phone:

Un plan completo incluye las siguientes secciones/A full family safety plan includes the following sections:

(1) Hoja de Contacto de Emergencia para Personas Aparte del Cuidador Preferido/ Emergency Contact Sheet for People Other than Preferred Caregiver

(3) Información de la escuela, iglesia, y otras actividades
School, Church, and activities Information

(5) Información sobre el cuidador preferido
Information About Preferred Caregiver

(2) Información médica
Medical information

(4) Información útil que debe saber
Helpful Things to Know

(6) Información de contacto de amigos/vecinos
Family and Neighbors Contact Information

FAMILY SAFETY PLAN FOR: _____

(name of child/nombre del niño/a)

INFORMACIÓN MÉDICA - MEDICAL INFORMATION

Información de Seguro de Salud: Health Insurance Information:

Nombre del Doctor Primario o Centro Médico: Name of Primary Doctor or Medical Practice:

Dirección y Número de Teléfono: Address & Telephone Number:

Fecha del Último Examen Físico: Date of Last Physical Exam:

Nombre(s) de Medicamentos que toma el Niño: Name of Medications taken by Child:

Razón por el Medicamento: Reason for the Medication:

Dosis y Frecuencia: Dose & Frequency:

Alergias a Comida o Medicamentos, Alergias

Estacionales:
Allergies to Food or Medication,
Seasonal Allergies:

Enfermedades Comunes o Condiciones Médicas del Niño (infecciones del oído, alergias, etc.) y tratamiento:
(Frequent Illness or Medical Conditions of Child, such as ear infections, allergies, etc. and treatment):

Nombre del Dentista o Centro Dental
Name of Dentist or Dental Practice:

Dirección y Número de Teléfono: Address and Phone Number:

Fecha del Último Examen Dental:
Date of Last Dental Exam:

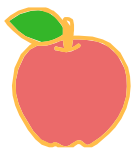
Tratamiento Dental En Curso: Ongoing Dental Treatment:

Nombre del Doctor de Ojo, o Centro Médico, si aplicable:
Name of Eye Doctor or Practice, if any:

¿Usa lentes? Sí/No: Wears glasses? Yes/No:

FAMILY SAFETY PLAN FOR:

(name of child/nombre del niño/a)



INFORMACIÓN DE LA ESCUELA - SCHOOL INFORMATION

Asegúrese de que el cuidador designado y contactos de emergencia estén en la lista de personas autorizadas para recoger a sus hijos de la escuela y otras actividades.

Make sure that designated caretaker and emergency contact are on the list of people authorized to pick up your children from school or other activities.

Nombre de la Escuela: School Name:

Dirección/Street Address:

Ciudad/City: Estado/State: Código Postal/Zip: Número de Teléfono/Phone:

Grado del Niño: Child's Grade:

Nombre del Maestro o Consejero: Name of Teacher or Guidance Counselor:

(Para niños en la primaria, escriba el nombre de su maestro. Para niños en la media y la secundaria, escriba el nombre de su consejero.)

(Children in elementary school should write the name of their teacher. Children in middle or secondary school should write their guidance counselor.)

Servicios de Educación Especial o Lenguaje, si aplicable: Special Educational or Language Services, if any:

Si su hijo tiene un Plan Individualizado de Educación, adjunte una copia a este formulario. If your child has an Individualized Educational Plan (IEP), attach a copy to this form.

Medicamentos que su Hijo Recibe en la Escuela, si aplicable: Medications Child Receives at School, if any:

Frecuencia del Medicamento: Frequency of Medication:

INFORMACIÓN DE ACTIVIDADES - ACTIVITY INFORMATION

Actividades durante la Semana/Fin de Semana:
Escriba la actividad (p. ej. música, deporte, baile, iglesia, etc.), la hora, la dirección y el número de teléfono.

Week/weekend activities:
Write the activity (e.g., music, sports, dance, church group, etc.), time, address, and phone number.

Lunes (Monday):	*Martes (Tuesday)*	*Miércoles (Wednesday):*	*Jueves (Thursday):*	*Viernes (Friday):*	*Sábado (Saturday):*	*Dom (Sun*

FAMILY SAFETY PLAN FOR: _____

(name of child/nombre del niño/a)

INFORMACIÓN DE LA IGLESIA - CHURCH INFORMATION

Si su hijo no va a una iglesia o centro de educación religiosa, tache esta sección y sigue a la próxima sección. If your child does not go to church or religious education, cross this section out, and move onto the next section

Nombre de la Iglesia:
Church Name:

Dirección /Street Address:

Ciudad/City: Estado/State: Código Postal/Zip # de Teléfono/Phone:

Escuela Religiosa y Actividades Religiosas/Religious School and Religious Activities: Día/Day: Hora/Time:

Dirección/Address:

Comidas Favoritas/Favorite Foods:

Comidas No-Gustadas y Alergias a Comidas/Disliked Foods and Any Food Allergies:

Hora de Dormir y Rutina de Acostarse/Bedtime and Bedtime Routines:

Juguetes, Libros, Juegos y Actividades Favoritos/Favorite Toys, Books, Games, and Activities:

Programas, Películas y Juegos de Computadora, y ¿por Cuánto Tiempo? TV Shows, Movies, and Computer Games, and How Much Time Allowed:

Nombres de Amigos Cercanos y sus Padres/Names of Close Friends and their Parents:

Teléfono #1: Teléfono #2:

Se puede encontrar el pasaporte original de mi hijo en/You can find my child's original passport:

OTRA INFORMACIÓN ÚTIL - HELPFUL THINGS TO KNOW

Otra información para hijos adolescentes/Additional Information to Know about Older Children:

Horario Límite/Curfew:

Restricciones de Manejar/Driving Restrictions:

Otras restricciones: (p. ej. dónde está permitido ir, con quién puede salir, con quién puede ir en coche, dónde puede pasar la noche, etc.) Other Restrictions (such as, where allowed to go, who they can go out with, whose car they can be a passenger in, sleepovers, etc.):

FAMILY SAFETY PLAN FOR: _____

(name of child/nombre del niño/a)

INFORMACIÓN DE CONTACTO DE FAMILIARES Y VECINOS
FAMILY AND NEIGHBORS CONTACT INFORMATION

Para cada persona que apunta, asegúrese de incluir su nombre, número de teléfono y dirección de email. For each person you list make sure to include the person's name, phone number, and email address.

Hermanos Adultos (Adult Sisters and Brothers):

Abuelos/as (Grandparents):

Padrino/Madrina (Godparents):

Tíos/as (Aunts and Uncles):

Primos/as (Cousins):

Vecinos/as (Neighbors):

Amigos/as de la familia (Family Friends):

FAMILY SAFETY PLAN FOR: _____

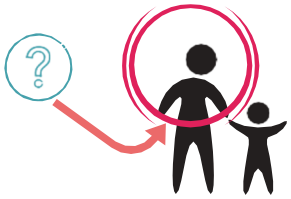
(name of child/nombre del niño/a)

INFORMACIÓN SOBRE EL/LA CUIDADOR/A PREFERIDO Y SUS PLANESINFORMATION ABOUT PREFERRED CAREGIVER AND YOUR PLANS

¿Qué es el nombre legal completo de la persona que usted quiere que cuide a sus hijos? What is the full legal name of the person you would like to take care of your children?

¿Qué es su información de contacto? What is their contact information?

¿QUÉ RELACIÓN TIENE ESTA PERSONA CON USTED? /WHAT IS THIS PERSON'S RELATIONSHIP TO YOU?



MADRE (MOTHER) | PADRE (FATHER) | ABUELO/A (GRANDPARENT) | PADRASTRO/MADRASTRA (STEP-PARENT) PAREJA DE LARGO PLAZO (LONG-TERM PARTNER) | HERMANO/A (SIBLING) | PRIMO/A (COUSIN) | TIO/A (AUNT/UNCLE) SOBRINO/A (NIECE/NEPHEW) | AMIGO ÍNTIMO DE LA FAMILIA (CLOSE FAMILY FRIEND) | OTRO (OTHER):

¿QUÉ RELACIÓN TIENE ESTE CUIDADOR PROPUESTO CON SUS HIJOS? WHAT IS THE PROPOSED CAREGIVER'S RELATIONSHIP TO YOUR CHILDREN?

MADRE (MOTHER) | PADRE (FATHER) | ABUELO/A (GRANDPARENT) | PADRASTRO/MADRASTRA (STEP-PARENT) PAREJA DE LARGO PLAZO (LONG-TERM PARTNER) | HERMANO/A (SIBLING) | PRIMO/A (COUSIN) | TIO/A (AUNT/UNCLE) SOBRINO/A (NIECE/NEPHEW) | AMIGO ÍNTIMO DE LA FAMILIA (CLOSE FAMILY FRIEND) | OTRO (OTHER):

¿Por cuánto tiempo ha conocido usted al cuidador propuesto? How long have you known the proposed caregiver?

☐ Menos de 1 año Less than 1 year ☐ 2 años 2 years ☐ 3-5 años 3-5 years ☐ 5-10 años 5-10 years ☐ más de 10 años more than 10 years

¿Algo más que le gustaría apuntar?:
Anything else you want to write:

FAMILY SAFETY PLAN FOR:

(name of child/nombre del niño/a)

HOJA DE CONTACTO DE EMERGENCIA PARA EL/LA CUIDADOR/A PREFERIDO/A EMERGENCY CONTACT SHEET FOR PREFERRED CAREGIVER

ESTÁ RECIBIENDO ESTA CARTA PORQUE ALGUIEN QUIERE QUE USTED CUIDE A SUS HIJOS SI NO PUEDEN HACERLO DEBIDO A UNA EMERGENCIA RELACIONADA CON LA INMIGRACIÓN.

YOU ARE RECEIVING THIS LETTER BECAUSE SOMEONE WANTS YOU TO TAKE CARE OF THEIR CHILDREN IF THEY BECOME UNABLE TO DUE TO AN IMMIGRATION RELATED EMERGENCY

Haga un plan para ser notificado sobre la emergencia. Make a plan to be notified about the emergency.

Discuta lo que ellos quieren que usted haga. Discuss what they want you to do.

Aprenda sobre los papeles en su carpeta de seguridad familiar. Learn about the papers in their family safety folder.

Por favor, guarde esta hoja con usted en todo momento (Please keep this sheet with you at all times.)

(PARA PADRES COMPLETANDO ESTE FORMULARIO: Si tiene menos hijos que los espacios abajo, tache los espacios vacíos. Si tiene más hijos que los espacios abajo, escriba su información en el otro lado de esta página).

(TO PARENTS FILLING OUT THIS FORM: If you have fewer children than listed below, please cross off the blank spaces. If you have more children than listed below, write their information on the other side of this page).

Querido (Dear) _____,
Si usted se entera de que yo he estado detenido, por favor, vaya a recoger a mis hijos de inmediato. Si no están en casa o en la escuela, tal vez están:
If you learn that I have been taken into custody, please get my children right away. If they are not at home or school, they may be

_____
Nombres y Números de Teléfono de Otras Personas que Se Pueden Contactar/Names and Phone Numbers of Others to Contact:

_____ Si no puede encontrar a mis hijos, contacte al Número directo, gratuito y 24 horas al día del Servicio de Protección de Niños del Departamento de Servicios Humanos de Maryland, 800-332-6347. Dígales los nombres de mis hijos, sus fechas de nacimiento y el nombre y número de teléfono de usted, o el nombre y número de teléfono de otras personas que tal vez pueden cuidar de mis hijos.

If my children cannot be located, contact the Maryland Department of Human Services Child Protective Services' 24 hour, toll-free Hotline, 800-332-6347. Tell them the names of my children, their birth dates, and your name and phone number or the name and phone number of other persons who may be able to care for my children..

