

**NON-DETAINED**

Address: City, State, Zip Code

(City & State of Immigration Court)

**File No.:** A Your A-number

Next Hearing: Date and Time of the Hearing  
(Date & Time)

## RESPONDENT'S PRO SE MOTION TO CHANGE HEARING FORMAT

## RESPONDENT'S PRO SE MOTION TO CHANGE HEARING FORMAT

Respondent, Your Full Name, respectfully moves this  
(Name)

Honorable Court to Change the format of their upcoming State if it is Master or Individual  
(Master Calendar/Individual)

hearing from in person to internet-based (Webex), pursuant to 8 C.F.R. § 1003.25(c). Pursuant to EOIR Director's Policy Memorandum 21-03, video teleconferencing "may be used for any immigration court hearing, particularly when operational need calls for its usage" including where necessary "to increase convenience and accessibility for respondents; to reduce travel costs; . . . [and] to ensure timely adjudication of cases." Memorandum from James R. McHenry III, EOIR Dir., PM 21-03, Immigration Court Hearings Conducted by Telephone and Video Conferencing, at 4 (Nov. 6, 2020). Moreover, video teleconferencing "increasing flexibility, allows the adjudication of cases from multiple settings without being tethered to a particular courtroom, and does not compromise the fairness of the hearing." Memorandum from Sirce E. Owen, EOIR Acting Dir., PM 25-25, Rescind and Cancel Director's Memorandum 22-07, at 1 (Mar. 14, 2025).

In support of this motion, Respondent states the following:

Explain why you are asking the court to change the format of the hearing. Give as much detail as you can. Depending on your circumstances, the reason may be:

1. You cannot afford the cost of traveling to your hearing.
2. You do not have child care for the date and time of your hearing.
3. You do not have access to transportation.
4. You cannot miss a full day of work.

Or many more.

This is your opportunity to tell the judge why the hearing should be online!

Based on the foregoing, Respondent respectfully requests that the Court grant the request for Respondent to appear remotely at his State if it is Master or Individual hearing on (Master Calendar/Individual Date and Time of the Hearing) as such format change is appropriate and practicable for all parties.

Respectfully Submitted,

Sign here  
Signature

The date you sign it  
Date

# EXHIBIT \_\_\_\_\_

Exhibits are your evidence. Use as many exhibits as you need, label the first one A, and then continue with B, C, etc.

Evidence can include:

1. A letter from your employer explaining why you cannot miss work.
2. A letter from your doctor explaining why you cannot travel.
3. A copy of your pay stubs or proof of income showing that you cannot afford to travel.

Reference your exhibits in your statement. For example, if Exhibit A is a doctor's note, write "See Exhibit A" after your explanation of why you cannot attend in person due to medical reasons.

**UNITED STATES DEPARTMENT OF JUSTICE  
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW  
IMMIGRATION COURT**

City and State of the Immigration Court

(City & State of Immigration Court)

In the Matter of: Your Full Name

File No.: A Your A-number

**ORDER OF THE IMMIGRATION JUDGE**

Upon consideration of the **Respondent's Pro Se Motion to Change Hearing Format**, it is  
HEREBY ORDERED that the motion be: ☐ **GRANTED** ☐ **DENIED** because:

- ☐ DHS does not oppose the motion.
- ☐ The respondent does not oppose the motion.
- ☐ A response to the motion has not been filed with the court.
- ☐ Good cause has been established for the motion.
- ☐ The court agrees with the reasons stated in the opposition to the motion.
- ☐ The motion is untimely per \_\_\_\_\_.
- ☐ Other: \_\_\_\_\_.

Deadlines:

- ☐ The application(s) for relief must be filed by \_\_\_\_\_.
- ☐ The respondent must comply with DHS biometrics instructions by: \_\_\_\_\_.

**LEAVE EVERYTHING ELSE BLANK**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Immigration Judge

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**Certificate of Service**

This document was served by: ☐ Mail ☐ Personal Service ☐ Electronic Service

To: ☐ Respondent ☐ Respondent's c/o Custodial Officer ☐ Respondent's Atty/Rep ☐ DHS

Date: \_\_\_\_\_

By: Court Staff \_\_\_\_\_

Name: Your Full Name

A#: Your A-number

**PROOF OF SERVICE**

On Date that you are mailing the request, I, Your Full Name,  
(Date) (Name)

served a copy of this: **RESPONDENT'S PRO SE MOTION TO CHANGE HEARING**

**FORMAT** and any attached pages to the Office of Chief Counsel, Department of Homeland

Security at the following address:

Name of the Government Attorney

Street Address and Number

City, State, Zip Code

By: Explain how you will send it, for example, "priority mail, return receipt requested"  
(Method of Delivery)

Your Signature  
Signature

The date you sign it  
Date