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**Otavio Haverroth Silva, SBN#343486**  
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**San Diego, CA 92169**  
**(510) 241-9336**

**Non-Detained**

**UNITED STATES DEPARTMENT OF JUSTICE**  
**EXECUTIVE OFFICE FOR IMMIGRATION REVIEW**  
**IMMIGRATION COURT**  
100 Montgomery St., Suite 800  
San Francisco, CA 94104

_____	)	
<b>In the Matter of</b>	)	
	)	
<b>Ana Noemy Martinez Marroquin</b>	)	<b>File No. A 244-519-908</b>
	)	
<b>In Removal Proceedings</b>	)	
_____	)	

Immigration Judge: N/A

Next Hearing Date: N/A

**RESPONDENT'S APPLICATION FOR ASYLUM AND WITHHOLDING OF  
REMOVAL – FORM I-589**



## Application for Asylum and for Withholding of Removal

Department of Homeland Security  
U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-589**  
OMB No. 1615-0067  
Expires 09/30/2027

**START HERE - Type or print in black ink. See the instructions for information about eligibility and how to complete and file this application.**

**NOTE:**  Check this box if you also want to apply for withholding of removal under the Convention Against Torture.

Part A.I. Information About You			
1. Alien Registration Number(s) (A-Number) (if any) <b>244519908</b>	2. U.S. Social Security Number (if any) <b>N/A</b>	3. USCIS Online Account Number (if any) <b>N/A</b>	
4. Complete Last Name <b>MARTINEZ MARROQUIN</b>	5. First Name <b>ANA NOEMY</b>	6. Middle Name <b>N/A</b>	
7. What other names have you used (include maiden name and aliases)? <b>N/A</b>			
8. Residence in the U.S. (where you physically reside)			
Street Number and Name <b>703 NIAN TIC AVE</b>		Apt. Number <b>N/A</b>	
City <b>DALY CITY</b>	State <b>CA</b>	Zip Code <b>94014</b>	Telephone Number <b>( 628 ) 2865030</b>
<i>(NOTE: You must be residing in the United States to submit this form.)</i>			
9. Mailing Address in the U.S. (if different than the address in Item Number 8)			
In Care Of (if applicable): <b>OTAVIO HAVERROTH SILVA</b>		Telephone Number <b>( 510 ) 2419336</b>	
Street Number and Name <b>PO BOX 90487</b>		Apt. Number <b>N/A</b>	
City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92169</b>	
10. Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	11. Marital Status: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		
12. Date of Birth (mm/dd/yyyy) <b>10/13/2000</b>	13. City and Country of Birth <b>SAN SALVADOR, EL SALVADOR</b>		
14. Present Nationality (Citizenship) <b>SALVADORAN</b>	15. Nationality at Birth <b>SALVADORAN</b>	16. Race, Ethnic, or Tribal Group <b>LATINA</b>	17. Religion <b>N/A</b>
18. Check the box, a through c, that applies: a. <input type="checkbox"/> I have never been in Immigration Court proceedings. b. <input checked="" type="checkbox"/> I am now in Immigration Court proceedings. c. <input type="checkbox"/> I am not now in Immigration Court proceedings, but I have been in the past.			
19. Complete 19 a through c.			
a. When did you last leave your country? (mm/dd/yyyy) <b>04/27/24</b>		b. What is your current I-94 Number, if any? <b>N/A</b>	
c. List each entry into the U.S. beginning with your most recent entry. List date (mm/dd/yyyy), place, and your status for each entry. (Attach additional sheets as needed.)			
Date <b>05/05/2024</b>	Place <b>BROWNSVILLE, TEXAS</b>	Status <b>EWI</b>	Date Status Expires <b>N/A</b>
Date <b>N/A</b>	Place <b>N/A</b>	Status <b>N/A</b>	
Date <b>N/A</b>	Place <b>N/A</b>	Status <b>N/A</b>	
20. What country issued your last passport or travel document? <b>EL SALVADOR</b>	21. Passport Number <b>B06125513</b> Travel Document Number <b>N/A</b>		22. Expiration Date (mm/dd/yyyy) <b>11/27/2029</b>
23. What is your native language (include dialect, if applicable)? <b>SPANISH</b>	24. Are you fluent in English? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	25. What other languages do you speak fluently? <b>N/A</b>	



## Part A.II. Information About Your Spouse and Children

<b>For EOIR use only.</b>	<b>For USCIS use only.</b>	<b>Action:</b> Interview Date: _____ Asylum Officer ID No.: _____	<b>Decision:</b> Approval Date: _____ Denial Date: _____ Referral Date: _____
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**Your spouse**  I am not married. (Skip to **Your Children** below.)

