# ELENA MARIA KARENEVA

ATTORNEY AT LAW
IMMIGRATION PRACTICE

# KARENEVA LAW FIRM, PLLC

MEMBER, STATE BAR OF TEXAS MEMBER, AMERICAN IMMIGRATION LAWYERS ASSOCIATION (AILA) MEMBER, TEXAS CHAPTER – AILA.

1314 EAST BELT LINE RD. CARROLLTON, TEXAS 75006 (972) 446-8884 (972) 446-6344 FAX WWW.KARENEVALAW.COM <u>EKARENEVA@KARENEVALAW.COM</u> LEGAL ADVISOR TO MEXICAN CONSULATE GENERAL, DALLAS

# CONTRACTUAL AGREEMENT FOR LEGAL SERVICES

The undersigned, hereafter called "Client," by execution of this Agreement has this day employed Elena P. Kareneva, Attorney at Law, hereinafter called "Attorney," to represent Client. By execution of this agreement, Client also appoints Attorney as its agent and lawful attorney-in-fact in connection with this matter. This contract containing the price offer for the listed services herein is open and available to Client for thirty (30) days of the date listed on this contract. If Client does not execute the proposal within such period of time, this offer is null and void.

**RETAINER.** The flat fee for this legal service is \$\\$\\$1,500.00\$, which includes the preparation of the appropriate documents and all correspondence and communications connected with such process. Representation does not commence and this agreement is not binding on either side until this retainer is paid. Responsibility to provide legal services will be accepted and work will begin when Attorney receives the retainer. Any fees paid to our office for legal services are *non-refundable*. (Client's initials).

# PREPARATION AND FILING OF DACA FOR:

## **ADDITIONAL FEES/EXPENSES:**

- USCIS Fee (DACA and Work Permit): \$ 495.00 (Money Order or Personal Check)
- Administrative Costs: \$ 100.00
- Translation of Birth Certificate from Spanish into English: \$ 30.00

| MISCELLANEOUS. Client hereby acknowled promises, assurances or guarantees as to the outcome any other matter except to act in a competent, legal represent the best interest of the Client, and to Attorney-Client relationship under applicable rule | ome and/or timeframe of this or<br>al, ethical, and honest manner, to<br>maintain confidentiality of the |
|---|--|
| It is the Client's responsibility to provide all t case, and to fill up accurately and completely all the case. This contract does not cover any AII procedures with the USCIS nor any resubmission error or to the error of USCIS service.           | the questionnaires necessary for<br>A Request nor any follow-up<br>as of paperwork due to Client's       |
| Client has read this Agreement and agrees to estated in it (Client's initials).   | each of the terms and conditions   |
| ATTORNEY  | DATE   |
|   | DATE   |
| SIGNED AND ACCEPTED this day of   |  |
| CLIENT  |  |

# LISTA DE DOCUMENTOS NECESARIOS PARA LA ACCION DIFERIDA/ LIST OF DOCUMENTS TO APPLY FOR THE DEFERRED ACTION

| Nombre / Nan                      | ne:                           |   |                                      |
|-----------------------------------|-------------------------------|---|--------------------------------------|
| *                                 | Acta de Nacimi                | ento / Birth Certificate                            |                                      |
|                                   | Pasaporte o M                 | atrícula / Passport or Official Photo               | o- Id                                |
|                                   | Record de la Es               | cuela / School Record (Transcript                   | or Report Cards, etc) High School    |
| 1)/                               | Record de Vacu                | ınas / Immunization Card or Medic                   | al Record                            |
|                                   | Prueba de preso               | encia en USA en Junio 15, 2012 / F                  | Proof of presence in USA             |
|                                   | on June 15 <sup>th</sup> , 20 | 12  |                                      |
|                                   | 2 fotografias tan $2-3$ ite   | naño pasaporte / Two photos passp<br>LMS PEV YEAV ( | oort-style<br>QS PROOF               |
| ESCOLARIDAD                       | D / EDUCATION S               | TATUS   |                                      |
| ¿Actualmente e                    | stá estudiando / Ai           | re you currently studying? Si / Yes                 | S No                                 |
| ¿Qué grado de                     | estudios? / Grade             | Level:  |                                      |
|                                   |                               |   | (1)                                  |
|                                   |                               |   | ,                                    |
| Fecha de Gradu                    | ación / Date of Gra           | aduation:   |                                      |
| 150                               |                               |   |                                      |
| Liste entradas y                  | y salidas de USA (            |   | Junio 15, 2012 / Arrival and Departu |
| Fecha de Salida<br>Departure Date | 1                             | Fecha de Entrada / Arrival Date                     | Motivo del Viaje / Trip purpose      |
| al a                              |                               |   |                                      |
|                                   |                               |   |                                      |
| *1                                |                               |   |                                      |