Lo que sigue contiene los nombres completos de mis hijos, sus fechas de nacimiento y el nombre, número de teléfono y dirección de o su escuela o su proveedor de guardería. Más información se encuentra en el resto de este paquete.

The following contains the full name of my children, their dates of birth, and the name, phone number, and address of either their school or daycare provider. More information can be found earlier on in this packet.

Nombre Legal Complete de Hijo #1 /Full Legal Name of Child #1: Fecha de Nacimiento: DOB:

Nombre de su escuela o proveedor de guardería/Name of their school or daycare provider:

Dirección /Street Address:

Ciudad/City: Estado/State: Código Postal/Zip: # de Teléfono/Phone:

Nombre Legal Complete de Hijo #1 /Full Legal Name of Child #2: Fecha de Nacimiento: DOB:

Nombre de su escuela o proveedor de guardería/Name of their school or daycare provider: Dirección /Street Address:

Ciudad/City: Estado/State: Código Postal/Zip: # de Teléfono/Phone:

Nombre Legal Complete de Hijo #1 /Full Legal Name of Child #3: Fecha de Nacimiento: DOB:

Nombre de su escuela o proveedor de guardería/Name of their school or daycare provider:

Dirección /Street Address:

Ciudad/City: Estado/State: Código Postal/Zip: # de Teléfono/Phone:

Financial Information Plan

1. I work at: _____. My manager is:_____. The phone number there is: _____. The address is: _____ _____. If I am detained or deported, please contact them to get my last paycheck if this section is filled out.

If you want your Agent under your Durable General Power of Attorney or Financial Power of Attorney (FPOA) to pick up your last paycheck, you may want to put that specifically in the FPOA.

2. I have bank accounts at the following banks. With the FPOA, you will be able to access them to send me money and to use the money to care for my children.

   Bank:
   Type of Account: Checking/Savings
   Account Number:

   Bank:
   Type of Account: Checking/Savings
   Account Number:

   Bank:
   Type of Account: Checking/Savings
   Account Number:

3. I have the following other accounts that I would like you to access to manage for me. I have specified this in the FPOA:

   Cell phone Provider:
   Account number:
   Login:
   Password:

   Internet Provider:
   Account number:
   Login:
   Password:

   Credit Card Provider/type of card:
   Account number:
   Login:
   Password:

Washington, DC

Family Law and Financial Resources

Washington, DC Family Law

If you want to choose a caretaker in Washington, DC, you can do so without going to court by completing a document called a Custodial Power of Attorney.

DC CUSTODIAL POWER OF ATTORNEY

What is a Custodial Power of Attorney?

A Custodial Power of Attorney (CPOA) temporarily gives someone else the authority to make decisions for your child(ren), such as enrolling them in school or obtaining medical care. It is an agreement between you and the person you are giving the power to, and you do not need to go to court to create it.

Who Signs a Custodial Power of Attorney?

At least one parent should sign the CPOA, but it's best if both parents sign it. The caretaker does not need to sign.

When does a Custodial Power of Attorney start?

A CPOA can begin once both parents sign the document or upon a specified event, such as being detained by immigration authorities.

What rights can you give by creating a Custodial Power of Attorney?

You determine the custodial powers given to the caretaker. The CPOA can grant general authority over all parenting decisions or specify particular actions the caretaker is permitted to take. Granting rights to a caretaker under the CPOA does not affect your rights as the parent of the child in any custody proceeding. It does not affect your rights or responsibilities as a parent to care for your child.

Can someone who is not a parent get a passport for my child?

Yes, someone who is not a parent can get a passport for your child, but it can be challenging. If

both parents have legal rights to the child, both must sign the CPOA to authorize a caretaker to get a passport or travel internationally with the child. To have the caretaker obtain your child's passport, complete this form and provide copies of the front and back of both parents' valid IDs. More information is available here.

Can someone who is not a parent travel internationally with my child?

Yes. If both parents have legal rights to the child, both must sign the CPOA to authorize a caretaker to travel internationally with the child. Additionally, provide written permission from both parents and a copy of their IDs if another adult will travel with your child. More information is available here.

Does the Custodial Power of Attorney have to be notarized?

In DC, the law does not say the CPOA must be notarized, but it's a smart idea. Notarizing it helps prove you gave your caretaker the power to make decisions for your child, especially if you can't be there to confirm it.

How do I get my Custodial Power of Attorney notarized?

You get your CPOA notarized by signing your CPOA in the presence of a notary public who then signs the document. A notary public is an individual with a special license to notarize someone's signature on a document. The notary public must check that you are who you say you are when you sign the CPOA. To get your document notarized, you need to show the notary a current (not expired) ID from any government office. This can be a passport, driver's license, or a non-driver identification card. If you use a different government ID, it must have your signature or photo. If you do not have an ID, the notary public may be able to use another identity verification process. You may contact the notary to ask them how they want to do this. You can search here for a notary licensed in DC or you can go to your bank to ask for a notary. A notary public can be a lawyer but is not always a lawyer. A notary public may charge $10 or less to notarize a document.

How many copies of the Custodial Power of Attorney should I make?

You should complete two originals in English. If English is not your first language, you should also do two originals in your preferred language. Take a photo of each page of the CPOA in English and in your preferred language. Or, if possible, scan a copy for both you and the caretaker you picked. If you are getting the documents notarized, many of the places you go to get this service will make copies of the document for you if you ask.

How does a Custodial Power of Attorney end?

As a parent, you can cancel or take back in writing a CPOA at any time. To cancel or take back a CPOA is called “revocation” of a CPOA. To revoke is to take back. A court may also issue an order that cancels or changes the CPOA.

When one parent is signing, please use the version on the next page.

DISTRICT OF COLUMBIA CUSTODIAL POWER OF ATTORNEY

PURSUANT TO D.C. CODE § 21-2301

1. I, _____, am the parent of the child(ren) listed below. My address is _____. There are no court orders now in effect which would prohibit me from exercising the power that I now seek to convey.

2. I wish to give _____ the parental rights and responsibilities listed below regarding the care custody and control of my child, _____, whose date of birth is _____, and my child, _____, whose date of birth is _____, and my child, _____, whose date of birth is _____.

3. This custodial power of attorney shall take effect on _____(insert a specified date) or [the day on which] I experience an "adverse immigration event." For the purposes of this power of attorney, an "adverse immigration event" means any event resulting in my temporary or sustained incarceration, or any of the following events:

(A) My arrest or apprehension by any local, state, or federal law enforcement officer for an alleged violation of federal immigration law;

(B) My arrest, detention, or custody by the Department of Homeland Security or a federal, state, or local agency authorized or acting on behalf of the Department of Homeland Security;

(C) My departure from the United States under an order of removal, deportation, exclusion, voluntary departure, or expedited removal, or a stipulation of voluntary departure;

(D) The denial, revocation, or delay of the issuance of a visa or transportation letter by the Department of State;

(E) The denial, revocation, or delay of the issuance of a parole document or reentry permit by the Department of Homeland Security; or

(F) The denial of admission or entry into the United States by the Department of Homeland Security or other local or state officer acting on behalf of the Department of Homeland Security.

4. The powers I wish to grant are as follows:

[initial every line that is appropriate]

_____ physical custody of the child(ren) listed above;

_____ the authority to enroll the child(ren) listed above in school;

_____ the authority to obtain educational records regarding the child(ren) listed above;

_____ the authority to make all school-related decisions for the child(ren) listed above;

_____ the authority to obtain medical, mental health, or dental records regarding the child(ren) listed above;

_____ the authority to consent to medical, mental health, or dental treatment for the child(ren) listed above;

_____ the authority to act as representative payee for any Social Security benefits for which the child(ren) listed above may be eligible;

_____ the authority to receive any other benefits for which the child(ren) listed above may be eligible; and

_____ the authority to obtain a passport for my child(ren) [Note to draft: For detailed instructions on how a custodian can obtain a passport for a child, please refer to Question of _ the FAQ section above.]

_____ the authority to travel internationally with my child(ren) for the purpose of

reuniting my child(ren) with me or another family member who I authorize reunification with [Note to draft: For detailed instructions on how a custodian can travel with a child, please refer to Question of _ the FAQ section above.]

_____ all of the rights and responsibilities listed above and, to the greatest extent possible by law, the authority to make any other decision or obtain any other benefits necessary for the welfare of the child(ren) listed above.

5. This custodial power of attorney does not include authority to consent to the marriage or adoption of the child (ren). In addition, unless otherwise agreed by the parties in writing, the custodial power of attorney granted in this form does not affect:

(a) the right of the above-listed child(ren) to inherit from his or her (their) parent;

(b) the parent's right to visit or contact the child (ren);

(c) the parent's right to determine the child(ren)'s religious affiliation;

(d) the parent's responsibility to provide financial, medical, and other support for the child(ren).

6. As set forth in D.C. Code § 21-2301, the custodial power of attorney granted in this form does not affect my rights in any future proceeding concerning custody of or the allocation of parental rights and responsibilities for the child(ren) listed above.

7. The custodial power of attorney granted in this form shall take effect [immediately] ***or*** [on the date specified]. It shall continue to be effective even if I become disabled, incapacitated, or incompetent.

8. The custodial power of attorney granted in this form shall continue until I revoke it in writing and notify the party named as caretaker in the document of my revocation in writing.

9. A person or entity that relies on this custodial power of attorney in good faith has no

obligation to make any further inquiry or investigation into the authority of the attorney to act as described in this document. Revocation of this custodial power of attorney is not effective as to a person or entity that relies on it in good faith until that person or entity learns of the revocation.

Signed this _____ day of _____, 20____.

_____

(Parent's Signature) District of Columbia

_____

Parent name

_____, ss:

(State/District of Columbia)

SUBSCRIBED AND SWORN TO before me on this _____ day of _____, 20__.

_____ Notary Public

My commission expires: _____

When Two Parents are signing, please use the version on the next page.

DISTRICT OF COLUMBIA CUSTODIAL POWER OF ATTORNEY

PURSUANT TO D.C. CODE § 21-2301

1. We, _____, and _____ are the parents of the child(ren) listed below. Our address is _____. There are no court orders now in effect which would prohibit us from exercising the power that we now seek to convey.

2. We wish to give _____ the parental rights and responsibilities listed below regarding the care custody and control of our child, _____, whose date of birth is _____, and our child, _____, whose date of birth is _____ ,and our child, _____, whose date of birth is _____.

3. This custodial power of attorney shall take effect on _____(insert a specified date) or [the day on which] when [one/both- PLEASE CHOSE RELEVANT OPTION] of us experience an "adverse immigration event." For the purposes of this power of attorney, an "adverse immigration event" means any event resulting in our temporary or sustained incarceration, or any of the following events:

(A) Our arrest or apprehension by any local, state, or federal law enforcement officer for an alleged violation of federal immigration law;

(B) Our arrest, detention, or custody by the Department of Homeland Security or a federal, state, or local agency authorized or acting on behalf of the Department of Homeland Security;

(C) Our departure from the United States under an order of removal, deportation, exclusion, voluntary departure, or expedited removal, or a stipulation of voluntary departure;

(D) The denial, revocation, or delay of the issuance of a visa or transportation letter by the Department of State;

(E) The denial, revocation, or delay of the issuance of a parole document or reentry permit by the Department of Homeland Security; or

(F) The denial of admission or entry into the United States by the Department of Homeland Security or other local or state officer acting on behalf of the Department of Homeland Security.