1. Alien Registration Number (A-Number) <i>(if any)</i> <b>N/A</b>	2. Passport/ID Card Number <i>(if any)</i> <b>N/A</b>	3. Date of Birth <i>(mm/dd/yyyy)</i> <b>N/A</b>	4. U.S. Social Security Number <i>(if any)</i> <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Other names used <i>(include maiden name and aliases)</i> <b>N/A</b>
9. Date of Marriage <i>(mm/dd/yyyy)</i> <b>N/A</b>	10. Place of Marriage <b>N/A</b>	11. City and Country of Birth <b>N/A</b>	
12. Nationality <i>(Citizenship)</i> <b>N/A</b>	13. Race, Ethnic, or Tribal Group <b>N/A</b>	14. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
15. Is this person in the U.S.? <input type="checkbox"/> Yes <i>(Complete Blocks 16 to 24.)</i> <input type="checkbox"/> No <i>(Specify location):</i> <b>N/A</b>			
16. Place of last entry into the U.S. <b>N/A</b>	17. Date of last entry into the U.S. <i>(mm/dd/yyyy)</i> <b>N/A</b>	18. I-94 Number <i>(if any)</i> <b>N/A</b>	19. Status when last admitted <i>(Visa type, if any)</i> <b>N/A</b>
20. What is your spouse's current status? <b>N/A</b>	21. What is the expiration date of his/her authorized stay, if any? <i>(mm/dd/yyyy)</i> <b>N/A</b>	22. Is your spouse in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	23. If previously in the U.S., date of previous arrival <i>(mm/dd/yyyy)</i> <b>N/A</b>
24. If in the U.S., is your spouse to be included in this application? <i>(Check the appropriate box.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Your Children.** List **all** of your children, regardless of age, location, or marital status.

I do not have any children. *(Skip to Part A.III., Information about your background.)*

I have children. Total number of children: \_\_\_\_\_.

**(NOTE: Use Form I-589 Supplement A or attach additional sheets of paper and documentation if you have more than four children.)**

1. Alien Registration Number (A-Number) <i>(if any)</i> <b>N/A</b>	2. Passport/ID Card Number <i>(if any)</i> <b>N/A</b>	3. Marital Status <i>(Married, Single, Divorced, Widowed)</i> <b>N/A</b>	4. U.S. Social Security Number <i>(if any)</i> <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth <i>(mm/dd/yyyy)</i> <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality <i>(Citizenship)</i> <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S.? <input type="checkbox"/> Yes <i>(Complete Blocks 14 to 21.)</i> <input type="checkbox"/> No <i>(Specify location):</i> <b>N/A</b>			
14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. <i>(mm/dd/yyyy)</i> <b>N/A</b>	16. I-94 Number <i>(If any)</i> <b>N/A</b>	17. Status when last admitted <i>(Visa type, if any)</i> <b>N/A</b>
18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? <i>(mm/dd/yyyy)</i> <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? <i>(Check the appropriate box.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			



**Part A.II. Information About Your Spouse and Children (continued)**

1. Alien Registration Number (A-Number) <i>(if any)</i> <b>N/A</b>	2. Passport/ID Card Number <i>(if any)</i> <b>N/A</b>	3. Marital Status ( <i>Married, Single, Divorced, Widowed</i> ) <b>N/A</b>	4. U.S. Social Security Number <i>(if any)</i> <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth ( <i>mm/dd/yyyy</i> ) <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality ( <i>Citizenship</i> ) <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

13. Is this child in the U.S.?  Yes (*Complete Blocks 14 to 21.*)  No (*Specify location*): **N/A**

14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. ( <i>mm/dd/yyyy</i> ) <b>N/A</b>	16. I-94 Number ( <i>If any</i> ) <b>N/A</b>	17. Status when last admitted ( <i>Visa type, if any</i> ) <b>N/A</b>
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18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? ( <i>mm/dd/yyyy</i> ) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No
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21. If in the U.S., is this child to be included in this application? (*Check the appropriate box.*)  
 Yes  
 No

1. Alien Registration Number (A-Number) <i>(if any)</i> <b>N/A</b>	2. Passport/ID Card Number <i>(if any)</i> <b>N/A</b>	3. Marital Status ( <i>Married, Single, Divorced, Widowed</i> ) <b>N/A</b>	4. U.S. Social Security Number <i>(if any)</i> <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth ( <i>mm/dd/yyyy</i> ) <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality ( <i>Citizenship</i> ) <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

13. Is this child in the U.S.?  Yes (*Complete Blocks 14 to 21.*)  No (*Specify location*): **N/A**

14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. ( <i>mm/dd/yyyy</i> ) <b>N/A</b>	16. I-94 Number ( <i>If any</i> ) <b>N/A</b>	17. Status when last admitted ( <i>Visa type, if any</i> ) <b>N/A</b>
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18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? ( <i>mm/dd/yyyy</i> ) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No
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21. If in the U.S., is this child to be included in this application? (*Check the appropriate box.*)  
 Yes  
 No