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LEGAL ADVISOR TO MEXICAN

CONSULATE GENERAL, DALLAS

# **APPLICATION FOR EMPLOYMENT AUTHORIZATION**

| I am applying for:   |                            |                         |                 |                    |
|--|----------------------------|-------------------------|-----------------|--------------------|
| ☐ Permission to accept employme                            | ent.                       |                         |                 |                    |
| Replacement (of lost employment)                           | ent authorization card).   |                         |                 |                    |
| ☐ Renewal of my permission to a                            | ccept employment (attach   | previous employment a   | uthorization de | ocument).          |
| Nombre/Name:   |                            |                         |                 |                    |
|  |                            |                         |                 |                    |
| Apellido Paterno/Last Name                                 | Primer Nombre/First Na     | ne Segundo No           | mbre/Middle N   | Jame               |
| Otros nombres usados (Si es muje                           | r, proporcione su apellido | de soltera)/All Other N | ames used (Inc  | lude Maiden Name): |
| Address in the United States:<br>Street, Apartment Number/ | Ciudad/City                | Estado/State            | ZIP             | Pais/Country       |
|  |                            |                         |                 |                    |
|  |                            |                         |                 |                    |
| Fecha de nacimiento/Date of Birth                          | a .                        |                         |                 |                    |
| Mes/Dia/Año Month/Day/Year                                 |                            |                         |                 |                    |
| Lugar de Nacimiento/Country of C                           | citizenship/Nationality:   |                         |                 |                    |
| Place of Birth:  |                            |                         |                 |                    |
| Town/City  | State/Province             | Cou                     | ntry            |                    |
| Date of Birth:   |                            |                         | _               |                    |
| Month  | Day Year                   | Г                       |                 |                    |

| Gender: { } Male                    | { } Female             |         |  |
|-------------------------------------|------------------------|---------|--|
| Marital Status: Married             | Single Divorced        | Widowed |  |
| Social Security Number:             | <u>.</u>               |         | (include all numbers you have ever used, if any) |
|                                     |                        |         | I-94 Number (if any)                             |
| Have you ever before applie { } Yes |                        |         |  |
| Which USCIS office?                 |                        |         | Date:  |
| Results (Granted or Denied -        | - attach all documents | )       | Month/Day/Year                                   |
| Date of Last Entry into the U       | J.S                    |         |  |
|                                     | 141011U1/13av/11cai    |         |  |
|                                     |                        |         |  |
| Current Immigration Status (        | Visitor, Student etc.) |         |  |
| telephone                           |                        |         |  |
| email:                              |                        |         |  |

# ALL of your addresses since your arrival to the United States:

| Curre          | nt Addre | <u>ss:</u> |                   |         |       |          |       |             |         |
|----------------|----------|------------|-------------------|---------|-------|----------|-------|-------------|---------|
| 1              | _        |            | Street Number an  | d Namo  |       |          |       | Apt#        |         |
|                |          |            |                   |         |       |          |       |             |         |
|                | City     |            | State             | 0       |       | ZIP Code |       |             | Country |
| From: _        | Month    | Day        | <br>Year          | To:     | Month | Day      | Year  | _           |         |
|                | WOITH    | Day        | Teal              |         | WORL  | Day      | 1 Gai |             |         |
| Previo         | ous Addr | esses:     |                   |         |       |          |       |             |         |
| 2              |          |            |                   |         |       |          |       |             |         |
|                |          |            | Street Number an  | d Name  |       |          |       | Apt#        |         |
|                | City     |            | State             |         |       | ZIP Code |       |             | Country |
|                |          |            |                   |         |       |          |       |             |         |
| From: _        | Month    | Day        | Year              | To:     | Month | Day      | Year  | <del></del> |         |
|                |          |            |                   |         |       |          |       |             |         |
| 3              |          |            | Street Number an  | d Name  |       |          |       | Apt#        |         |
|                |          |            |                   | a riamo |       |          |       | , .p        |         |
| -              | City     |            | State             |         |       | ZIP Code |       |             | Country |
| From:          |          |            |                   | To:     |       |          |       |             |         |
|                | Month    | Day        | Year              |         | Month | Day      | Year  |             |         |
| 4              |          |            |                   |         |       |          |       |             |         |
| -              |          |            | Street Number and | d Name  |       |          |       | Apt#        |         |
| -              | City     |            | State             |         |       | ZIP Code |       |             | Country |
| From:_         |          |            |                   | To:     |       |          |       |             |         |
|                | Month    | Day        | Year              |         | Month | Day      | Year  |             |         |
| 5              |          |            |                   |         |       |          |       |             |         |
| 2 <sup>4</sup> |          |            | Street Number and | Name    |       |          |       | Apt#        |         |
| -              | City     |            | State             |         |       | ZIP Code |       |             | Country |
| From: _        |          |            |                   | To:     |       |          |       |             |         |
|                | Month    | Day        | Year              |         | Month | Day      | Year  |             |         |

<sup>\*</sup>If you need more space, please use another sheet of paper to include the rest of your addresses.

