



Family Preparedness Plan¹

Thank you very much to the Immigrant Legal Resource Center (ILRC) for giving us permission to make this plan available to Rhode Island residents with Rhode Island-specific information.

Every family should have a Family Preparedness Plan. While it is our hope that you never have to use your plan, it is a good practice to have one in place to help reduce the stress of the unexpected. This packet will help everyone create a Family Preparedness Plan, regardless of immigration status. However, because of the additional challenges immigrant and mixed status families face, we also have additional advice for immigrants.

➔ Find Out About Your Immigration Options

Information and resources to find good immigration legal help is included in this packet.

Do what you can now to protect you and your family in the United States.

- If you have a green card, find out if you can become a U.S. citizen.
- If you are here on a visa, find out if you can get a green card.
- If you do not have immigration status, find out if you may be eligible to get a green card, visa or work permit.
- If you have a criminal arrest or conviction, find out how it might affect your situation, or if there is a way to erase it from your record.
- If you are detained or put into deportation proceedings, ask for a hearing in front of a judge to get out of detention and to fight your deportation.

Find a local, nonprofit legal services organization that can help you find out if there is an immigration option for you to get a green card, work permit or visa, or protect you from deportation. Also, keep a list of these local organizations in case you ever have a problem with ICE. These organizations have attorneys who may be able to help you.

Find a Legal Services Provider

Dorcas International Institute of Rhode Island
(401) 784-8600

Progreso Latino
(401) 728-5920

¹ These materials are provided for general informational purposes only, do not constitute legal advice, and are not guaranteed to be complete or up-to-date.

Catholic Immigrant and Refugee Services (Rhode Island)
(401) 421.7833 ext.229

Rhode Island Bar Association Lawyer Referral
(401) 421-7799 or 521-5040

Warning! Protect Yourself from Fraud!

Only a licensed attorney or accredited representative is authorized and qualified to assist you with your immigration case. Do not hire anyone who:

- Refuses to give you a written contract;
- Charges you for blank immigration forms;
- Promises you a good result because of their special contacts at Immigration;
- Pretends to be a qualified lawyer or bonded immigration consultant;
- Asks you to lie on a form or sign a blank document; or
- Charges you to “get on a waiting list” or “put your application in line.” There is no list. There is no line.

If you suspect fraud, report it to your consulate or the police, or contact the Federal Trade Commission to file a complaint in English or Spanish at 877-FTC-HELP (877-382-4357). Visit Stop Notario Fraud for more information and resources: <http://www.stopnotariofraud.org/>

➔ Know Your Rights

Everyone – both documented and undocumented persons – has rights in this country. Make sure you, your family members (even children), housemates, neighbors, and co-workers, regardless of their immigration status, know of their right to remain silent and all of their other rights if ICE or the police come to your home, neighborhood or workplace. A list of these rights, and a card asserting these rights, are included in this packet.

**Remain calm and do not try to run away.
If you do, ICE or the police may use that against you.**

Everyone – both documented and undocumented persons – has rights in this country. Talk to everyone in your family (including children) and household to make sure they all know what to do if approached by immigration officials (ICE) or if immigration officials (ICE) come to your house.

➔ ICE at Your Door

Do not open the door for ICE or any police officer without a signed warrant. You do not need to open the door unless an ICE agent can show you a warrant signed by a judge with your specific and correct name and address on it. If ICE knocks on your door, ask them to slide the search warrant under the door or through a window. Make sure the warrant is signed by a judge and has your name and address on it. If ICE or the police do not have this, then you do not have to open the door. Once you open the door, you lose certain rights.

Keep a Know Your Rights red card on you and by your door at all times. You can slide it under the door to ICE – it explains your rights and that you do not have to open the door. Have your children and other family members practice sliding it under the door.

<p>I do not wish to speak with you, answer your questions, or sign or hand you any documents based on my 5th Amendment rights under the United States Constitution.</p> <p>I do not give you permission to enter my home based on my 4th Amendment rights under the United States Constitution unless you have a warrant to enter, signed by a judge or magistrate with my name on it that you slide under the door. I do not give you permission to search any of my belongings based on my 4th Amendment rights.</p> <p>I choose to exercise my constitutional rights.</p> <p><i>These cards are available to citizens and noncitizens alike.</i></p>	<p>Usted tiene derechos constitucionales:</p> <ul style="list-style-type: none"> • NO ABRA LA PUERTA SI UN AGENTE DEL SERVICIO DE INMIGRACION ESTA TOCANDO A LA PUERTA. • NO CONTESTE NINGUNA PREGUNTA DEL AGENTE DEL SERVICIO DE INMIGRACION SI EL TRATA DE HABLAR CON USTED. Usted tiene derecho a mantenerse callado. No tiene que dar su nombre al agente. Si está en el trabajo, pregunte al agente si está libre para salir y si el agente dice que sí, váyase. Usted tiene derecho de hablar con un abogado. • NO FIRME NADA SIN HABLAR CON UN ABOGADO. • ENTREGUE ESTA TARJETA AL AGENTE. NO ABRA LA PUERTA.
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➔ Talking to ICE