4. The powers we wish to grant are as follows:
[initial every line that is appropriate]

_____ physical custody of the child(ren) listed above;

_____ the authority to enroll the child(ren) listed above in school;

_____ the authority to obtain educational records regarding the child(ren) listed above;

_____ the authority to make all school-related decisions for the child(ren) listed above;

_____ the authority to obtain medical, mental health, or dental records regarding the child(ren) listed above;

_____ the authority to consent to medical, mental health, or dental treatment for the child(ren) listed above;

_____ the authority to act as representative payee for any Social Security benefits for which the child listed above may be eligible;

_____ the authority to receive any other benefits for which the child(ren) listed above may be eligible; and

_____ the authority to obtain a passport for my child(ren) [NOTE TO DRAFT: FOR

DETAILED INSTRUCTIONS ON HOW A CUSTODIAN CAN OBTAIN A PASSPORT FOR A CHILD, PLEASE REFER TO QUESTION OF _ THE FAQ SECTION ABOVE.]

_____ the authority to travel internationally with my child(ren) for the purpose of reuniting my child with me or another family member who I authorize reunification with [NOTE TO DRAFT: FOR DETAILED INSTRUCTIONS ON HOW A CUSTODIAN CAN TRAVEL WITH A CHILD, PLEASE REFER TO QUESTION OF _ THE FAQ SECTION ABOVE.]

_____ all of the rights and responsibilities listed above and, to the greatest extent possible by law, the authority to make any other decision or obtain any other benefits necessary for the welfare of the child(ren) listed above.

5. This custodial power of attorney does not include authority to consent to the marriage or adoption of the child(ren). In addition, unless otherwise agreed by the parties in writing, the custodial power of attorney granted in this form does not affect:

(a) the right of the above-listed child(ren) to inherit from his or her (their) parent;

(b) the parent's right to visit or contact the child(ren);

(c) the parent's right to determine the child(ren)'s religious affiliation;

(d) the parent's responsibility to provide financial, medical, and other support for the child(ren).

6. As set forth in D.C. Code § 21-2301, the custodial power of attorney granted in this form does not affect my rights in any future proceeding concerning custody of or the allocation of parental rights and responsibilities for the child(ren) listed above.

7. The custodial power of attorney granted in this form shall take effect [immediately] ***or*** [on the date specified]. It shall continue to be effective even if I become disabled, incapacitated, or incompetent.

8. The custodial power of attorney granted in this form shall continue until I revoke it in writing and notify the party named in the document as caretaker of my revocation in writing.

9. A person or entity that relies on this custodial power of attorney in good faith has no obligation to make any further inquiry or investigation into the authority of the attorney to act as described in this document. Revocation of this custodial power of attorney is not effective as to a person or entity that relies on it in good faith until that person or entity learns of the revocation.

Signed this _____ day of _____, 20____.

_____
(Parent's Signature)

_____
Parent name

Signed this _____ day of _____, 20____.

_____
(Parent's Signature)

_____
Parent name

District of Columbia

_____, ss:
(State/District of Columbia)

SUBSCRIBED AND SWORN TO before me on this _____ day of _____, 20__.

_____ Notary Public

My commission expires: _____

REVOCATION OF A DISTRICT OF COLUMBIA CUSTODIAL POWER OF ATTORNEY PURSUANT TO D.C. CODE § 21-2301

1. I, _____, am the parent of the child(ren) listed below. My
Parent's name

address is:

_____

_____

_____

2. _____ is an adult whose address is:
Third party's name

_____

_____

_____

3. On _____ I signed a custodial power of attorney granting to
Date

_____ parental rights and responsibilities regarding the care,
Third party's name

physical custody, and control of the following child(ren):

Name: _____ Date of Birth:_____

Name: _____ Date of Birth:_____

Name: _____ Date of Birth:_____

Name: _____ Date of Birth:_____

4. I hereby revoke the above-referenced custodial power of attorney. I have sent written notice of this revocation by hand delivery, by regular mail, or by fax to _____ on _____. This revocation will
Third party's name **Date**

take effect upon that person's receipt of that written notice.

Signed this _____ day of _____, 20__

_____
(Parent's Signature)

This document was acknowledged before me on
_____ (Date) by _____ (name of principal)

_____
(Signature of notarial officer)

My commission expires: _____

FINANCIAL POWER OF ATTORNEY

(Durable General Power of Attorney)

A Durable General Power of Attorney or Financial Power of Attorney (FPOA) is a document that lets someone you trust manage your property and finances temporarily. The person you choose is called your Agent. Your Agent can do things like pay bills, cover your children's expenses, and sell or rent out your home. You decide what powers your agent has. There is a sample Financial Power of Attorney on this website.

Who should I pick as my Agent?
Your Agent can be any trusted adult. Your Agent can be your child's caretaker. If you choose different people to be your Agent and child's caretaker, you should provide instructions in your FPOA about providing money to the caretaker of your child.

You should pick someone you trust because they will have power over your bank accounts and any other property you want them to manage.

Key points about an FPOA:

- It is a private agreement, not a court order. You do not need to go to court for this document to be in effect.
- You specify which accounts and property your Agent can access and control.
- You can decide when the FPOA starts and ends.
- You can end the FPOA in writing anytime using a special form called the Revocation of Financial Power of Attorney. A sample Revocation of FPOA is on this website.
- Your bank may require you to sign additional forms to give someone access to your account. Please contact your bank to ask if your Agent will need any forms other than the Financial Power of Attorney to access your account.

Steps to Complete an FPOA:

1. **Complete the form**
   - Fill out all the blanks on the FPOA form. You need to say:
     - who should be your Agent
     - what powers you want your Agent to have
     - when the FPOA should start

2. **Notarization:**
   - Sign and notarize two original copies of the FPOA.
   - If you are signing the FPOA in a language other than English, you should sign two copies in that language and two in English.

- The Financial Power of Attorney must be notarized. This means that you must sign the FPOA in the presence of a notary public. The notary public must check that you are who you say you are before you sign the FPOA.
- To get your document notarized, you need to show the notary public a current (not expired) ID from any government office. This can be a passport, driver's license, or a non-driver identification card. If you use a different government ID, it must have your signature and photo. If you do not have an ID, the notary public may be able to use another identity verification process. You may contact the notary public to ask them how they want to do this.

3. Keeping Copies:

- Make two original copies of the FPOA.
- Keep one for yourself. Give one to your Agent. Keep your copies in a safe place like a fireproof box nearby for when you need to access it.
- Make a digital copy of the FPOA. You can take photos or scan it into your phone. Send a digital copy to your Agent.

Frequently Asked Questions

Q: **I own a home, and if I can't pay my mortgage, I will lose my house. What can I do to protect my home if I am deported?**

A:There are two main things you can consider:

1. Selling your home: You can use a FPOA to give the Agent the power to help you sell your home. You should keep the documentation of any sale to document any cash you get.
2. Have an Agent care for your property: You can use a FPOA to have an agent pay your mortgage and care for your property while you are unavailable.

You may want to consult with a real estate attorney and/or an estate planning attorney about whether you should transfer the deed to your children or other member of the family.

Q: What can I do with a car I own?

A: Here are some options for a car:

- **Sell Your Car for Cash**: This is the straightforward solution if you don't plan to use the car in the near future. You should keep the documentation about the title and how you got the cash in order to be able to deposit that cash in bank accounts in other countries.
- **Give the power to care for your care through an FPOA**: Have your agent care for your car. You can give the power to care for your car through a FPOA.
- **Transfer Ownership or Add Someone to the Title**: You can transfer your car to someone else or add them to the title, which is the record of ownership.

However, simply adding someone to the title or executing an FPOA isn't enough if you plan to keep the car. Make sure to also consider the following:

- **Maintain Car Insurance:** Ensure your car remains insured. Discuss with your insurance provider the implications of transferring ownership or having someone else drive your car for an extended period.
- **Update Car Registration**: Make sure your car's registration accurately reflects its current ownership status. Your agent can do this with a FPOA.
- **Consult Professionals:** It's crucial to seek advice from an experienced attorney, your insurance provider and the Department of Motor Vehicles (DMV) for proper guidance, especially if you don't own your car outright and still owe money on a car loan.

FINANCIAL DURABLE POWER OF ATTORNEY

OF INSERT NAME

THIS POWER OF ATTORNEY AUTHORIZES THE PERSON NAMED BELOW AS MY AGENT TO SELL, LEASE, GRANT, ENCUMBER, RELEASE, OR OTHERWISE CONVEY AN INTEREST IN MY REAL PROPERTY AND TO EXECUTE DEEDS AND OTHER INSTRUMENTS FOR ME. I GIVE MY AGENT THIS POWER FOR (INITIAL ONE):

(___) ALL MY REAL PROPERTY.

(___) ONLY THE SPECIFIC PROPERTY DESCRIBED AS FOLLOWS:

_____.

Article I. Declarations

I, **FULL NAME**, presently residing at **FULL ADDRESS**, appoint **NAME**, presently residing at **FULL ADDRESS**, as my Attorney-in-Fact (hereinafter called my Agent). If SHE/HE is unable or unwilling to act for any reason, I appoint **NAME**, presently residing at **FULL ADDRESS**, as my successor Agent. I hereby revoke all other financial powers of attorney that I have executed prior to my signing of this document.

This is intended to be a durable power of attorney *which shall become* effective either (1) immediately upon the date of execution or (2) upon the occurrence of an adverse immigration event. For the purposes of this power of attorney, an "adverse immigration event" means any event resulting in my temporary or sustained incarceration, or any of the following events:

(A) My arrest or apprehension by any local, state, or federal law enforcement officer for an alleged violation of federal immigration law;

(B) My arrest, detention, or custody by the Department of Homeland Security or a federal, state, or local agency authorized or acting on behalf of the Department of Homeland Security;

(C) My departure from the United States under an order of removal, deportation, exclusion, voluntary departure, or expedited removal, or a stipulation of voluntary departure;

(D) The denial, revocation, or delay of the issuance of a visa or transportation letter by the Department of State;

(E) The denial, revocation, or delay of the issuance of a parole document or reentry permit by the Department of Homeland Security; or

(F) The denial of admission or entry into the United States by the Department of Homeland Security or other local or state officer acting on behalf of the Department of Homeland Security.

Once effective, this Financial Durable Power of Attorney shall not be affected by my subsequent disability or incapacity, or by lapse of time. It shall remain in effect until my death or unless revoked in accordance with Article III below.

My Agent shall seek my oral permission to the extent possible prior to taking any action on my behalf. My Agent shall provide copies of documents signed on my behalf within ten (10) days of taking such action.

All acts lawfully done by my Agent during any period in which this Durable Power of Attorney is in effect shall have the same effect and inure to the benefit of and bind me, my heirs, devisees, legatees and personal representatives as if I had personally taken such actions and were not subject to any disability. I hereby, for myself, my heirs, devisees, legatees and personal representatives, ratify and confirm whatever actions my Agent may take on my behalf as authorized under this instrument.

Article II. Powers Of My Agent

My Agent shall have the below described powers to act for me and in my name in all matters enumerated below and to do all those things that I could if personally present.

The following powers that I have initialed are granted to my Agent to be used for my benefit and on my behalf.

_____**Banking**. To open, enter, withdraw, deposit, close, negotiate, endorse and transfer any instrument affecting any commercial, checking, savings, savings and loan, money market and mutual fund accounts in my name or opened for my benefit.

_____**Safety Deposit Box**. To enter any safety deposit box I may have rented or leased in my name at any financial institution and to withdraw the contents thereof at any time, and to lease a safety deposit box in my name or in my Agent's name in his or her capacity as my Agent.