1. Alien Registration Number (A-Number) <i>(if any)</i> <b>N/A</b>	2. Passport/ID Card Number <i>(if any)</i> <b>N/A</b>	3. Marital Status ( <i>Married, Single, Divorced, Widowed</i> ) <b>N/A</b>	4. U.S. Social Security Number <i>(if any)</i> <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth ( <i>mm/dd/yyyy</i> ) <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality ( <i>Citizenship</i> ) <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

13. Is this child in the U.S.?  Yes (*Complete Blocks 14 to 21.*)  No (*Specify location*):

14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. ( <i>mm/dd/yyyy</i> ) <b>N/A</b>	16. I-94 Number ( <i>If any</i> ) <b>N/A</b>	17. Status when last admitted ( <i>Visa type, if any</i> ) <b>N/A</b>
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18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? ( <i>mm/dd/yyyy</i> ) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No
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21. If in the U.S., is this child to be included in this application? (*Check the appropriate box.*)  
 Yes  
 No



### Part A.III. Information About Your Background

1. List your last address where you lived before coming to the United States. If this is not the country where you fear persecution, also list the last address in the country where you fear persecution. (List Address, City/Town, Department, Province, or State and Country.)  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street (Provide if available)	City/Town	Department, Province, or State	Country	Dates	
				From (Mo/Yr)	To (Mo/Yr)
<b>COLONIA NUEVO FERROCARRIL, PJE 18, CASA 17</b>	<b>NEJAPA</b>	<b>SAN SALVADOR</b>	<b>EL SALVADOR</b>	<b>02/2021</b>	<b>04/2024</b>
<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>

2. Provide the following information about your residences during the past 5 years. List your present address first.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street	City/Town	Department, Province, or State	Country	Dates	
				From (Mo/Yr)	To (Mo/Yr)
<b>703 Niantic Ave</b>	<b>Daly City</b>	<b>California</b>	<b>USA</b>	<b>09/2024</b>	<b>PRESENT</b>
<b>708 Palm Ave</b>	<b>San Francisco</b>	<b>California</b>	<b>USA</b>	<b>05/2024</b>	<b>09/2024</b>
<b>Colonia Nuevo Ferrocarril, Pje. 18, Casa 17</b>	<b>Nejapa</b>	<b>San Salvador</b>	<b>El Salvador</b>	<b>02/2021</b>	<b>04/2024</b>
<b>Casa 1, Lote 1, Colonia Macance</b>	<b>Nejapa</b>	<b>San Salvador</b>	<b>El Salvador</b>	<b>01/2015</b>	<b>02/2021</b>
<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>

3. Provide the following information about your education, beginning with the most recent school that you attended.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name of School	Type of School	Location (Address)	Attended	
			From (Mo/Yr)	To (Mo/Yr)
<b>UNIVERSIDAD DON BOSCO</b>	<b>UNIVERSITY</b>	<b>Ciudadela Don Bosco Calle a Plan del Pino Km 1 1/2, Soyapango, El Salvador</b>	<b>02/2019</b>	<b>02/2021</b>
<b>INSTITUTO NACIONAL JUAN PABLO II</b>	<b>HIGH SCHOOL</b>	<b>RQ60+5CX, Calle El Calvario, Nejapa, El Salvador</b>	<b>02/2017</b>	<b>11/2018</b>
<b>CENTRO ESCOLAR JOSE DOLORES LARREYNAGA</b>	<b>JUNIOR HIGH SCHOOL</b>	<b>Av. 3 de Mayo 43, Quezaltepeque, El Salvador</b>	<b>02/2013</b>	<b>02/2016</b>
<b>CENTRO ESCOLAR GALERA QUEMADA</b>	<b>ELEMENTARY SCHOOL</b>	<b>RQ62+9RW, Nejapa, El Salvador</b>	<b>02/2006</b>	<b>02/2012</b>

4. Provide the following information about your employment during the past 5 years. List your present employment first.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name and Address of Employer	Your Occupation	Dates	
		From (Mo/Yr)	To (Mo/Yr)
<b>Self employed - various addresses, San Francisco, CA, USA</b>	<b>CLEANER</b>	<b>10/2024</b>	<b>PRESENT</b>
<b>La Parada del Sabor, Carretera Quezaltepeque, Km 22, Nejapa, El Salvador</b>	<b>CUSTOMER SERVICE</b>	<b>07/2022</b>	<b>04/2024</b>
<b>Servicio de Cobro S/A de CV, Colonia Flor Blanca, 12 Calle Poniente, 2517, San Salvador, El Salvador</b>	<b>CUSTOMER SERVICE</b>	<b>05/2022</b>	<b>07/2022</b>

5. Provide the following information about your parents and siblings (brothers and sisters). Check the box if the person is deceased.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