You do not have to talk to ICE or answer their questions. **You have the right to remain silent.** You can refuse to speak to an ICE agent. Do not answer any questions, especially about your birth place, immigration status or how you entered the United States. Do not give them any personal information about yourself or anyone in your family. Say that you want to remain silent until you speak with a lawyer. Have your children and others in your family practice saying “No” to ICE.

You have the right to refuse to sign anything before you talk to a lawyer. Do not sign anything you do not understand and agree with. That could eliminate your right to speak with a lawyer or have a hearing in front of an immigration judge. This may result in you being deported immediately without a hearing.

Ask to speak with your lawyer and to go before the immigration judge. **You have the right to speak to a lawyer and the right to make a phone call.** Make sure to carry the phone number for an immigration lawyer with you at all times.

➔ Other Resources

Your Country’s Consulate

Have the contact information for your country’s nearest consulate. Many consulates have an emergency number for cases where you need immediate assistance from the consulate. Have that number written down in case ICE detains you.

Know Your Rights Materials and Other Resources

There are a lot of resources available to teach you about your rights. Below are just a few places to start looking if you want to learn more about immigration law.

- **Informed Immigrant:** <https://www.informedimmigrant.com/>
- **Immigrant Legal Resource Center (ILRC):** <https://www.ilrc.org/community-resources>
- **National Immigration Law Center (NILC):** <https://www.nilc.org/get-involved/community-education-resources/know-your-rights/>

Documents You Should and Should Not Carry With You

- At all times, carry a valid work permit or green card, if you have one. If you do not have one, generally it is advisable to carry a municipal ID, state ID or driver's license if it was issued in the United States and contains no information at all about your immigration status or your country of origin. Ask a local immigration advocate about what kind of documents are safe to carry in your area.
- At all times, carry a red card to exercise your right to remain silent in case you are stopped or interrogated by ICE or police officers.
- At all times, carry the telephone number of an immigration lawyer, advocate or nonprofit immigration legal services provider you will call in an emergency.
- Do not carry any documentation about your country of origin.
- Do not carry any false identity documents or false immigration documents.

➔ Make a Plan for Your Child(ren)

Have a plan so that a trusted adult can care for your child if you cannot. This plan should include emergency numbers, a list of important contact information, specific legal authorization documents for the care of your child(ren) and a file with important documents. This packet includes templates to put together these documents.

➔ Talk to Your Children About Your Plan

Without worrying them, assure your children that they will be taken care of if for some reason you are unable to care for them, even for a short period of time. Let them know who will care for them if you are unable to.

➔ Decide Who Can Care for Your Children if You Are Unable To

Talk to the people you would want to care for your children if you are unable to and make sure they know they will be listed as emergency contacts. Memorize their phone numbers and have your children memorize the phone numbers too.

Make sure your children know who can pick them from up school, who cannot pick them up from school, and who will care for them. Make sure you add the names of the emergency contacts to your school's list of adults authorized to pick up your children.

Your child's school may only release your child to adults you designate. Therefore, make sure to regularly update all school, afterschool, day care, summer camp, and other programs' emergency contact sheets and

release forms to include the names of those who can and cannot pick up your children. If you have a restraining order against anyone, make sure to give a copy of it to the school.

Make sure the people who can pick up and care for your children are up to date on your child's location and school.

➔ **Write Down Instructions if Your Child Has Any Medical Conditions and /or Takes Any Medications**

Make sure to write down any medical conditions or allergies your child has, any medications that your child takes, as well as doctor and health insurance information. Keep a copy of this information in your important documents file. Give a copy to your child's school and the adult you designate to care for your children. Let your child know where to find this information if you are not around.

➔ **Complete Caregiver Authorization Forms Included in this Packet (See "RI Forms" section at the end of this packet)**

The following authorization forms will provide evidence of your wishes as they relate to the care of your child or children if you can no longer care for them. It is advisable to complete these forms with an attorney, if possible. All forms are attached at the end of this packet.

- 1) Parental Authorization/Appointment of Guardian
- 2) Authorization for Release of Educational Records and Appointment of Guardian
- 3) Power of Attorney for Healthcare

➔ **Make Sure Your Children All Have Passports**

If your child was born in the United States, visit www.travel.state.gov for more information on obtaining a U.S. passport.

If your child was born in your home country, check with your embassy or consulate for more information on obtaining a passport.

➔ **Inform Your Family and Emergency Contacts About How to Find You if You Are Detained by ICE**

Family members can use the ICE detainee locator: <https://locator.ice.gov/odls/homePage.do>. Be sure your family and emergency contacts have a copy of your A-Number (your alien registration number found on your immigration documents from ICE) if you have one.

Want to Do Even More?

You can also **register your child's birth** with your country's government (for example, with your country's consulate) if your child was born in the United States. This may grant your child benefits, including citizenship in your home country in some cases.

Family Preparedness Important Documents Checklist

Keep these documents or a copy of these documents in a safe place. Tell your children, family members and emergency caregiver where to find this file in an emergency.

Guardianship Documentation:

- Parental Authorization/Appointment of Guardian
- Authorization for Release of Educational Records and Appointment of Guardian
- Power of Attorney for Healthcare

Other Important Documentation:

- Photo ID (driver's license, state/municipal identification card, etc.) for both parents and each child
- Birth Certificates and/or Registry of Birth for both parents and each child
- Passports for both parents and each child
- Social Security Card or ITIN number for both parents and each child
- A-Number and any immigration documents (work permit, green card, visa, etc.) for both parents and each child
- Marriage License (if applicable)
- Divorce certificate (if applicable)
- Family court orders (visitation, custody, etc., if applicable)
- Restraining Orders you/your child(ren) have against anyone (if applicable)
- Criminal papers (if applicable)
- DCYF papers (if applicable)
- Completed Important Children's Information document for each child
- Completed Emergency Numbers and Important Contact Information document

You may also include any other documents you would want to be able to find quickly.

Important Children's Information

Keep this information so those you designate to care for your children in your absence have all of the information they need.

Child's Name	
Date of Birth	
Child's Cell Phone Number (if applicable)	
School	
School Address	
School Phone Number	
Teacher's Name	
Classroom Number	
Afterschool Program	
Afterschool Program Phone Number	
Other Camp/Sports/Program	
Other Camp/Sports/Program Phone Number	
Allergies	
Medical conditions	
Medications	
Doctor's Phone Number	
Doctor's Address	
Health Insurance	

Emergency Numbers and Important Contact Information

Keep this information in one place so that you and your family can access it easily.

Family Contacts	
Mother/Parent/Guardian	
Home Phone	
Cell Phone	
Work Address	
Work Phone	
Father/Parent/Guardian	
Home Phone	
Cell Phone	
Work Address	
Work Phone	
Other Emergency Contact and Relationship	
Cell Phone	
Other Emergency Contact and Relationship	
Cell Phone	
Other Emergency Contacts and Relationship	
Cell Phone	

Miscellaneous Contacts	
Doctor	
Phone Number	
Health Insurance Company	
Policy Number	
Pediatrician	
Phone Number	
Health Insurance Company	
Policy Number	

Dentist	
Phone Number	
Dental Insurance Company	
Policy Number	
Car Make/Model	
License Plate Number	
Car Insurance Company	
Insurance Policy Number	
Phone Number	
Consulate	
Address	
Phone Number	
Attorney/Nonprofit Legal Services Provider	
Address	
Phone Number	

Rhode Island Forms

PARENTAL AUTHORIZATION/APPOINTMENT OF GUARDIAN

In the event that I/we, _____,
(parent(s) name(s))

of _____, Rhode Island, am/are, for any reason, absent or otherwise
(city)

unable to care for, or make decisions regarding, my/our child(ren),

_____,
(child's name) (child's date of birth)

_____,
(child's name) (child's date of birth)

_____,
(child's name) (child's date of birth)

_____,
(child's name) (child's date of birth)

I/we, hereby give temporary custody of my/our above-named child(ren) to

_____ of _____
(name of caregiver) (city and state)

or, if above-named caregiver is not immediately available, to

_____,
(name of alternate caregiver)

who shall, acting as custodian, be referred to as the "custodian."

I/we hereby authorize and empower the custodian to authorize and obtain medical care and treatment (whether of an emergency nature or otherwise, and whether involving surgical treatment, blood transfusions, vaccines, medication or otherwise) for my/our above-named child at any time.

I/we also authorize and empower the custodian to enroll my/our above-named child in the educational system of the city or town where the custodian resides or in any other educational institution the custodian deems advisable.