_____**Arranging Care and Family Maintenance.** To do all acts necessary for maintaining my customary standard of living and those whom I have customarily supported, to provide living quarters by purchase, lease or other arrangement, or by payment of the operating costs of my or those whom I have customarily supported existing living quarters, including interest, amortization payments, repairs and taxes, to provide clothing, transportation, medicine, food, homemakers, care aids and incidentals and if necessary to make all necessary arrangements, contractual or otherwise, for me and my dependents at any hospital, hospice, nursing home, convalescent home, assisted living facility, or similar establishment.

_____**Employment of Experts**. To hire and pay from my funds for physicians, dentists, any other health care provider, accountants, attorneys at law, custodians, investment counsel, real estate agents, or other persons, and to do so without liability for any neglect, omission or misconduct of any such persons, and to dismiss any such persons at any time with or without cause.

_____**Provide for My Welfare and That of My Family.** To arrange, for myself and those I have customarily supported, for transportation, recreation and travel, to provide for my spiritual needs, and to provide for companionship, support groups, community events, and so forth.

_____**Securities**. To open accounts with stockbrokers to buy, sell, endorse, transfer, hypothecate and borrow against any shares of stock, bonds, or U.S. Treasury Bills and Notes and any other type of U.S. Treasury security, and any other documents or instruments defined as securities under law, and to vote securities in person or by proxy.

_____**Notes Receivable**. To collect on, compromise, endorse, borrow against, hypothecate, release and convey any promissory note receivable, secured or unsecured, or any accounts receivable note and any related deed of trust.

_____**Real Property**. To collect rents, disburse funds, keep in repair, hire professional property managers, lease to tenants, negotiate and renegotiate leases, borrow against, renew any loan, sign any documents required for such transactions, and to buy or sell any real property without the need for prior court approval.

_____**Manage Property**. To partition property to create separate property for me, to disclaim or release any powers or interest which I may have in any property, to manage tangible personal property, including but not limited to, moving, storing, selling, donating, or otherwise disposing of it.

_____**Manage Vehicles**. START HERE To sell my automobiles for cash to automobile dealers individuals: This is the straightforward solution if you don't plan to use the car in the near future. You should keep the documentation about the title and how you got the cash in order to be able to deposit that cash in many bank accounts in other countries.

- Give the power to care for your care through an FPOA: Have your agent care for your car. You can give the power to care for your car through a FPOA.

- Transfer Ownership or Add Someone to the Title: You can transfer your car to someone else or add them to the title, which is the record of ownershipMaintain Car Insurance: Ensure your car remains insured. Discuss with your insurance provider the implications of transferring ownership or having someone else drive your car for an extended period.

- Update Car Registration: Make sure your car's registration accurately reflects its current ownership status. Your agent can do this with a FPOA.

- Consult Professionals: It's crucial to seek advice from an experienced attorney, your insurance provider and the Department of Motor Vehicles (DMV) for proper guidance, especially if you don't own your car outright and still owe money on a car loan.

_____**Contracts**. To enter into, perform, modify, extend, cancel, compromise, enforce, or otherwise act with respect to any contract, instrument or similar document of any sort whatsoever, including but not limited to, deeds, leases, and mortgages, and to pay any money or to transfer title and possession to any real or personal property that may be required to be paid or transferred by any such contract, instrument, or similar document or in the performance of any obligation entered into or incurred by me or on my behalf.

_____**Taxes**. To sign my name to income and other tax returns, to hire preparers and advisors and pay for their services from my funds, to execute IRS Form 2848, Power of Attorney and Declaration of Representative, and other documents, to receive and cash refunds, to prepare, sign and file estimates, waivers, consents, protests, refund claims, requests for rulings, agreements and petitions (including petitions to the Tax Court of the United States); and to represent me and to hire counsel to represent me before any governmental agency or court.

_____**Retirement Accounts, Social Security, Benefits, Insurance**. To execute other local or national governmental reports, applications and documents and vouchers, including retirement and disability elections, and to apply for, receive and manage all aspects of my interests in retirement benefit plans (including but not limited to IRA, 401K, Keogh,

and ESOP accounts), Social Security, Medicare, Medicaid, and other life, health, long term care or disability insurance including but not limited to applying for, amending and terminating such policies, and in connection with any plan or policy, to execute options under, borrow against, cancel, surrender for cash value, and change beneficiaries.

_____**Legal Action**. To institute, prosecute, defend, collect, compromise and settle any legal or equitable actions, claims, debts, bequests, devises, inheritances or interest which I now have or may hereafter have.

_____**Advance Funeral Arrangements**. To make advance arrangements for my funeral or disposition of my remains on my behalf.

Borrow Money, Credit Cards.

a. My agent **CHOOSE ONE**:

_____ **shall** be empowered to borrow money on my behalf.

_____ **shall not** be empowered to borrow money on my behalf, except in the use of (i) any credit card account in existence at the time of execution of this document, as well as (ii) any new credit card account that I may open thereafter, for the purpose of providing support for me as specified below.

b. My agent **CHOOSE ONE**:

_____ **shall** be empowered to use my credit cards on my behalf to purchase food, clothing, medication, household goods and caregiving services to support my activities of daily living.

_____ **shall not** be empowered to use my credit cards on my behalf to purchase food, clothing, medication, household goods and caregiving services to support my activities of daily living.

_____**Loans**. To repay loans on my behalf from my funds.

_____**Trusts**. To create one or more trusts for my benefit and to contribute and receive income and principal from them; to represent me in any and all matters arising out of my interest in any trust of which I am the settlor or beneficiary, and to exercise any power which I now or may hereafter have with respect to any trusts, including the power to make withdrawals, alter, amend or revoke, in whole or in part, any trust.

_____**Renounce or Resign Fiduciary**. To renounce or resign any fiduciary position to which I have been appointed or in which I am serving, including, but not limited to any position as executor, administrator, trustee, guardian, attorney-in-fact, agent or officer or director of a corporation, and in connection with such resignation, to file an accounting

with a court of competent jurisdiction or agree to settlement by way of receipt and release or such other informal method as my Agent shall deem advisable.

_____**Renounce or Disclaim Property**. To renounce or disclaim any property or interest in property or powers to which I may become entitled, whether by gift, bequest, testate or intestate succession, beneficiary, or any other means.

Gifts.

My Agent [who is my spouse] ***OR*** [my spouse, sibling, or descendant] **CHOOSE ONE:**

_____ **shall be** empowered to make gifts on my behalf to my spouse, descendants, and/or to one or more charities [consistent with my prior patterns of giving] ***OR*** [in an amount not to exceed the annual exclusion from gift tax under Section 2503 (b) of the Internal Revenue Code] ***OR*** [for medical and educational expenses under Section 2503 (e) of the Internal Revenue Code] [provided, however, my Agent who is not my spouse shall not be empowered to make gifts to himself or herself.]

_____ **shall not** be empowered to make gifts on my behalf.

.

_____**Execute Documents**. To execute on my behalf the documents necessary to carry out the authorizations described above.

_____**HIPAA: Medical Records.** I authorize all health care providers to release to my Agent and I give consent to the use and disclosure by my Agent of protected health information about me for treatment, payment and health care operations. I further consent to the use and disclosure by my Agent of my protected health information for the purposes of treatment, payment for services and healthcare operations.

_____**Electronic Access.** My Agent shall have full power over and authority to access, continue, or cancel any email accounts, cloud accounts, website accounts, blogs, or other electronic accounts that I may own or have access to, including, but not limited to, Facebook, eBay, PayPal, Google, Twitter, Apple, LinkedIn, Amazon, MySpace, or any other such electronic service, website or account in the same manner that I could (and to receive a refund of any monies or property owed to or owned by me). **I also authorize my Agent to access all of my digital assets and the content of all of my electronic communications. I am the sole user of the Apple ID, WhatsApp, Facebook, and Google accounts associated with _____(Email address). For the purpose of accessing digital assets and the content of electronic communications, my Agent acts with my authorization and lawful consent.**

NEW DCALF PROVISIONS

_____**Electronic Access.** ***There are FOUR OPTIONS from which to choose*:**

Option 1 (*all rights and all devices*)

My Agent is authorized to exercise all my rights with respect to access, use, and control of my digital devices, including but not limited to, desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smart phones, cameras, electronic reading devices, and any similar digital device which currently exists or may exist as technology develops for the purpose of accessing, modifying, deleting, controlling, or transferring my digital assets; to access, modify, delete, control, and transfer my digital assets, wherever located and including, but not limited to, e-mail and e-mail accounts, social network content and accounts, social media content and accounts, text, documents, digital photographs, digital videos, software, software licenses, computer programs, computer source codes, databases file sharing accounts, financial accounts, cryptocurrency wallets and online cryptocurrency accounts, health insurance records and accounts, health care records and accounts, domain registrations, DNS service accounts, web hosting accounts, tax preparation service accounts, online store accounts and affiliate programs and other online accounts which currently exist or may exist as technology develops, or such comparable items and accounts as technology develops, including any words, characters, codes, keys, PINs, or contractual rights necessary to access such items and accounts or such comparable items as technology develops; to obtain, access, modify, delete, and control my keys, passwords, PINs, and other electronic credentials associated with my digital devices and digital assets described above. My Agent shall have the right to receive and access the catalog or content of electronic communications sent or received by me. This authority is intended to constitute "lawful consent" to a service provider to divulge the contents of any communication under The Store Communications Act (currently codified as 18 United States Code, Section 2701 et seq.), to the extent such lawful consent is required, and my Agent acting hereunder shall be authorized user for purposes of applicable federal and state computer fraud and unauthorized computer access laws including, but not limited to, 18 United States Code, Section 1030.

Option 2 (*all rights, except for no access to principal's personal email and social media accounts*)

My Agent is authorized to exercise all my rights with respect to access, use, and control of my digital devices, including but not limited to, desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smart phones, cameras, electronic reading devices, and any similar digital device which currently exists or may exist as technology develops for the purpose of accessing, modifying, deleting, controlling, or transferring my digital assets; to access, modify, delete, control, and transfer my digital assets, wherever located and including, but not limited to, digital assets related to my financial accounts and business matters, such as documents, digital photographs, digital videos, software, software licenses, computer programs, computer source codes, databases file sharing accounts, financial accounts,

cryptocurrency wallets and online cryptocurrency accounts, health insurance records and accounts, health care records and accounts, domain registrations, DNS service accounts, web hosting accounts, tax preparation service accounts, online store accounts and affiliate programs and other online accounts which currently exist or may exist as technology develops, or such comparable items and accounts as technology develops, including any words, characters, codes, keys, PINs, or contractual rights necessary to access such items and accounts or such comparable items as technology develops; to obtain, access, modify, delete, and control my keys, passwords, PINs, and other electronic credentials associated with my digital devices and digital assets described above. My Agent shall have the right to receive and access the catalog or content of electronic communications sent or received by me. This authority is intended to constitute "lawful consent" to a service provider to divulge the contents of any communication under The Store Communications Act (currently codified as 18 United States Code, Section 2701 et seq.), to the extent such lawful consent is required, and my Agent acting hereunder shall be authorized user for purposes of applicable federal and state computer fraud and unauthorized computer access laws including, but not limited to, 18 United States Code, Section 1030. Notwithstanding any other provisions of this financial power of attorney, my Agent is not authorized to access my e-mail and e-mail accounts, social network content and accounts, or social media content and accounts.

