



**EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
IMMIGRATION COURT / CHICAGO, IL**

REQUEST TO REVIEW RECORD OF PROCEEDINGS

DATE: ____/____/____

A# ____ - ____ - ____ **RIDER(S)' A#** ____ - ____ - ____

RESPONDENT'S NAME: _____

RECORD REVIEW: **Yes** ____ **No** ____

TAPE/DAR REVIEW: **Yes** ____ **No** ____

ACCESS TO CASE RECORD GRANTED BECAUSE (check one):

____ requesting party is the attorney of record (identity verified)

____ requesting party is the individual who is in proceedings (copy of identification attached)

____ attorney provided court with a signed release from the respondent (release document attached)

____ DHS (identity verified)

____ other: _____

COPY OF ITEM(S) REQUESTED:

TAPES: **Yes** ____ **No** ____

CD: **Yes** ____ **No** ____

DOCUMENTS: **Yes** ____ **No** ____

I hereby request a copy of the following items from the case file:

____ ; _____ ; _____ ; _____

REVIEWER'S NAME (PRINT) _____ **PHONE NUMBER ()** _____ - _____

REVIEWER'S SIGNATURE _____

EOIR USE ONLY:

COURT CLERK ACTION(S) TAKEN: _____

COURT CLERK (initial) _____