I/we make the foregoing authorizations as evidence of my/our intent that my/our above-named child obtain prompt and complete medical care in my/our absence or in the event of my/our inability to care for, or make decisions about, him/her, regardless of whether such absence or inability is only temporary or is for a

lengthy or indefinite period. In such case, I/we further authorize and empower the custodian, with full power of substitution for me/us and in my/our name(s), place, and stead, to make any and all decisions for my/our above-named child's education, welfare and well-being that I/we might or could make.

Notwithstanding the foregoing, if the need should arise during my/our lifetime for a guardian for my/our above-named child, I appoint the above-named caregiver guardian of my above-named child's person and estate, or, if the above-named caregiver fails or ceases to serve, I appoint the above-named alternate caregiver guardian. No guardian should be required to furnish any bond or surety.

This appointment may be revoked by me/us in writing but shall remain in full force and effect unless revoked or when my/our child reaches the age of majority. A photocopy of this document shall have the same effect as the original.

This *Parental Authorization/Appointment of Guardian* was read to me/us in *Spanish* if that is my/our primary language. I/we understand its contents and sign it voluntarily and without duress.

****DO NOT SIGN UNTIL YOU ARE STANDING IN FRONT OF A NOTARY****

Signature of Parent(s)

Date: _____

Print Name Parent(s)

Certificate of Notary Public

State of Rhode Island
County of _____

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____, personally known to me or proved through satisfactory evidence of identification, to be the person(s) who signed the preceding document in my presence and acknowledged to me that s/he/they signed the document voluntarily for its stated purpose.

Notary Public Signature

Print Name

My Commission Expires

AUTHORIZATION FOR RELEASE OF EDUCATIONAL RECORDS
AND APPOINTMENT OF GUARDIAN
FOR EDUCATIONAL PURPOSES

In the event that I/we, _____,
(parent(s) name(s))

whose address is _____,
(address of parent(s))

am/are, for any reason, absent or otherwise unable to care for, or make decisions regarding,

my/our child(ren), _____,
(child's name) (child's date of birth)

(child's name) (child's date of birth)

(child's name) (child's date of birth)

(child's name) (child's date of birth)

I/we, hereby authorize _____,
(name of caregiver)

whose address is _____,
(address of caregiver)

to act in my/our behalf as the guardian of my/our above-named child(ren) for education purposes. I/we expressly appoint and authorize the above-named caregiver to have authority regarding all educational decision making for my/our above-named minor child(ren); to receive all educational records; to discuss all education matters with school personnel and to make any decisions regarding educational placement, services, or rights for my/our above-named child(ren).

Educational records for purposes of this authorization for release to the above-named caregiver include, but are not limited to:

- Grades and progress reports
- Discipline records
- Evaluations and assessments
- Special education records
- Medical records including substance abuse, psychological, and HIV
- Pin and password for any parent/student internet information system
- Counseling records

- Attendance records

This release and appointment may be revoked by me/us in writing but shall remain in full force and effect unless revoked or when my/our child(ren) reaches the age of majority. A photocopy of this document shall have the same effect as the original.

This *Authorization for Release of Educational Records and Appointment of Guardian for Educational Purposes* was read to me/us in *Spanish* if that is my/our primary language. I/we understand its contents and sign it voluntarily and without duress.

****DO NOT SIGN UNTIL YOU ARE STANDING IN FRONT OF A NOTARY****

Signature of Parent(s)

Date: _____

Print Name Parent(s)

Certificate of Notary Public

State of Rhode Island
County of _____

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____, personally known to me or proved through satisfactory evidence of identification, to be the person(s) who signed the preceding document in my presence and acknowledged to me that s/he/they signed the document voluntarily for its stated purpose.

Notary Public Signature

Print Name

My Commission Expires

POWER OF ATTORNEY FOR HEALTHCARE

In the event that I/we, _____,
(parent(s) name(s))

whose address is _____,
(address of parent(s))

am/are, for any reason, absent or otherwise unable to care for, or make decisions regarding

my/our child(ren), _____,
(child's name) *(child's date of birth)*

I/we, hereby appoint _____,
(name of caregiver)

whose address is _____,
(address of caregiver)

as my/our agent for health care decision making and grant to my/our agent all power and authority regarding the medical treatment of my/our above-named child. I/we further grant my/our agent authority to make and withhold consent to any action that may be necessary to provide for the medical treatment and care of my/our above-named minor child.

This release and appointment may be revoked by me/us in writing but shall remain in full force and effect unless revoked or when my/our child reaches the age of majority. A photocopy of this document shall have the same effect as the original.