Option 3 (*all rights, except for no access to principal's devices, such as desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smart phones, cameras, electronic reading devices, and any similar digital device*)

My Agent is authorized to exercise all my rights to access, modify, delete, control, and transfer my digital assets, wherever located and including, but not limited to, e-mail and e-mail accounts, social network content and accounts, social media content and accounts, text, documents, digital photographs, digital videos, software, software licenses, computer programs, computer source codes, databases file sharing accounts, financial accounts, cryptocurrency wallets and online cryptocurrency accounts, health insurance records and accounts, health care records and accounts, domain registrations, DNS service accounts, web hosting accounts, tax preparation service accounts, online store accounts and affiliate programs and other online accounts which currently exist or may exist as technology develops, or such comparable items and accounts as technology develops, including any words, characters, codes, keys, PINs, or contractual rights necessary to access such items and accounts or such comparable items as technology develops; to obtain, access, modify, delete, and control my keys, passwords, PINs, and other electronic credentials associated with my digital assets described above. My Agent shall have the right to receive and access the catalog or content of electronic communications sent or received by me. This authority is intended to constitute "lawful consent" to a service provider to divulge the contents of any communication under The Store Communications Act (currently codified as 18 United States Code, Section 2701 et

seq.), to the extent such lawful consent is required, and my Agent acting hereunder shall be authorized user for purposes of applicable federal and state computer fraud and unauthorized computer access laws including, but not limited to, 18 United States Code, Section 1030. Notwithstanding any other provision of this financial power of attorney, my Agent/Fiduciary is not authorized to access my devices, such as desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smart phones, cameras, electronic reading devices, and any similar digital device.

Option 4 (*all rights except for (i) no access to principal's e-mail and e-mail accounts, social network content and accounts, social media content and accounts, text, documents, digital photographs, digital videos, software, software licenses, computer programs, computer source codes, databases file sharing accounts and (ii) no access to principal's desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smart phones, cameras, electronic reading devices, and any similar digital device*)

My Agent is authorized to exercise all my rights to access, modify, delete, control, and transfer my digital assets wherever located related to my financial accounts and business matters including but not limited to my financial accounts, cryptocurrency wallets and online cryptocurrency accounts, health insurance records and accounts, health care records and accounts, domain registrations, DNS service accounts, web hosting accounts, tax preparation service accounts, online store accounts and affiliate programs and other online accounts which currently exist or may exist as technology develops, or such comparable items and accounts as technology develops, including any words, characters, codes, keys, PINs, or contractual rights necessary to access such items and accounts or such comparable items as technology develops; to obtain, access, modify, delete, and control my keys, passwords, PINs, and other electronic credentials associated with my digital assets described above. My Agent shall have the right to receive and access the catalog or content of electronic communications sent or received by me. This authority is intended to constitute "lawful consent" to a service provider to divulge the contents of any communication under The Store Communications Act (currently codified as 18 United States Code, Section 2701 et seq.), to the extent such lawful consent is required, and my Agent acting hereunder shall be authorized user for purposes of applicable federal and state computer fraud and unauthorized computer access laws including, but not limited to, 18 United States Code, Section 1030. Notwithstanding any other provision of financial power of attorney, my Agent is not authorized to access my devices, such as desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smart phones, cameras, electronic reading devices, and any similar digital devices, e-mail and e-mail accounts, social network content and accounts, social media content and accounts, text, documents, digital photographs, digital videos, software, software licenses, computer programs, computer source codes, and databases file sharing accounts.

Article III. Revocation, Termination, Indemnification

This Financial Durable Power of Attorney may be amended or revoked by me at any time by my execution of a written instrument of amendment or revocation signed, notarized, witnessed and delivered to my Agent and all successor Agents. Any Agent or successor Agent may be removed by me at any time and a successor Agent appointed in his or her place by the execution by me of a written instrument of revocation, amendment, or removal signed, notarized, witnessed, and delivered to my Agent and all successor Agents. I acknowledge and agree that if I remove my Agent and all successor Agents without appointing a successor Agent to act in his or her place, no person will be authorized to take action under this Financial Durable Power of Attorney.

Any persons or institutions to which this Financial Durable Power of Attorney is presented may continue to rely on it until they receive written notice that it is revoked or actual notice of my death. They shall be held harmless by me, my estate, legal and personal representatives, heirs and beneficiaries against any liability or loss that they may incur by relying on this Financial Durable Power of Attorney after termination or revocation but before they receive notice of revocation, or at any time because of wrongful acts, omissions, or representations of my Agent.

My Agent is authorized to take appropriate legal action against any person or institution that refuses to honor this Financial Durable Power of Attorney unless such person or institution has received written notice that this Financial Durable Power of Attorney is revoked or has actual knowledge of my death. Further, my Agent shall be indemnified and held harmless for all acts lawfully performed hereunder and for all decisions made by my Agent in his or her sound discretion not to perform acts that he or she could lawfully perform hereunder.

Article IV. Acceptance of Power of Attorney

In accordance with D.C. Code § 21-2601.20, a person shall either accept this Financial Durable Power of Attorney or request a certification, a translation, or an opinion of counsel, no later than seven (7) business days after presentation of this Financial Durable Power of Attorney for acceptance. If a person requests a certification, a translation, or an opinion of

counsel, such person shall accept this Financial Durable Power of Attorney no later than five (5) business days after receipt of the certification, translation, or opinion of counsel; and such person may not require an additional or different form of Financial Durable Power of Attorney. A person that refuses to accept this Financial Durable Power of Attorney in violation of the foregoing provisions is subject to (i) a court order mandating acceptance of the durable power of attorney; and (ii) liability for reasonable attorney's fees and costs incurred in any action or proceeding that confirms the validity of this Financial Durable Power of Attorney or mandates acceptance of this Financial Durable Power of Attorney.

Article V. Other Provisions

My Agent MAY NOT use my property to benefit the Agent or a person to whom the Agent owes an obligation of support unless I have included that authority here:

_____
_____
_____.

My Agent shall serve without compensation. My Agent shall be entitled to reimbursement of out-of-pocket expenses incurred in the course of conducting affairs on my behalf.

In the event an action is brought by any party in a court of competent jurisdiction for appointment of a guardian or conservator, and such action is not dismissed by the court due to my execution of this instrument, I nominate my Agent to serve as guardian or conservator, unless such action was brought as a result of allegation that my Agent has acted contrary to the instructions herein, or my best interests, and such allegation is found to be warranted by the court.

If any of the provisions of this Financial Durable Power of Attorney are held to be invalid, only the specific provision declared invalid shall be affected, and all other provisions not directly dependent thereon shall remain in full force and effect.

The headings in this Financial Durable Power of Attorney have been inserted for convenient reference and shall be ignored in its construction.

I HEREBY sign my name to this Financial Durable Power of Attorney this __ day of _____ _____, _____.

_____

FULL NAME

AFFIRMATION OF IDENTIFICATION [NOTE FOR DRAFTING PURPOSES: THIS SECTION (AFFIRMATION OF IDENTIFICATION) IS TO BE USED ONLY IF THE INDIVIDUAL DOES NOT HAVE VALID IDENTIFICATION].

I, _____, NAME of AFFIRMANT, do solemnly declare and affirm under penalty of law, including penalty of perjury, that FULL NAME is personally known to me and that he or she is the person who appeared and executed the foregoing Financial Durable Power of Attorney on, _____.

_____

NAME OF AFFIRMANT

City of Washington

District of Columbia

I, _____, a Notary Public, within and for the District of Columbia, do hereby certify that the foregoing Financial Durable Power of Attorney this day produced to me in the District of Columbia by FULL NAME was executed and acknowledged by FULL NAME to be his or her free act and voluntary deed.

SUBSCRIBED AND SWORN TO before me this _____ day of _____, _____.

_____

Notary Public

My Commission expires: _____

First Witness

Signature: _____

Print Name: _____

Address: _____

Date: _____

Second Witness

Signature: _____

Print Name: _____

Address: _____

Date: _____

EXHIBIT B

REVOCATION OF FINANCIAL POWER OF ATTORNEY

I, _____ , presently residing at _____, hereby revoke all powers of attorney executed by me at any time prior to the date of this revocation, including any and all documents granting a Financial Durable Power of Attorney to _____.

I do not authorize _____ or any other person to take any legal or financial action on my behalf.

I HEREBY sign my name to this Financial Durable Power of Attorney Revocation this _____ day of _____, 20_.

(1) District of Columbia

_____
Name

City of Washington

District of Columbia

I, a Notary Public, within and for the District of Columbia, do hereby certify that the foregoing Financial Durable Power of Attorney Revocation was this day produced to me in the District of Columbia by the Principal and was executed and acknowledged by the Principal to be the Principal's free act and voluntary deed. SUBSCRIBED AND SWORN TO before me this day of _____, 20_.

_____
Notary Public

My Commission expires: _____

Maryland Family Safety Planning Legal Resources

In Maryland, you can plan for who will take care of your kids by filling out standby guardianship papers.

For information on Standby Guardianship in Maryland, please look at: Home - Standby Guardianship Project

You can go directly to the forms here.

You can choose someone to take care your finances through a Financial Power of Attorney (Durable Power of Attorney). For information on Financial Power of Attorney (Durable Power of Attorney), please see this FAQ. More information is available here and here. The forms can be downloaded here.

Virginia Family Safety Planning Legal Resources

For information on Financial Power of Attorney (Durable Power of Attorney), please see this FAQ.

More information is available here.

Part 3: Know your Rights about Immigration Law

What Should You Do if you Encounter ICE?

This is information is adapted from the ACLU We have Rights and InformedImmigrant.com.

If ICE knocks on your door...

- You have special rights at home.
- Do not open the door.
- ICE can only come in if they have a judicial warrant from a judge, NOT an immigration official.
- If there is no judicial warrant, ICE can only enter with permission. You do NOT have to give permission.

Outside of Your Home....

- Stay Calm.
- Stay Silent (do NOT lie to ICE about your name or how you came into the United States).
- Do not run away.
- Ask to speak to a lawyer before answering any questions or signing any documents.
- Write down the name and badge number of who is speaking to you.

Red Card

You may want to carry a Red Card with you. This explains your rights and says you do not want to speak and want to have a lawyer. You can hand this to an ICE agent if one tries to interview or arrest you. You can download one at https://www.ilrc.org/red-cards-tarjetas-rojas.

General Information About the Immigration Court System

This section has information about how to keep track of your immigration case if you are apprehended. This is very important because the government can order your deported if you do not appear in court.

What Is An "A Number"?

An "A Number" is a unique number given to immigrants in the United States by the United States government. You can get an A number by several ways, including:

- if you entered the United States without permission and were found by, or you presented to, Customs and Border Protection (CBP), then you should have been given an A number.
- if you are apprehended by Immigration and Customs Enforcement (ICE, ICE will assign you an A Number (or use your existing A number if you already have one).

- If you apply for an immigration benefit with US Citizenship and Immigration Services (USCIS), USCIS will assign you an A Number (or use your existing A number if you already have one).

This is the identification number for your immigration case and will follow you through the whole immigration process. It is important to remember your and your children's "A numbers". Write down these numbers and give them to your designated caretaker, relatives, and close friends. If you are detained, the only way your designated caretaker and others will be able to get information about where you are detained and about your case is if they have your A Number. The A Number is also used to keep track of your immigration court case.

Keeping track of your and your children's immigration case

If you are in the United States without permission and the government is aware that you are here, you likely have or had an immigration court case. This type of case is called "removal proceedings" and is the process by which the government removes or deports people from the United States. This process is also where you have the opportunity to defend against removal.

The court where this case takes place is called the Executive Office of Immigration Review or EOIR.

