Hartford Public Library: Immigration Services
Contact:  Email immigration@hplct.org  Tel. (860) 695-6337

CLIENT INFORMATION:  LAST NAME _____________________________
FIRST NAME _____________________________
PHONE NUMBER _____________________________
EMAIL _____________________________

Applicant:
- 2 Passport Photos (Within 30 days of applying, may be taken on-site)
- Height _________
- Birth Certificate
- Green Card
- Proof of living with the parent (e.g. doctor’s letter, school record/letter, taxes)

Applicant’s Parent Information
- Marriage Certificate (s)
- Marriage Termination (if applicable) - Certified divorce decree, death certificate, or annulment document.
- Proof of U.S. Citizenship
- Budget Sheet (if applying for a fee waiver*)

*Fee waiver applicants: Your eligibility for a fee waiver depends on your income and/or level of benefits which may include: SNAP, Section 8, cash assistance, and Medicaid.

Appointment scheduled with _____________________________
Appointment Date _____________ Day _____________ Time _____________
Staff Initials: _________
NOTES: