## DEPARTMENT OF HOMELAND SECURITY (DHS)

## REQUEST FOR VOLUNTARY NOTIFICATION OF RELEASE OF SUSPECTED PRIORITY ALIEN

Subject ID: Event #:			File No: Date:
TO: (Name and Title of Institution - OR Any Subsequ Enforcement Agency)	uent Law	FROM: (DHS Offic	e Address)
Name of Subject:			
Date of Birth: S	uspected Citizensh	ip:	Sex:
1. DHS SUSPECTS THAT THE SUBJECT ENFORCEMENT PRIORITY BECAUSE HI			
has engaged in or is suspected of terrorism or espionage, or otherwise poses a danger to national security;			
□ has been convicted of an offense of which an element was active participation in a criminal street gang, as defined in 18 U.S.C. § 521(a), or is at least 16 years old and intentionally participated in an organized criminal gang to further its illegal activities;			
□ has been convicted of an offense classified as a felony, other than a state or local offense for which an essential element was the alien's immigration status;			
□ has been convicted of an aggravated felony, as defined under 8 U.S.C. § 1101(a)(43) at the time of conviction;			
☐ has been convicted of a "significant misdemeanor," as defined under DHS policy; and/or			
□ has been convicted of 3 or more misdemeanors, not including minor traffic offenses and state or local offenses for which immigration status was an essential element, provided the offenses arise out of 3 separate incidents.			
2. DHS TRANSFERRED THE SUBJECT T	O YOUR CUSTOD	Y FOR A PROCE	EDING OR INVESTIGATION.
☐ Upon completion of the proceeding or inves custody of the subject to complete processing	tigation for which the		
subject's bail, rehabilitation, parole, relea	uthorize that you de This request arises ase, diversion, cust herwise would releas toms and Border Prof	tain the subject be from DHS authorication ody classification e the subject, pleas tection (CBP) at cannot reach a DH	
Notify this office in the event of the subject's death, hospitalization or transfer to another institution.			
☐ If checked: Please disregard the notification request related to this subject previously submitted to you on (date).			
(Name and title of Immigration Officer	r)		(Signature of Immigration Officer)
<b>Notice:</b> If the subject is taken into DHS custody, crime, or if you want the subject to remain in the Support Center at (802) 872-6020. You may also	United States for a I	aw enforcement pu	
TO BE COMPLETED BY THE LAW ENFOR	CEMENT AGENCY	CURRENTLY HO	OLDING THE SUBJECT OF THIS NOTICE:
Please provide the information below, sign, and	return to DHS by ma	iling, emailing, or fa	axing a copy to
Local Booking/Inmate #: Est. relea	ase date/time:	Date of	f latest criminal charge/conviction:
Latest offense charged/convicted:			
(Name and title of Officer)		-	(Signature of Officer)