If you live in DC, you would most likely have your case heard at the Court in Hyattsville, MD. If you live in Virginia, you would most likely have your case heard at the Court in Annandale, VA or Sterling, VA. And, If you live in Maryland, your case would either be held at the Court in Hyattsville, MD or Baltimore, MD. There is more information about EOIR here. It is important to go to all of your or your children's court hearings and to keep track of the status of your case. If you do not attend your court hearings, the judge may issue an order of removal against you. This means that the government could remove you from the US more easily. Using your A number you can look up the status of your immigration case and where the case is located on EOIR's website here. If you do not have a lawyer, you should speak with one. See the list of organizations that provide immigration legal help on page in the who can help me section.

Information about what to do if you or someone you know is detained by ICE

How To Locate A Person Who Is Detained By ICE

There are currently two long-term immigration detention facilities in the DC-Maryland-Virginia (DMV) area, both are in Virginia: one located in Farmville, VA called Farmville Detention Center and the other in Bowling Green, VA called Caroline County Detention Facility. There are currently no adult detention facilities in either DC or Maryland, but there are "holding cells" in ICE offices in Baltimore and Salisbury, MD and Chantilly, VA. (As of September 18, 2026, there is a holding facility planned for Elkridge, MD. It is not currently operational, but may come online at any time.) Individuals are often taken to these temporary hold rooms immediately after arrest. They are supposed to be held there only for a few hours and then transferred to long-term detention or released, but there have been issues with ICE detaining people in hold rooms for many days or even weeks. There is currently a preliminary injunction (note to link lawsuit) governing conditions at the Baltimore Hold room which imposes certain limitations on conditions and length of confinement. Individuals detained at Hold Rooms most often do not show up in the ICE Detainee Locator and have very little phone or external access.

After a relatively brief detention at an area holding facility, individuals apprehended in DC and VA who do not have removal orders are most often taken to one of the two VA facilities mentioned above. Individuals apprehended in MD are often taken to a detention facility in Pennsylvania, but someone who is detained by ICE can be sent to any detention center in the United States or moved around between detention centers. As of September 18, 2026, ICE is planning to open a new detention center in Winton, North Carolina. It is likely

that this facility will begin regularly detaining VA, DC and MD residents in addition to the active detention centers discussed herein.

People with removal orders are often sent to detention centers in Louisiana and Texas for staging for deportation. Depending upon the country of origin, deportation may take only a few days, or many weeks or months.

You can find a list here to this guide of the detention centers where Washington, DC metro-area residents are typically taken initially.

There is a webpage to use to search for people detained by ICE. The website is called the "ICE detainee locator" and can be found here: https://locator.ice.gov/odls/homePage.do. To find someone on this website, you must have:

- the exact spelling of the person's name as it was spelled by ICE (even if it was spelled incorrectly) and
- the person's date of birth and
- the person's country of origin, or the person's country of birth
- or
- the person's "A number", which is the person's immigration identification number and
- their country of birth

What happens after I am detained by ICE?

What Is The Role Of The Deportation Officer?

You will be assigned a Deportation Officer. You should tell your Deportation Officer right away about your children and your concerns about who will take care of them if you are not released. Your Deportation Officer works for ICE and is in charge of your case while you are in detention. Most likely, this officer will be communicating with you virtually through a tablet while you are in detention, rather than meeting with you in person. Because they work for ICE, your Deportation Officer cannot give you advice about your immigration case.

How Do I Find An Immigration Attorney?

The government will not provide you with an immigration attorney. If you cannot afford an immigration attorney, you may be able to get an immigration attorney from a nonprofit legal aid organization for free or at a low cost. A list of nonprofit legal aid organizations can be found in the how can I find help section

of this guide. Unfortunately, there are many more people who need immigration attorneys than there are legal aid attorneys to help them. If you are unable to get a free/low cost attorney, you will have to hire and pay for a private attorney, or have someone hire and pay for one for you. However, if you are unable to get an attorney, you will not be alone. Most people in immigration detention end up fighting their cases without an immigration attorney.

Be aware of fraud or misrepresentations by immigration attorneys or people pretending to be immigration attorneys. There has been an increase in scams by people advertising on Facebook and WhatsApp. There are many people who take advantage of immigrants and people in detention. Some immigration attorneys will take your money, even if there is little they can do to help you under the law. If you or a member of your family is going to hire a private immigration attorney to represent you, do your homework and ask the immigration attorney for a few references you can call to find out about the quality of their services. An attorney should always give you a written agreement about the legal services they will provide and how much the services will cost. You can also look up their license online to see if they are a real attorney.

In addition to private attorney scams, there has also been a pattern of scams where individuals are posing as non-profit attorneys from organizations such as Catholic Charities and Amica Center. They send fake hearing notices for online hearings/bond hearings, and have a fake judge preside and tell the family that their loved one has been granted a bond, and provide a link such as Zelle or a Bank Account Routing number for them to pay through. You should always verify your hearing date through the EOIR automated system and/or the phone number: 1-800-898-7180. Red Flags:

- Your detained family member will be present by video at the hearing! If they are not there, that is a red flag.
- Immigration judges are DOJ employees, not DHS employees.
- Hearings are conducted in English with interpretation, not entirely in Spanish.
- Payments should go through CEBonds, not Zelle or bank transfers.
- Example fraudulent website: "uscis.inmigracion.com".

Make sure you review and understand the written agreement before you sign it.

Do not hire a "notario" to be your lawyer or legal representative. In the United States, a "notario" may not be a qualified attorney. In certain Latin American countries, a "notario" is the term for someone who does actually have legal

training and experience. But in the US, a "notario" is not a lawyer; a "notario" is simply a "notary public" (someone who notarizes, or authenticates, the signature on a document). The requirements to become a "notario" or "notary public" in DC are that the person is over 18 years old, lives in DC, can read, write, and speak English, and has no felony convictions -- no legal training is required.

Is it possible to be released on Bond from detention?

You may be able to pay a money bond and be released after you have been detained. Not everyone is eligible for a bond, and the law is changing rapidly on who is eligible for a bond and who is not. Some categories of people are generally not eligible for bond soon after detainment such as: individuals with removal orders, individuals with serious criminal convictions, individuals who claimed asylum at the border and were put into asylum-only proceedings, and some recent arrivals to the country . Some people may be eligible for a bond, but may have to file a habeas corpus petition first. This may vary in what area of the country the person is detained. You should consult with an immigration attorney with experience in detention when determining how to move forward with bond. A person can generally only ask for bond **one time** in Immigration Court, so it is important to not request a bond hearing if you are not prepared for it yet. The lowest possible bond the Immigration Court will give you is typically $1,500, and most people without a criminal record receive bonds between $5,000 and $15,000. You will need to pay the full amount of the bond at one time in order to be released. *As part of making a plan in case you're picked up by ICE, you should think about how you or your family members may be able to pay a bond if you are detained.* You might consider saving up money so you can pay cash for your bond. It is also possible to finance your bond through a bail bond company. Be careful if you use a bail bond company, as these companies sometimes require you to pay large amounts of interest or to wear an ankle bracelet once you are released.

ICE also has the authority to grant you a bond or a parole from their custody. However, under the second Trump administration, ICE is categorically *not* exercising their discretion, and is not releasing people from custody without a court order. Sometimes in very rare circumstances such as emergency medical care, ICE may consider release on a bond or parole, but that is the exception not the norm.

How Do I Request A Bond Hearing?

As mentioned above, it is possible to request a bond hearing before the Immigration Judge, but not everyone is eligible to receive a bond. Under the second Trump administration, the law in Immigration Court changed, significantly reducing the number of people who are eligible to ask for a bond

hearing. As a result, many people have had to file habeas corpus petitions in federal court to request an order from a federal judge requiring the Immigration Judge to conduct a bond hearing, or in some circumstances, ordering release. Whether or not you should file a habeas corpus petition before requesting a bond hearing depends on which area of the country (and federal circuit) your loved one is detained in.

You are generally only allowed to request bond one time. This means that you should not request a bond hearing until you are ready to present your bond case. Presenting a bond case generally requires (a) showing that you are not a flight risk, meaning that you will show up to all your future hearings, (b) that you are not a danger to the community, which you can illustrate through lack of a criminal record, lack of driving infractions, lack of a violent character; and (c) that you warrant a favorable exercise of discretion, meaning that you can show you have many positive characteristics. Be sure to *tell the Immigration Court Judge about your children and your need to be released to take care of them and keep custody of them.*

At the hearing, you should present photocopies of documents (*never give your original documents!* talked about previously to *show you are not a danger to the community or a flight risk,* such as:

- birth certificates for your children born in the US
- evidence that your children have lawful status in the US, such as their birth certificates or Deferred Action for Childhood Arrivals (DACA) approval notice, if that is the case
- school records for your children
- your children's medical records -- especially if any of your children have any medical conditions that need ongoing medical care
- any and all evidence that you have been in the US living responsibly, like pay stubs, tax records, bills, bank account records, medical records, car payments, rental agreements, utility bills, etc.
- letters from family and friends that can vouch for your good character and how long you have been in the US

Remember to have any documents that are not in English translated into English by a translator. Anyone who is able to read and write fluently in English and Spanish can serve as a translator. Include a Certificate of Translation issued by the translator for each translated document. A sample Certificate of Translation can be found in Part 3 of this guide.

If you are granted bond, a US Citizen or Legal Permanent resident will need to pay the bond on your behalf through the CE Bonds web site in order for you to

be released from custody. Only after the bond has been postedyou will be released on your own recognizance. This means that you promise to return to court on a certain date. You will be asked to sign a document promising to return to court so you can be released. *Before you sign any document, make sure you understand what the document says. If you cannot read the document, ask that the document be explained to you in the language you understand best.*

Are There Other Ways I Can Be Released From Detention?

Technically, ICE is allowed to exercise its discretion and release you from detention under parole or an ICE bond. However, under the current administration, ICE has an internal policy not to do this. You can still request that ICE do this, but in most circumstances, we are seeing these requests being denied. If you have a very severe, acute medical issue that ICE cannot treat, that may be grounds for them to release you from custody, but this still may require intervention from the federal courts through a habeas corpus petition. There used to be a tool called "Prosecutorial Discretion" which meant that the ICE prosecutor or ICE officer could exercise their discretion to release you from custody or not deport you, but that no longer exists under the current administration.

What if I Am Told to Sign for My Deportation?

From the time you are detained by ICE, officers may present you with paperwork to sign. This paperwork may be presented to you multiple times, and by different officers. You may be told that you have no case; that you must sign for your deportation; that you will face years in jail if you don't sign right away; and that you will never see your children again. An officer may even try to physically force you to sign the paperwork. ICE may also offer financial incentives if you agree to leave the United States without seeing a judge. However, there is limited information about whether these payments are actually made after departure.

If you are 100% certain that you do not want to fight your immigration case, and you understand the consequences of accepting deportation or voluntary departure, you may choose to do so without seeing an Immigration Judge. Depending on your case, accepting

deportation may result in a 3-year, 5-year, 10-year, 20-year, or even permanent bar on returning to the United States.

If you sign these documents and accept deportation, it will likely not be possible for you to come back to the US. You have the right to refuse to sign any document accepting deportation. This may be a difficult decision, as it will mean accepting additional time in detention, but if you sign for your deportation you will be unable to present your case to an Immigration Court Judge.

What is Voluntary Departure?

If an ICE officer asks you to "sign for voluntary departure," this generally means that you will sign documents that are sent to an Immigration Judge, who may grant voluntary departure without holding a hearing. Some people may choose this option if they qualify for voluntary departure but do not have a defense that would allow them to remain in the United States permanently.

One possible benefit of voluntary departure is that it may help preserve eligibility to return to the United States in the future and avoid some of the immigration penalties that can result from a deportation order.

What if I Do Not Want to Sign?

If you do not want to accept deportation or voluntary departure without first seeing a judge, it is very important that you do not sign anything presented to you by ICE. Some people report feeling pressured or coerced into signing these documents.