Please answer the following questions:

Por favor, conteste a las siguientes preguntas:

|  | Yes/Si | No |
|--|--------|----|
| Have you <b>EVER</b> been arrested for, charged with, or convicted of a felony or misdemeanor,           |        |    |
| including accidents handled in juvenile court, in the United States? Do not include minor traffic        |        |    |
| violations unless they were alcohol or drug-related.   |        |    |
| ¿Alguna vez ha sido arrestado por, acusado o condenado por un delito grave o un delito menor,            |        |    |
| incluyendo accidentes manejados en un tribunal de menores, en los Estados Unidos? No incluya             |        |    |
| infracciones de tráfico menores a menos que estén relacionadas con el alcohol o la droga.                |        |    |
| influencia de tranco menores a menos que esten relacionadas con el alconor o la droga.                   | 1      |    |
| If you answered "Yes," you must include a certified court disposition, arrest record, charging           |        |    |
|  |        |    |
| document, sentencing record, etc., for each arrest, unless disclosure is prohibited under state          |        |    |
| law.   |        |    |
| Si respondió "Sí," debe incluir una disposición judicial certificada, registro de arresto,               |        |    |
| documento de cargo, registro de sentencia, etc., por cada arresto, a menos que la ley estatal            |        |    |
| prohíba su divulgación.  |        |    |
| Have you EVER been arrested for, charged with, or convicted of a crime in any country other than         |        |    |
| the United States?   |        |    |
| ¿Alguna vez ha sido arrestado por, acusado o condenado por un crimen en cualquier país que no sea        |        |    |
| los Estados Unidos?  |        |    |
| loo admitted of made.  |        |    |
| If you answered "Yes," you must include a certified court disposition arrest record, charging            |        |    |
|  |        |    |
| document, sentencing record, etc., for each arrest.  |        |    |
| Si respondió "Sí," debe incluir una disposición judicial certificada, registro de arresto,               |        |    |
| documento de cargo, registro de sentencia, etc., por cada arresto.                                       |        |    |
| Have you EVER engaged in, do you continue to engage in, or plan to engage in terrorist activities?       |        |    |
| ¿Alguna vez ha participado, continúa participando o planea participar en actividades terroristas?        |        |    |
| Are you NOW or have you EVER been a member of a gang?  |        |    |
| ¿Ahora es o alguna vez ha sido miembro de una pandilla?  |        |    |
| Have you <b>EVER</b> engaged in, ordered, incited, assisted, or otherwise participated in acts involving |        |    |
| torture, genocide, or human trafficking?   |        |    |
| ¿Alguna vez ha participado, ordenado, incitado, asistido o participado de otro modo en actos             |        |    |
| relacionados con la tortura, el genocidio o el tráfico de personas?                                      |        |    |
| Have you EVER engaged in, ordered, incited, assisted, or otherwise participated in killing any           |        |    |
| person?  |        |    |
| •  |        |    |
| ¿Alguna vez ha participado en, ordenado, incitado, asistido, o de otra manera participado en matar a     |        |    |
| cualquier persona?   |        |    |
| Have you EVER engaged in, ordered, incited, assisted, or otherwise participated in severely              |        |    |
| injuring any person?   |        |    |
| ¿Alguna vez ha participado en, ordenado, incitado, asistido, o de otra manera participado en herir       |        |    |
| gravemente a cualquier persona?  |        |    |
| Have you <b>EVER</b> engaged in, ordered, incited, assisted, or otherwise participated in any kind of    |        |    |
| sexual contact or relations with any person who was being forced or threatened?                          |        |    |
| ¿Alguna vez ha participado, ordenado, incitado, asistido, o participado en cualquier tipo de contacto    |        |    |
| sexual o relaciones con cualquier persona que fue forzada o amenazada?                                   |        |    |
| Have you EVER recruited, enlisted, conscripted, or used any person to serve in or help an armed          |        |    |
| force or group while such person was under age 15?   |        |    |
|  |        |    |
| ¿Alguna vez ha reclutado, alistado, o utilizado a cualquier persona para servir o ayudar a una fuerza    |        |    |
| armada o grupo mientras esa persona era menor de 15 años?  |        |    |
| Have you <b>EVER</b> used any person under age 15 to take part in hostilities, or to help or provide     |        |    |
| services to people in combat?  |        |    |
| ¿Alguna vez ha usado alguna persona menor de 15 años para participar en hostilidades, o para             |        |    |
| ayudar o proporcionar servicios a personas en combate?   |        |    |

| Date: Signature: |  |
|------------------|--|
| Date: Signature: |  |

| Processing Information        | on.          |                |
|-------------------------------|--------------|----------------|
| Ethnicity (Select only        | one box)     |                |
| Hispanic or Latino            |              |                |
| Not Hispanic or L             | atino        |                |
|                               |              |                |
| Race (select all applic       | able boxes   | 5)             |
| White                         |              |                |
| Asian                         |              |                |
| Black or African A            | American     |                |
| American Indian               | or Alaska na | ative          |
| Native Hawaiian               | or other pac | cific islander |
|                               |              |                |
| Height                        |              | feet Inches    |
| Weight                        |              |                |
|                               |              | Pounds         |
|                               |              |                |
| Eye Color (select <b>only</b> | one box)     |                |
| Black                         | blue         | brown          |
| Gray                          | Green        | hazel          |
| ☐ Maroon ☐                    | nink         | Unknown/Other  |

# Hair color (select only one box) Band (No hair) Black Blond Red Sandy White Unknown/other I have been continuously residing in the U.S. Since at least June 15. 2007. Up to the present time. Yes No