

No.

In the
Supreme Court of the United States

YHANKA VERAS,
Petitioner,

v.

NEW YORK DEPARTMNET OF EDUCATION,
et al.

Respondent.

***On Petition for Writ of Certiorari
to the United States Court of
Appeals for the Second Circuit***

IFP MOTION

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Counsel for Petitioner

April 15th, 2025

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Pursuant to Supreme Court Rule 39, the Petitioner, YHANKA VERAS, by and through his court-appointed attorneys, request that the Court grant HER leave to proceed in forma pauperis. In support of this Motion, the Petitioner avers that:

I.

Petitioner is unable to afford the cost of representation in this matter, and printing of their petition for *writ of certiorari*. See, affidavit.

II.

Petitioner proceeded below in the district court INFORMA PAUPERIS.

III.

Petitioner was also granted *informa paupris* status in the the Second Circuit Court of Appeals.

WHEREFORE, the petitioner, YHANKA VERAS, by and through undersigned counsel, respectfully requests that She be allowed to proceed in forma pauperis without payment of filing fees or service of notice fees, and for such other relief as the Court deems just and proper. She submits an affidavit in her support. Exhibit: 1.

Respectfully submitted this 15th day of APRIL 2025.

Respectfully Submitted:

/s/Kissinger N. Sibanda Esq

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ORDER

**REGARDING MOTION TO PROCEED IN FORMA PAUPERIS ON
WRIT**

The court has considered the appellant's motion to proceed in forma pauperis on writ:

IT IS ORDERED that the motion be _____.

Washington DC, this _____ day of _____, 2025.

JUSTICE

**AFFIDAVIT OR DECLARATION
IN SUPPORT OF MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

I, Yhawtho Vera, am the petitioner in the above-entitled case. In support of my motion to proceed *in forma pauperis*, I state that because of my poverty I am unable to pay the costs of this case or to give security therefor; and I believe I am entitled to redress.

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0	\$ 0	\$ 0	\$ 0
Self-employment	\$ 0	\$ 0	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 0
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement (such as social security, <u>pensions</u> , annuities, insurance)	\$ 971.52	\$ 0	\$ 971.52	\$ 0
Disability (such as social security, insurance payments)	\$ 1,661.40	\$ 0	\$ 1,661.40	\$ 0
Unemployment payments	\$ 0	\$ 0	\$ 0	\$ 0
Public-assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0
Other (specify):	\$ 0	\$ 0	\$ 0	\$ 0
Total monthly income:	\$ 2,632.92		\$ 2,632.92	

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay
None			\$
			\$
			\$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay
			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 300.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
Checking	\$ 300.00	\$
	\$	\$
	\$	\$

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home
Value _____

Other real estate
Value _____

Motor Vehicle #1
Year, make & model _____
Value _____

Motor Vehicle #2
Year, make & model _____
Value _____

Other assets
Description _____
Value _____

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money

~~_____~~
~~_____~~
~~_____~~

Amount owed to you

\$ ~~_____~~
\$ ~~_____~~
\$ ~~_____~~

Amount owed to your spouse

\$ ~~_____~~
\$ ~~_____~~
\$ ~~_____~~

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

Name

~~_____~~
~~_____~~
~~_____~~

Relationship

~~_____~~
~~_____~~
~~_____~~

Age

~~_____~~
~~_____~~
~~_____~~

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, or annually to show the monthly rate.

You

Your spouse

Rent or home-mortgage payment
(include lot rented for mobile home)

\$ 871.25

\$ ~~_____~~

Are real estate taxes included? Yes No
Is property insurance included? Yes No

Utilities (electricity, heating fuel,
water, sewer, and telephone)

\$ 250.00

\$ ~~_____~~

Home maintenance (repairs and upkeep)

\$ 100.00

\$ ~~_____~~

Food

\$ 130.00

\$ ~~_____~~

Clothing

\$ 100.00

\$ ~~_____~~

Laundry and dry-cleaning

\$ 50.00

\$ ~~_____~~

Medical and dental expenses

\$ 0

\$ ~~_____~~

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 50	\$ 100
Recreation, entertainment, newspapers, magazines, etc.	\$ 50	\$ 100
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ 100
Life	\$ 0	\$ 0
Health	\$ 0	\$ 0
Motor Vehicle	\$ 0	\$ 0
Other: <u>cable 140 / electricity 200</u>	\$ 340.00	\$ 0
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>SSD taxes</u>	\$ 140.00	\$ 0
Installment payments		
Motor Vehicle	\$ 0	\$ 0
Credit card(s)	\$ 100.00	\$ 0
Department store(s)	\$ 0	\$ 0
Other: _____	\$ 0	\$ 0
Alimony, maintenance, and support paid to others	\$ 0	\$ 0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ 0
Other (specify): <u>Pet Food</u>	\$ 250.00	\$ 0
Total monthly expenses:	<u>\$ 930.00</u>	\$ 0
	<u>\$ 3431.25</u>	

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

Yes

No

If yes, describe on an attached sheet.

10. Have you paid – or will you be paying – an attorney any money for services in connection with this case, including the completion of this form? Yes No

If yes, how much? _____

If yes, state the attorney's name, address, and telephone number:

11. Have you paid—or will you be paying—anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form?

Yes

No

If yes, how much? _____

If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the costs of this case.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on: April 21, 2025

J. Keron
(Signature)