If you signed documents because you were pressured, threatened, misled, or otherwise coerced, you should speak with an attorney as soon as possible. In some cases, it may be possible to challenge what happened by filing a motion to reopen your immigration proceedings.

What if I Already Have a Removal Order?

If you already have a final order of removal, ICE generally does not need your signature in order to deport you. ICE may execute an existing removal order without asking you to sign any additional paperwork.

How Does The Immigration Court Process Work And How Do I Fight My Case?

Many detained people have the right to fight their cases in Immigration Court, but some do not. People who can be deported without seeing an Immigration Judge include:

- People with active removal orders: People who received a removal order (a) at the border from either an Immigration Judge or through the Expedited Removal process, (b) after losing their case, or (c) when they previously missed a court hearing can be deported without seeing a judge. A person in this situation would generally need to file a Motion to Reopen to try to fight their case.

- People who have been deported before: If someone has been deported before, the government can "re-use" their deportation order to deport them again without seeing a judge. Generally, a person in this situation would need to request a "Reasonable Fear Interview" with ICE to try to fight their case.

- People with serious criminal convictions may be given a "Final Administrative Removal Order" (or FARO).

- People in Expedited Removal: People who cannot prove they have been in the United States for more than two years may be put into an expedited process called expedited removal, which does not automatically entitle them to see an Immigration Judge. Generally, a person in this situation would need to request a Credible Fear Interview (CFI) with the Asylum Office.

Most other people are put into Removal Proceedings after being detained (or, if they were already in proceedings, will continue with their case on a faster, detained docket). A person may be detained for weeks before they have their first hearing before an Immigration Court Judge. This hearing is called a Master Calendar Hearing. There will be other immigrants at this hearing, and you may be called individually or as a group to speak with the Immigrant Court Judge. You will be asked what language you prefer to have your hearing in. An interpreter will be available at this hearing for you if you speak Spanish. If you speak another language, such as an indigenous language, the Immigration Court Judge will use an interpreter by telephone. *If you cannot understand the interpreter, it is very important to tell this to the Immigration Court Judge, and to make sure the interpreter is changed to someone you can understand.*

If you don't have an immigration attorney, the Immigration Court Judge will probably ask you at this first hearing if you want more time to find one. It can be

a good idea to *ask for more time to find an immigration attorney to get advice about your immigration case.*

After this first hearing, you will usually be scheduled for at least one more Master Calendar Hearing, where the Immigration Court Judge will ask if you are *applying for legal relief with the Immigration Court seeking to stay in the US.* Applying for legal relief means that you are going to fight your deportation in Immigration Court. If you have an attorney, you will get more information about whether you have a basis under the law to fight your deportation in Immigration Court. Generally, if you fight your deportation in Immigration Court, the judge will schedule a hearing called an Individual Hearing. The Individual Hearing is a trial at which you will present your case to the Immigration Court Judge. At the Individual Hearing, you will have the chance to testify and present evidence such as documents and witnesses. However, sometimes the judge may choose to "pre-termit" or end your case without an Individual Hearing. If the Immigration Judge "pre-termits" your case, that means they issue a removal order before having a full hearing, generally because either (a) they don't believe you will be able to provide sufficient evidence to prove your case, and/or (b) they are deporting you to another country. These "pre-termissions" can be legally complex, so it is very important to consult an immigration attorney if you are able.

Cases may take only a few weeks if they are pre-termitted or a person accepts deportation, or many years if a person is fighting their case through various appeals. Someone may be detained the entire time.

To get information about your case, you can check the Automated Case Portal online at https://portal.eoir.justice.gov/ or call the Immigration Court Hotline at #1-800-898-7180.

DEPORTATION

Can I Take My Children with Me if I am Deported?

If you are ordered deported, you will NOT be allowed to take your children with you at the time of your deportation, and you will not be given time to make arrangements for your children. This is why it is so important to plan, and think through your options before there is an emergency.

If you have the opportunity to talk with your Consulate, you should inform them about your children, and *ask for assistance in making travel arrangements for your children if you want them to relocate with you.* The Consulate can assist with travel arrangements.

Consulate Information

Bolivia - Consulado General def Estado Plurinacional de Bolivia
Dirección: 1825 Connecticut Avenue N.W. Suite 200C, Washington, DC 20009
Tel: (202) 232-4827 / 4828 Fax: (202) 232-8017
Horarios: Lunes a Viernes de 9:00am - 3:00pm

Colombia - Embajada y Consulado de Colombia
Dirección: 1724 Massachusetts Ave NW, Washington, DC 20036
Tel: (202) 387-8338 Atencion al ciudadano:
Linea gratuita en EEUU: 18887643326
Horario: Lunes a viernes de 9:00am a 3:00pm

Ecuador - Consulado General def Ecuador en Washington, DC
Dirección: 2535 15th St NW, Washington, DC 20009
Tel: (202) 234-7166
Horario: Lunes a viernes de 9am a 3pm

El Salvador - Embajada de El Salvador
Dirección: 1400 16th Street, Suite 100, N.W., Washington D.C. 20036
Tel: 202-595-7500
Horario: Lunes a Viernes de 9:30 am a 5:30 pm.

Consulado - General de El Salvador en Washington, DC
Dirección: 926 Philadelphia Ave, Silver Spring, MD 20910
Tel: 202-337-4032
Horario: Lunes a viernes de 7:00am a 3:30pm

Oficina de Asistencia Legal Migratoria
Dirección: 1400 16th Street, Suite 100, N.W., Washington D.C. 20036
Tel: 202-387-4766 e-mail: correo@elsalvador.org

Eritrea - Embassy of Eritrea
Address: 1708 New Hampshire Ave NW, Washington, DC 20009
Tel: (202) 319-1991
Hours: Monday to Friday from 9am to 4pm

Ethiopia - Embassy of Ethiopia in Washington, DC
Address: 3506 International Dr. NW, Washington, DC 20008
Tel: (202) 364-1200 Fax: (202)
Hours: Monday to Friday from 9am to 5 pm.
E-mail:ethiopia@ethiopianembassy.orgwww.ethiopianembassy.org

Ghana - Embassy of Ghana at Washington, DC
Address: 3512 International Dr. NW, Washington, DC 20008
Tel: (202) 686-4520
Hours: Monday to Friday from 9am to 3pm
http://www.qhanaembassy.org/

Guatemala - Embajada de Guatemala en Washington, DC
Dirección: 2220 R St NW, Washington, DC 20008
Tel: (202) 745-4953
Horario: Lunes a viernes de 9am a 5pm

Consulado - General de Guatemala
Dirección: 8124 Georgia Ave, Silver Spring, MD 20910
Tel: (240) 485-5050
Horario: Lunes a viernes de 8 am a 2 pm

Honduras - Consulado General de Honduras en Washington, DC
Dirección: 1014 M St NW, Washington, DC 20001
Tel: 202-525-4001
Horario: Lunes a Viernes de 9am a 3pm

Mexico - Embassy of Mexico in Washington, DC
Dirección: 1911 Pennsylvania Ave NW, Washington, DC 20006
Tel: (202) 728-1600
Horario: Lunes a Viernes de 9:00 am a 18:00 pm
E-mail: mexembusa@sre.gob.mx
https://embamex2.sre.gob.mx/eua/index.php/es/

Sección Consular de la Embaiada de Mexico en EUA
Dirección: 1250 23rd St NW Washington, DC
Tel: 202-736-1000
Horario: Lunes a Viernes de 8:30am a 2:30 pm

Centro de lnformaci6n y Asistencia a
Mexicanos Unea de informaci6n que opera las 24 horas del dia.
Desde Estados Unidos sin costo al 18554636395
Desde Mexico llama de larga distancia al 0015206237874

Nicaragua - Embajada de Nicaragua en Washington, DC
Dirección: 1627 New Hampshire Ave NW, Washington, DC 20009
Tel: (240) 485-5050
Oscar Samora (general consulate): (202) 939- 6531
Horario: Lunes a viernes de 9am a 1pm

Nigeria - Embassy of Nigeria
Address: 3519 International Ct NW, Washington, DC 20008
Tel: (202) 986-8400
Hours: Monday to Friday from 9am to 6pm

Perú - Embajada de Peru en Washington, DC
Dirección: 1700 Massachusetts Ave NW, Washington, DC 20036
Tel: (202) 833-9860 Fax: (202) 659-8124
mail to: OIGITALDIPLOMACY@EMBASSYOFPERU.US
https://www.embassyofperu.org/

Consulado - General def Peru en Washington, DC
Dirección: 1225 23rd St. NW, Washington, DC 20037
Tel: 202-774-5450 Tel de emergencia: 202-230-9992
Horario: Lunes a viernes de 8:30 am a 13:00 pm.

Se atenderan los primeros 100 tramites de 8:30 am a 12:00pm de los siguientes sabados: Enero 28, Febrero 25, Marzo 18, Abril 22, Mayo 20, Junia 17, Julio 15, Agosto 19, Septiembre 16, Octubre 21, Noviembre 18, Diciembre 16.

PART 5

SAMPLE FORMS, INFORMATION SHEETS, AND OTHER RESOURCES

1. Local Detention Centers
2. Who Can Help Me? Local Immigration Legal Services Organizations
3. Who Can Help me? Local Family Law Legal Services Organizations
4. Consulate Information
5. Certificate Of Translation

LOCAL IMMIGRATION DETENTION CENTERS

Contact Information For Adult Jails in Virginia	
ICA-FARMVILLE	**CAROLINE DETENTION FACILITY**
TEL: (434) 395-8114 (for information about a detainee or to leave an urgent message for a detainee).	TEL: (804) 633-0043 ext. 151 or ext. 261 (for information about a detainee) TEL: (804) 633-0043 x104 (To leave an urgent message for a detainee) Note: This facility has tablets. You can access information on how to send a non-confidential message at https://www.gettingout.com/help/.
Jail Address: 508 Waterworks Road Farmville, VA 23901 Website: Abyon | Farmville Detention Center | ICE	**Jail Address:** 11093 SW Lewis Memorial Dr Bowling Green, VA 22427 Website: Caroline Detention Facility | ICE
Detainee Mailing Address: {Name of Detainee} {A Number} P.O. Drawer N Farmville, VA 23901	**Detainee Mailing Address:** {Name of Detainee} {A Number} 11093 SW Lewis Memorial Dr Bowling Green, VA 22427

Contact Information For Adult Jails in PA
MOSHANNON VALLEY PROCESSING CENTER
TEL: (717) 767-2300 (for information about a detainee) TEL: (814) 768-1200 (to leave an urgent message for a detainee) NOTE: The Moshannon Valley Processing Center has ICE Talton Tablets. You can access information on how to send a non-confidential message at www.gettingout.com/help. **Jail Address:555 GEO Drive** **Philipsburg, PA 16866** **Website:** Moshannon Valley Processing Center | ICE **Detainee Mailing Address:** {Name of Detainee} {Detainee's A Number} 555 GEO Drive Philipsburg, PA 16866

Immigration Legal Services Organizations That May Be Able To Help

To get information about your case, you can call the Immigration Court Hotline at #1-800-898-7180.

****Most of these organizations do not assist people who are detained.**

Ayuda www.ayuda.com
6925B Willow Street NW, Washington, DC 20012
(202) 387-4848
2755 Hartland Road, Ste 100, Fails Church VA 22043
(703) 444-7009

Amica Center for Immigrant Rights
1025 Connecticut Ave. , NW, Suite 701, Washington, DC 20036
Immigrants who are detained and at risk of deportation may qualify for free services. We provide services to residents of DC & Maryland (regardless of where they are detained) and to individuals detained at the Virgina Detention Facilities (regardless of where they are from). To get help, complete the on-line form at www.amicacenter.org/get-help/
We do not accept walk-ins.

