

# CONSULTATION REQUEST FORM

Date Requested:

## Refugee Services of Texas (RST)

Return completed form by:

email: [mhinostroza@rstx.org](mailto:mhinostroza@rstx.org)

fax: (512) 377-2233

mail: PO Box 14561, Austin, TX 78761

in person: 500 E St. Johns Ave., #1.280, Austin, TX 78752

- Please fill out this form completely. If you do not know the answer to a question, please write "I don't know."
  - Return the completed form to RST for review.
  - Interpreters will not be provided, please include the contact information for an interpreter if necessary.
  - RST will contact you to let you know whether your request for a consultation has been accepted or declined within **4-8 weeks**.
  - A consultation is just a first step for us to decide whether we can assist you with your case.
- All of your information is confidential and will not be shared with anyone, including immigration.
  - If we do not accept you for a consultation, this form will be destroyed.

**FULL NAME OF PERSON NEEDING HELP:**

**DATE OF BIRTH:**

**COUNTRY OF BIRTH:**

**CURRENT IMMIGRATION STATUS?**  U.S. Citizen  Permanent Resident  Other:

**HAVE THEY BEEN A CLIENT OF IMMIGRATION PRGM BEFORE?**

**PHONE NUMBER:**

**EMAIL:**

**WHAT LANGUAGES DO THEY SPEAK?**  English  Spanish  Other:

**ARE THEY CURRENTLY REQUIRED TO GO TO IMMIGRATION COURT?**  YES  NO

**DO YOU OWE ANY TAXES TO THE IRS?**  YES  NO

**PLEASE DESCRIBE THE IMMIGRATION QUESTION OR PROBLEM THEY NEED HELP WITH:**

**HAVE THEY BEEN ARRESTED (HANDCUFFED) OR RECEIVED A TICKET?**  YES (If yes, please explain below)  NO

| Date of Arrest: | City/Country of Arrest: | Reason for Arrest: |
|-----------------|-------------------------|--------------------|
|                 |                         |                    |

**Are they (circle one):**    Single                      Legally Married                      Divorced                      Separated                      Widowed

**Please List Names / Country of Birth / Immigration Status of Family Members:**

Spouse:

Child 1:

Child 2:

Child 3:

**Date Requested:**

Child 4:

Child 5:

**\*Please attach additional sheet if extra space is needed.**

**Will any family members be applying with them? If so, whom?**