	Full Name	City/Town and Country of Birth	Current Location	
			<input type="checkbox"/> Deceased	
<i>Mother</i>	<b>MARIA DE LOS ANGELES MARTINEZ MARROQUIN</b>	<b>SAN SALVADOR, EL SALVADOR</b>	<input type="checkbox"/> Deceased	<b>NEJAPA, EL SALVADOR</b>
<i>Father</i>	<b>UNKNOWN</b>	<b>UNKNOWN</b>	<input type="checkbox"/> Deceased	<b>UNKNOWN</b>
<i>Sibling</i>	<b>DIEGO ALBERTO MARTINEZ MARROQUIN</b>	<b>SAN SALVADOR, EL SALVADOR</b>	<input type="checkbox"/> Deceased	<b>NEJAPA, EL SALVADOR</b>
<i>Sibling</i>	<b>DANIEL ARMANDO MARTINEZ MARROQUIN</b>	<b>SAN SALVADOR, EL SALVADOR</b>	<input type="checkbox"/> Deceased	<b>NEJAPA, EL SALVADOR</b>
<i>Sibling</i>	<b>N/A</b>	<b>N/A</b>	<input type="checkbox"/> Deceased	<b>N/A</b>
<i>Sibling</i>	<b>N/A</b>	<b>N/A</b>	<input type="checkbox"/> Deceased	<b>N/A</b>



## Part B. Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part B.)

When answering the following questions about your asylum or other protection claim (withholding of removal under 241(b)(3) of the INA or withholding of removal under the Convention Against Torture), you must provide a detailed and specific account of the basis of your claim to asylum or other protection. To the best of your ability, provide specific dates, places, and descriptions about each event or action described. You must attach documents evidencing the general conditions in the country from which you are seeking asylum or other protection and the specific facts on which you are relying to support your claim. If this documentation is unavailable or you are not providing this documentation with your application, explain why in your responses to the following questions.

Refer to Instructions, Part 1: Filing Instructions, Section II, "Basis of Eligibility," Parts A - D, Section V, Completing the Form," Part B, and Section VII, "Additional Evidence That You Should Submit," for more information on completing this section of the form.

1. Why are you applying for asylum or withholding of removal under section 241(b)(3) of the INA, or for withholding of removal under the Convention Against Torture? Check the appropriate box(es) below and then provide detailed answers to questions A and B below.

I am seeking asylum or withholding of removal based on:

- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> Race        | <input checked="" type="checkbox"/> Political opinion                       |
| <input type="checkbox"/> Religion    | <input checked="" type="checkbox"/> Membership in a particular social group |
| <input type="checkbox"/> Nationality | <input checked="" type="checkbox"/> Torture Convention                      |

- A. Have you, your family, or close friends or colleagues ever experienced harm or mistreatment or threats in the past by anyone?

- No  Yes

If "Yes," explain in detail:

1. What happened;
2. When the harm or mistreatment or threats occurred;
3. Who caused the harm or mistreatment or threats; and
4. Why you believe the harm or mistreatment or threats occurred.

I have been repeatedly harassed, intimidated, and subjected to unlawful searches by Salvadoran National Police officers because of my tattoos, my political activities and my identity as a bisexual woman. I am a woman with visible tattoos in El Salvador. Under the state of exception, the police treat anyone with tattoos as a gang member. I cannot change being a woman, I cannot change my sexual orientation, and I cannot remove my tattoos. Because of this, the police see me as a target, even though my tattoos have nothing to do with gangs. In mid-2023, two officers stopped me on the street in Colonia Nueva Ferrocarril, Nejapa, at night, demanded I show my tattoos, accused me of concealing gang affiliation, and subjected me to aggressive and humiliating interrogation. I felt deeply threatened and vulnerable, knowing I was alone on a dark street with armed officers who could detain me without accountability. I walked home trembling, afraid they might follow me. Two to three months later, officers again intercepted me at night on the same route, accused me of acting as a lookout for a gang and interrogated me about my family's gang ties. In both incidents, the police targeted me because I am a woman with visible tattoos who opposed the government's policies. In January 2024, approximately ten National Police officers entered my home without a warrant, without knocking, and without presenting any legal authority. I was in my underwear when I opened my bedroom door. Continued in Supplement B.

- B. Do you fear harm or mistreatment if you return to your home country?

- No  Yes

If "Yes," explain in detail:

1. What harm or mistreatment you fear;
2. Who you believe would harm or mistreat you; and
3. Why you believe you would or could be harmed or mistreated.

I fear being arbitrarily detained, physically abused, threatened, and sexually violated by National Police officers if returned to El Salvador, because of my identity as a bisexual woman, my tattoos, and my expressed political opinion. During the January 2024 raid on my home, I was interrogated while undressed and completely exposed by several armed men. I fear that if detained alone and in custody, that conduct would escalate to sexual abuse and physical torture with no one to intervene. Under El Salvador's state of exception, officers have broad authority and documented impunity to detain anyone with tattoos without a warrant or evidence. Once detained, there is no right to an attorney, no clear timeline, and no effective way to prove innocence. People have been imprisoned for months or years based solely on appearance. A former classmate of mine, Ángel Hernández, was detained under the state of exception in January 2024 because of songs on his phone. This shows that what I fear is not hypothetical, it is happening to people like me. I also fear retaliation for my political participation and social media posts criticizing the government, as authorities actively monitored and photographed protesters at the marches I attended. Internal relocation would provide no protection because the state of exception operates nationwide, the government is the persecutor, and I cannot erase my identity. There is nowhere safe for me in my country. Given my visible tattoos, my history of confrontations with police, and my political activities, I am certain that I will be detained if I return. Once detained, the documented pattern of abuse makes it highly likely that I will be subjected to mistreatment and torture. Further details are included in my declaration.



**Part B. Information About Your Application (Continued)**

2. Have you or your family members ever been accused, charged, arrested, detained, interrogated, convicted and sentenced, or imprisoned in any country other than the United States (including for an immigration law violation)?

No  Yes

If "Yes," explain the circumstances and reasons for the action.

**I was interrogated by National Police officers on multiple occasions in El Salvador because of my tattoos and political opinions. In mid-2023, officers stopped me on the street twice: the first time, they demanded I expose my tattoos and questioned me about their meaning; the second time, they accused me of keeping watch for a gang and interrogated me about my family members. In January 2024, approximately ten officers entered my home without a warrant. I was in my underwear and remained exposed for approximately ten minutes before being allowed to dress, while a male officer watched. They forced me to expose tattoos located on private areas of my body, searched every room, seized phones and documents, and questioned everyone present, without ever producing a warrant or providing any explanation. I was never formally charged, arrested, or convicted of any crime. My brother and former partner were also interrogated and had their phones and documents seized during that raid. Further details are included in my declaration.**

- 3.A. Have you or your family members ever belonged to or been associated with any organizations or groups in your home country, such as, but not limited to, a political party, student group, labor union, religious organization, military or paramilitary group, civil patrol, guerrilla organization, ethnic group, human rights group, or the press or media?

No  Yes

If "Yes," describe for each person the level of participation, any leadership or other positions held, and the length of time you or your family members were involved in each organization or activity.

N/A

- 3.B. Do you or your family members continue to participate in any way in these organizations or groups?

No  Yes

If "Yes," describe for each person your or your family members' current level of participation, any leadership or other positions currently held, and the length of time you or your family members have been involved in each organization or group.

N/A

4. Are you afraid of being subjected to torture in your home country or any other country to which you may be returned?

No  Yes

If "Yes," explain why you are afraid and describe the nature of torture you fear, by whom, and why it would be inflicted.

**Under El Salvador's state of exception, authorities have been granted broad and largely unchecked power to interrogate, arrest, and indefinitely detain anyone with visible tattoos, without a warrant, without evidence, and without due process. I fear being arbitrarily detained, threatened, raped, and subjected to torture by National Police officers if I return. During the January 2024 raid on my home, an officer already deliberately watched me dress while I was in my underwear, a calculated act of humiliation carried out in front of others. I have no reason to believe that conduct would not escalate to physical assault and sexual abuse if I were held alone in a detention facility, where there would be no witnesses and no recourse. I am a young woman with tattoos and a political activist for women and LGBTQ+ rights, who would enter detention already labeled by authorities as a gang affiliate and a political opponent, a profile that, in my country's current climate, invites the worst treatment. I fear that once in custody, no one would know where I was, no one would be able to help me, and the abuse would continue until I either confessed to something I did not do or simply disappeared into the system. Further details are included in my declaration.**



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## Part C. Additional Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part C.)

1. Have you, your spouse, your child(ren), your parents or your siblings ever applied to the U.S. Government for refugee status, asylum, or withholding of removal?

No  Yes

If "Yes," explain the decision and what happened to any status you, your spouse, your child(ren), your parents, or your siblings received as a result of that decision. Indicate whether or not you were included in a parent or spouse's application. If so, include your parent or spouse's A-number in your response. If you have been denied asylum by an immigration judge or the Board of Immigration Appeals, describe any change(s) in conditions in your country or your own personal circumstances since the date of the denial that may affect your eligibility for asylum.

N/A

- 2.A. After leaving the country from which you are claiming asylum, did you or your spouse or child(ren) who are now in the United States travel through or reside in any other country before entering the United States?

No  Yes

- 2.B. Have you, your spouse, your child(ren), or other family members, such as your parents or siblings, ever applied for or received any lawful status in any country other than the one from which you are now claiming asylum?

No  Yes

If "Yes" to either or both questions (2A and/or 2B), provide for each person the following: the name of each country and the length of stay, the person's status while there, the reasons for leaving, whether or not the person is entitled to return for lawful residence purposes, and whether the person applied for refugee status or for asylum while there, and if not, why he or she did not do so.

After leaving El Salvador on April 27, 2024, I traveled through Guatemala and Mexico before entering the United States on May 5, 2024. In Guatemala, I stayed for approximately two days in transit. I had no legal status there and am not entitled to return for lawful residence purposes. I did not apply for asylum in Guatemala because it could not offer me adequate protection. Guatemala suffers from widespread gang violence, corruption, and weak state institutions. The same criminal organizations that operate in El Salvador, including the Mara Salvatrucha and Barrio 18, are deeply entrenched in Guatemala and could have targeted me there as well. State protection would have been insufficient, and I had no guarantee that authorities there would not subject me to the same harassment and abuse I experienced in El Salvador. In Mexico, I stayed from approximately April 29 to May 5, 2024, traveling from Mexico City to Heroica Matamoros, Tamaulipas. I had no legal status there and am not entitled to return for lawful residence purposes. I did not apply for asylum in Mexico because it could not offer me safety or effective protection. Mexico faces severe levels of organized crime, police corruption, and human rights abuses. I had heard that police in Mexico also target people with tattoos, and I had no reason to believe the authorities there would protect rather than persecute me. The same transnational gangs present in El Salvador operate throughout Mexico, and as a tattooed bisexual woman, I would have been equally vulnerable to targeting and harm. I continued to the United States because neither Guatemala nor Mexico could offer me the protection I needed. Further details are included in my declaration.

3. Have you, your spouse or your child(ren) ever ordered, incited, assisted or otherwise participated in causing harm or suffering to any person because of his or her race, religion, nationality, membership in a particular social group or belief in a particular political opinion?

No  Yes

If "Yes," describe in detail each such incident and your own, your spouse's, or your child(ren)'s involvement.

N/A



**Part C. Additional Information About Your Application (Continued)**

4. After you left the country where you were harmed or fear harm, did you return to that country?

No  Yes

If "Yes," describe in detail the circumstances of your visit(s) (for example, the date(s) of the trip(s), the purpose(s) of the trip(s), and the length of time you remained in that country for the visit(s).)

N/A

5. Are you filing this application more than 1 year after your last arrival in the United States?

No  Yes

If "Yes," explain why you did not file within the first year after you arrived. You must be prepared to explain at your interview or hearing why you did not file your asylum application within the first year after you arrived. For guidance in answering this question, see Instructions, Part 1: Filing Instructions, Section V. "Completing the Form," Part C.

I arrived in the United States on May 5, 2024, and was granted parole upon entrance pursuant to INA § 212(d)(5). I did not file my asylum application within one year due to circumstances beyond my control. Maintaining parole constitutes an extraordinary circumstance to the one-year deadline for applying for asylum, according to 8 C.F.R. § 1208.4(a)(5)(iv). Furthermore, when I arrived, the documents I received at the border were in English and the officer spoke limited Spanish. I did not understand that there was a one-year deadline to file a separate asylum application. I understood that I had a court date, but I did not know I needed to file anything before it. No one explained me this deadline. The months that followed were defined by survival and by the psychological weight of what I had fled. The trauma from what I endured in El Salvador did not stay there, it followed me here. I experienced nightmares, persistent anxiety, difficulty concentrating, and a constant sense of threat that made it nearly impossible to think clearly or deal with a demanding immigration process. From May to September 2024, I had no stable housing, no income, and no money for legal help. I was sleeping on couches and moving between cities, focused entirely on survival. Even after I began working, I earned barely enough to cover rent, food, and transportation, with nothing left for legal fees. When I discovered the deadline, I tried to act: I searched for information online, watched explanatory videos, and consulted forums, but became confused by contradictory sources. I could not complete the process alone. However, attorneys required excessive amounts to help me with the filing of my application, and I simply could not afford them without completely compromising my ability to support myself. I continued searching for affordable legal help after that, contacting legal aid organizations and private attorneys, but found no available assistance. I connected with my current legal team in December 2025 and filed this application as soon as possible. I did not miss the deadline due to carelessness or lack of interest; I missed it because I received no clear information upon arrival, because I was consumed by the trauma of persecution and the demands of survival during my first months here, because contradictory information confused me when I finally learned of the requirement, and because I could not afford legal fees until it was too late. Further details are included in my declaration.

6. Have you or any member of your family included in the application ever committed any crime and/or been arrested, charged, convicted, or sentenced for any crimes in the United States (including for an immigration law violation)?

No  Yes

If "Yes," for each instance, specify in your response: what occurred and the circumstances, dates, length of sentence received, location, the duration of the detention or imprisonment, reason(s) for the detention or conviction, any formal charges that were lodged against you or your relatives included in your application, and the reason(s) for release. Attach documents referring to these incidents, if they are available, or an explanation of why documents are not available.

Upon my arrival in the United States on May 5, 2024, at the Brownsville, Texas Port of Entry, I presented myself to immigration authorities without a valid immigrant visa, reentry permit, border crossing card, or valid entry document, and was charged with violation of section 212(a)(7)(A)(i) of the Immigration and Nationality Act. I was detained by CBP and released the same day. I have not been accused, charged, arrested, or convicted of any crime in the United States. My sole reason for entering without valid documentation was to seek safety and protection from the persecution I faced in El Salvador. Further details are included in my declaration.



**Part D. Your Signature**

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it are all true and correct. Title 18, United States Code, Section 1546(a), provides in part: Whoever knowingly makes under oath, or as permitted under penalty of perjury under Section 1746 of Title 28, United States Code, knowingly subscribes as true, any false statement with respect to a material fact in any application, affidavit, or other document required by the immigration laws or regulations prescribed thereunder, or knowingly presents any such application, affidavit, or other document containing any such false statement or which fails to contain any reasonable basis in law or fact - shall be fined in accordance with this title or imprisoned for up to 25 years. I certify that I am physically present in the United States or seeking admission at a Port of Entry when I execute this application. I authorize the release of any information from my immigration record that U.S. Citizenship and Immigration Services (USCIS) needs to determine eligibility for the benefit I am seeking.

**WARNING: Applicants who are in the United States unlawfully are subject to removal if their asylum or withholding claims are not granted by an asylum officer or an immigration judge. Any information provided in completing this application may be used as a basis for the institution of, or as evidence in, removal proceedings even if the application is later withdrawn. Applicants determined to have knowingly made a frivolous application for asylum will be permanently ineligible for any benefits under the Immigration and Nationality Act. You may not avoid a frivolous finding simply because someone advised you to provide false information in your asylum application. If filing with USCIS, unexcused failure to appear for an appointment to provide biometrics (such as fingerprints) and your biographical information within the time allowed may result in an asylum officer dismissing your asylum application or referring it to an immigration judge. Failure without good cause to provide DHS with biometrics or other biographical information while in removal proceedings may result in your application being found abandoned by the immigration judge. See sections 208(d)(5)(A) and 208(d)(6) of the INA and 8 CFR sections 208.10, 1208.10, 208.20, 1003.47(d) and 1208.20.**


Print your complete name. <b>ANA NOEMY MARTINEZ MARROQUIN</b>	Write your name in your native alphabet. <b>N/A</b>
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Did your spouse, parent, or child(ren) assist you in completing this application?  No  Yes (If "Yes," list the name and relationship.)

<b>N/A</b> (Name)	<b>N/A</b> (Relationship)	<b>N/A</b> (Name)	<b>N/A</b> (Relationship)
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Did someone other than your spouse, parent, or child(ren) prepare this application?  No  Yes (If "Yes," complete Part E.)

Asylum applicants may be represented by counsel. Have you been provided with a list of persons who may be available to assist you, at little or no cost, with your asylum claim?  No  Yes

Signature of Applicant (The person in Part A.I.)  [ \_\_\_\_\_ ]      03/12/2026  
 Sign your name so it all appears within the brackets      Date (mm/dd/yyyy)

**Part E. Declaration of Person Preparing Form, if Other Than Applicant, Spouse, Parent, or Child**

I declare that I have prepared this application at the request of the person named in Part D, that the responses provided are based on all information of which I have knowledge, or which was provided to me by the applicant, and that the completed application was read to the applicant in his or her native language or a language he or she understands for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information on the Form I-589 may also subject me to civil penalties under 8 U.S.C. 1324c and/or criminal penalties under 18 U.S.C. 1546(a).

Signature of Preparer 		Print Complete Name of Preparer <b>Otavio Haverroth Silva</b>	
Daytime Telephone Number ( 510 ) 2419336		Address of Preparer: Street Number and Name <b>PO BOX 90487</b>	
Apt. Number <b>N/A</b>	City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92169</b>
To be completed by an attorney or accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney State Bar Number (if applicable) <b>343486</b>	Attorney or Accredited Representative USCIS Online Account Number (if any) <b>0 0 7 4 9 2 6 2 5 4 3 8</b>



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**Part F. To Be Completed at Asylum Interview, if Applicable**

**NOTE:** You will be asked to complete this part when you appear for examination before an asylum officer of the Department of Homeland Security, U.S. Citizenship and Immigration Services (USCIS).

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are  all true or  not all true to the best of my knowledge and that correction(s) numbered \_\_\_\_ to \_\_\_\_ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

Signed and sworn to before me by the above named applicant on:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Write Your Name in Your Native Alphabet

\_\_\_\_\_  
Signature of Asylum Officer

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**Part G. To Be Completed at Removal Hearing, if Applicable**

**NOTE:** You will be asked to complete this Part when you appear before an immigration judge of the U.S. Department of Justice, Executive Office for Immigration Review (EOIR), for a hearing.

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are  all true or  not all true to the best of my knowledge and that correction(s) numbered \_\_\_\_ to \_\_\_\_ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

Signed and sworn to before me by the above named applicant on:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Write Your Name in Your Native Alphabet

\_\_\_\_\_  
Signature of Immigration Judge





## Application for Asylum and for Withholding of Removal Supplement A

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-589  
OMB No. 1615-0069  
Expires 09/30/2027

A-Number (If available) <b>844 519 908</b>	Date <b>03/12/2026</b>
Applicant's Name <b>ANA NOEMY MARTINEZ MARROQUIN</b>	Applicant's Signature 

**List All of Your Children, Regardless of Age or Marital Status**  
 (NOTE: Use this form and attach additional pages and documentation as needed, if you have more than four children)

1. Alien Registration Number (A-Number) (if any) <b>N/A</b>	2. Passport/ID Card Number (if any) <b>N/A</b>	3. Marital Status (Married, Single, Divorced, Widowed) <b>N/A</b>	4. U.S. Social Security Number (if any) <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth (mm/dd/yyyy) <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality (Citizenship) <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S.? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location): <b>N/A</b>			
14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. (mm/dd/yyyy) <b>N/A</b>	16. I-94 Number (If any) <b>N/A</b>	17. Status when last admitted (Visa type, if any) <b>N/A</b>
18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. If in the U.S., is this child to be included in this application? (Check the appropriate box.)

Yes

No

1. Alien Registration Number (A-Number) (if any) <b>N/A</b>	2. Passport/ID Card Number (if any) <b>N/A</b>	3. Marital Status (Married, Single, Divorced, Widowed) <b>N/A</b>	4. U.S. Social Security Number (if any) <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth (mm/dd/yyyy) <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality (Citizenship) <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S.? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location): <b>N/A</b>			
14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. (mm/dd/yyyy) <b>N/A</b>	16. I-94 Number (If any) <b>N/A</b>	17. Status when last admitted (Visa type, if any) <b>N/A</b>
18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. If in the U.S., is this child to be included in this application? (Check the appropriate box.)

Yes

No



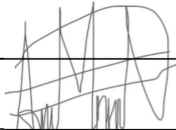


# Application for Asylum and for Withholding of Removal Supplement B

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-589  
OMB No. 1615-0069  
Expires 09/30/2027

## Additional Information About Your Claim to Asylum

A-Number (if available) 244 519 908	Date 03/12/2026
Applicant's Name Ana Noemy Martinez Marroquin	Applicant's Signature 

NOTE: Use this as a continuation page for any additional information requested. Copy and complete as needed.

Part   B  

Question   1.A.  

I remained exposed for approximately ten minutes while officers interrogated me before I could ask to get dressed. One male officer stayed in the doorway watching me while I changed. My former partner was with me in my bedroom and my brother was elsewhere in the house. Officers ordered them to place their hands on their heads, seized and searched their phones, demanded I show and explain each tattoo individually (which required me to partially undress again in front of them), forced open my brother's locked bedroom door, and searched the entire home for approximately 20-25 minutes, finding nothing. When I asked for a warrant, an officer said it was "none of my business." No documentation was left and no explanation was ever given.

Sometime in 2024, after the raid on my home, police went to my mother's food business in Nejapa and accused her of selling food to gang members. This shows that the persecution extends to my family and that I cannot protect them or myself in El Salvador.

I also publicly opposed government policies on social media beginning in August 2021 and participated in political marches in September 2021 and March 2022, where military personnel photographed protesters. Additionally, as a bisexual woman, I participated in LGBTQIAPN+ pride marches in June 2018 and June 2019, and publicly expressed support for the LGBT community on social media. Through this activism, I made my political opinion very clear to authorities, while under strict surveillance.

Although most of my tattoos have personal meanings, I also view them as an expression of autonomy and refusal to be controlled by an increasingly authoritarian State. Despite knowing that, under the state of exception, people with visible tattoos are treated as suspects and targeted by police, I did not renounce who I am.

The police targeted me because I am a bisexual woman with visible tattoos and because I have publicly expressed opposition to government policies. They have labeled me a gang affiliate and a threat to national security to legitimize the use of the state force to harm me. Further details are included in my declaration.



**PROOF OF SERVICE**

On this day, I, Otavio Haverroth Silva , served a copy of the following documents:

**RESPONDENT’S APPLICATION FOR ASYLUM AND WITHHOLDING OF  
REMOVAL – FORM I-589**

To the following:

<b>Office Location:</b>  Office of the Principal Legal Advisor Department of Homeland Security 100 Montgomery Street, Suite 200 San Francisco, CA 94104	<b>Mailing Address:</b>  Office of the Principal Legal Advisor Department of Homeland Security Office of the Chief Counsel P.O. Box 26449 San Francisco, CA 94126-644
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by:

o Through the EOIR Courts and Appeals System (ECAS), which will automatically send service notification to both parties that a new document has been filed.



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**Otavio Silva (Bar N. 343486)**  
**Attorney at Law**  
**P.O. Box 90487**  
**San Diego, CA 92169**  
*Counsel for Respondent*