CARECEN (Central American Resource Center)
http://www.carecendc.org/
1460 Columbia Rd. NW, Suite C-1 -Washington, D.C. 20009
(202) 328-9799 Walk-ins Mon 9:00-11:00AM, Tues 1:00-3:00PM

Catholic Charities of the Archdiocese of Washington Immigration Legal Services
http://www.catholiccharitiesdc.org/ILS
To schedule a virtual immigration legal consultation, call the Intake Call Center at 240-858-0958 on Mondays from 1-5 p.m., Tuesdays or Thursdays from 9 a.m. to 1 p.m., or on Wednesdays from 3-7 p.m. or use the following link to schedule a consultation https://www.catholiccharitiesdc.org/ils-schedule-a-legal-consultation

Catholic Charities of Baltimore
Esperanza Center http://www.catholiccharities-md.org/immigrants/

DC Affordable Law Firm https://www.dcaffordablelaw.org/
PHONE: (202) 844-5430
EMAIL: INFO@DCAFFORDABLELAW.ORG

Hogar Immigrant Services Catholic Charities of the Diocese of Arlington
http://www.hogarimmigrantservices.org/
6201 Leesburg Pike, Suite 307, Falls Church, VA 22044 (703) 534-9805

Immigration Rapid Response Hotline Virginia Network: VA (855)AYU-DAR1 or (855)298-3271
Just Neighbors https://www.iustneighbors.org/
5827 Columbia Pike Suite 320, Falls Church, VA 22041
1141 Eldon Street, Suite 200, Herndon, VA 20170 (703) 979-1240 Call Tuesday-Friday 9am-5pm

KIND (Kids in Need of Defense) https://supportkind.org/
(202) 824-8680 Unaccompanied minors ONLY, NO Walk-ins

Legal Aid Justice Center https://www.justice4all.org/
6400 Arlington Blvd., Ste 600, Falls Church VA 22042 - (703) 778-3450
Charlottesville - (434) 977-0553 Petersburg - (804) 862-2205 Richmond - (804) 643-1086

Northern Virginia Family Services https://www.nvfs.org/
6400 Arlington Blvd, Ste 110, Falls Church, VA 22042 (571) 748-2806 Call to schedule consult

Whitman-Walker Clinic Legal Services https://www.whitman-waiker.org/
1701 14th Street, NW, Washington, DC 20009 - (202) 939-7627
-LGBTQ/HIV+ cases, call for availability

Local Family Law Legal Services Organizations That May Be Able To Help

Asian Pacific American Legal Resource Center
1627 K Street NW, Suite 610
Washington, D.C. 20006
Phone: (202) 706-7150 - Fax: (202) 315-0375
http://www.apalrc.org/ Helpline: 202-393-3572

Bread for the City
1525 Seventh Street, NW Washington, DC 20001
Northwest Center: 202-265-2400 http://www.breadforthecity.org/

1640 Good Hope Road, SE Washington, DC 20020
Southeast Center: 202-561-8587 http://www.breadforthecity.org/

Catholic Charities Legal Network: 924 G St., NW Washington, DC 20001
Phone: (202) 350-4365; In Spanish: (202) 772-4325
Telephone Intake Hours: Monday, Tuesday, and Friday 9:30am - 12pm, 2pm-4:30pm; Wednesday and Thursday 9:30am - 12pm, 2pm - 7:30pm
https://www.catholiccharitiesdc.org/legal-aid

Catholic University (Clinics and Columbus Community Legal Services)
Phone: (202)319-6788
http://www.law.edU/CCLS/index.cfm#CCLS-home

Family Law Assistance Network (FLAN)
Phone: **(202) 844-5428** or email: **FLANReferrals@dcaffordablelaw.org**.

DC Affordable Law Firm
https://www.dcaffordablelaw.org/
PHONE: (202) 844-5430
EMAIL: INFO@DCAFFORDABLELAW.ORG
DC Bar Advice and Referral Clinic
Hours: 2nd Saturday of every month from 10am - 12pm
Locations: Bread for the City Northwest Center -1525 7th Street NW; Bread for the City Southeast Center- 1640 Good Hope Road SE -Phone: 202-626-3499 ext. 3 https://www.dcbar.org/for-the-pLiblic/help-for-individuals/advice.cfm

Legal Aid Society
1331 H St, NW#350
Washington, DC 20005
(202)628-1161
www.legalaiddc.org

Consulate Information

Bolivia - Consulado General def Estado Plurinacional de Bolivia
Dirección: 1825 Connecticut Avenue N.W. Suite 200C, Washington, DC 20009
Tel: (202) 232-4827 / 4828 Fax: (202) 232-8017
Horarios: Lunes a Viernes de 9:00am - 3:00pm

Colombia - Embajada y Consu/ado de Colombia
Dirección: 1724 Massachusetts Ave NW, Washington, DC 20036
Tel: (202) 387-8338 Atenci6n al ciudadano: Linea gratuita en EEUU: 18887643326
Horario: Lunes a viernes de 9:00am a 3:00pm

Ecuador - Consulado General de/ Ecuador en Washington, DC
Dirección: 2535 15th St NW, Washington, DC 20009
Tel: (202) 234-7166
Horario: Lunes a viernes de 9am a 3pm

El Salvador - Embajada de El Salvador
Dirección: 1400 16th Street, Suite 100, N.W., Washington D.C. 20036
Tel: 202-595-7500 Horario: Lunes a Viernes de 9:30 am a 5:30 pm.

Consulado - -General de El Salvador en Washington, DC
Dirección: 926 Philadelphia Ave, Silver Spring, MD 20910
Tel: 202-337-4032
Horario: Lunes a viernes de 7:00am a 3:30pm

Oficina de Asistencia Legal Migratoria
Dirección: 1400 16th Street, Suite 100, N.W., Washington D.C. 20036
Tel: 202-387-4766 e-mail: correo@elsalvador.org

Eritrea - Embassy of Eritrea
Address: 1708 New Hampshire Ave NW, Washington, DC 20009
Tel: (202) 319-1991
Hours: Monday to Friday from 9am to 4pm

Ethiopia - Embassy of Ethiopia in Washington, DC
Address: 3506 International Dr. NW, Washington, DC 20008
Tel: (202) 364-1200 Fax: (202)
Hours: Monday to Friday from 9am to 5 pm.
E-mail:ethiopia@ethiopianembassy.orgwww.ethiopianembassy.org

Ghana - Embassy of Ghana at Washington, DC
Address: 3512 International Dr. NW, Washington, DC 20008
Tel: (202) 686-4520
Hours: Monday to Friday from 9am to 3pm
http://www.qhanaembassy.org/

Guatemala - Embajada de Guatemala en Washington, DC
Dirección: 2220 R St NW, Washington, DC 20008
Tel: (202) 745-4953
Horario: Lunes a viernes de 9am a 5pm

Consulado - General de Guatemala
Dirección: 8124 Georgia Ave, Silver Spring, MD 20910
Tel: (240) 485-5050
Horario: Lunes a viernes de 8am a 2 pm

Honduras - Consulado General de Honduras en Washington, DC
Dirección: 1014 M St NW, Washington, DC 20001
Tel: 202-525-4001
Horario: Lunes a Viernes de 9am a 3pm

Mexico - Embassy of Mexico in Washington, DC
Dirección: 1911 Pennsylvania Ave NW, Washington, DC 20006
Tel: (202) 728-1600
Horario: Lunes a Viernes de 9:00 am a 18:00 pm
E-mail: mexembusa@sre.gob.mx
https://embamex2.sre.gob.mx/eua/index.php/es/

Sección Consular de la Embaiada de Mexico en EUA
Dirección: 1250 23rd St NW Washington, DC
Tel: 202-736-1000
Horario: Lunes a Viernes de 8:30am a 2:30 pm

Centro de lnformacion y Asistencia a Mexicanos Unea de informaci6n que opera las 24
horas del dia. Desde Estados Unidos sin costo al 18554636395
Desde Mexico llama de larga distancia al 0015206237874

Nicaragua - Embajada de Nicaragua en Washington, DC
Dirección: 1627 New Hampshire Ave NW, Washington, DC 20009
Tel: (240) 485-5050
Oscar Samora (general consulate): (202) 939- 6531
Horario: Lunes a viernes de 9am a 1pm

Nigeria - Embassy of Nigeria
Address: 3519 International Ct NW, Washington, DC 20008
Tel: (202) 986-8400
Hours: Monday to Friday from 9am to 6pm

Perú - Embajada de Peru en Washington, DC
Dirección: 1700 Massachusetts Ave NW, Washington, DC 20036
Tel: (202) 833-9860 Fax: (202) 659-8124
mail to: OIGITALDIPLOMACY@EMBASSYOFPERU.US
https://www.embassyofperu.org/

Consulado - General def Peru en Washington, DC
Dirección: 1225 23rd St. NW, Washington, DC 20037
Tel: 202-774-5450 Tel de emergencia: 202-230-9992
Horario: Lunes a viernes de 8:30 am a 13:00 pm.

Se atenderan los primeros 100 tramites de 8:30 am a 12:00pm de los siguientes sabados: Enero 28, Febrero 25, Marzo 18, Abril 22, Mayo 20, Junia 17, Julio 15, Agosto 19, Septiembre 16, Octubre 21, Noviembre 18, Diciembre 16.

CERTIFICATE OF TRANSLATION

I, _____, am competent to translate from _____ (language) into English, and I certify that my translation of the _____(document name) on _____ (date), is true and accurate to the best of my abilities.

_____

(signature of translator)

_____

(typed/printed name of translator)

_____

(address of translator)

_____

(telephone number of translator)

Know Your Rights Resources

We Have Rights (Videos in English, Spanish, Korean, Russian, Mandarin, Haitian Creole, Arabic and Urdu)

Know Your Rights with ICE - Immigrant Defense Project (Informational flyers in 16 languages)

https://wearecasa.org/know-your-rights (Comic book style presentation in English and Spanish)

https://www.ilrc.org/red-cards-tarjetas-rojas (Wallet-size cards KYR cards that can also be handed to ICE when asserting the right to remain silent. Available in 16 languages.)

https://readytostay.org/es/find-help?zip=20006&page=1 (How to find legal help near you in English and Spanish.)

https://www.dcmigrantmutualaid.org/?link_id=7&can_id=f7ed49fd400a1a5d7463b73b38e42e96&source=email-linea-de-emergencia-ice-ice-emergency-hotline-3&email_referrer=email_2588547&email_subject=l_nea-de-emergencia-ice-ice-emergency-hotline (Link to Mutual Aid Support Groups in the DMV and to the ICE Hotline to report ICE activity and to find out about available resources if your loved one is detained.)

https://www.nilc.org/resources/a-guide-for-employers-what-to-do-if-immigration-comes-to-your-workplace/

Summary report: **Litera Compare for Word 11.9.1.1 Document comparison done on 1/26/2025 4:05:14 PM**	
Style name: Default Style	
Intelligent Table Comparison: Active	
Original filename: 2025 DC_Immigrant_Parents_Rights_Guide 1.26.25 (1).docx	
Modified filename: 2025 DC_Immigrant_Parents_Rights_Guide 1.26.25)MD.docx	
Changes:	
Add	18
~~Delete~~	19
~~Move From~~	0
Move To	0
Table Insert	0
~~Table Delete~~	0
Table moves to	0
~~Table moves from~~	0
Embedded Graphics (Visio, ChemDraw, Images etc.)	0
Embedded Excel	0
Format changes	0
Total Changes:	37