



Information from your Form 1

For USCIS Use Only

Your Current Legal Name:

Last Name (Family Name)

First Name (Given Name)

Middle Name(s)

Date of Birth (mm/dd/yyyy)

Your i-account number

Your employer's USCIS Form 60 receipt number

Your A-number, if applicable

Section 1. What are you applying for?

A Check and complete any box that applies to you.

1. I want to change my nonimmigrant status to:

valid until (mm/dd/yyyy):

2. I want to extend my stay in the U.S. in the current classification

valid until (mm/dd/yyyy):

3. I want to extend my stay beyond the H-1B six-year maximum because: (check one)

An application for permanent labor certification was filed for me at least 365 days before the H-1B work start date.

Department of Labor Case number:

Filed on: (mm/dd/yyyy)

An immigrant visa petition for me was filed at least 365 days before the H-1B work start date.

Receipt number:

Filed on: (mm/dd/yyyy)

An immigrant visa petition was approved for me and I am awaiting availability of a visa number.

Receipt number:

Filed on: (mm/dd/yyyy)

Section 1 is continued on the next page

This is a multi-page form. Make sure you complete all sections that apply to you.

Section 1. What are you applying for? (Continued.)

B Check and complete any box that applies to you.

Have you previously applied for this benefit? Yes No

If "Yes," name the benefit sought.

The status of your application: Granted Denied Pending

If granted, what was the benefit received.

Name under which you applied:

Last Name (*Family Name*)

First Name (*Given Name*)

Middle Name(s)

Date application was filed (*mm/dd/yyyy*)

Application receipt number if known

Location where application filed:

City

State

C Explain the reason you want to change and/or extend your stay in the U.S.

Section B is continued on the next page

This is a multi-page form. Make sure you complete all sections that apply to you.

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Section 2. Information about dependents.

Do you have any dependents (spouse and/or child(ren)) who are applying with you?

No Yes (If yes, give the full name of each dependent with his or her date of birth and i-account number)

Spouse

Last Name (*Family Name*)

First Name (*Given Name*)

Middle Name(s)

Date of Birth (*mm/dd/yyyy*)

i-account number

Child

Last Name (*Family Name*)

First Name (*Given Name*)

Middle Name(s)

Date of Birth (*mm/dd/yyyy*)

i-account number

Dropdown Button to Add Children

This is a multi-page form. Make sure you complete all sections that apply to you.

Section 3. Information required of all applicants.

A Are you, or any dependents included in this application, filing this application with another application?

Yes No

If "Yes," what other applications have you filed, or have been filed on your behalf?

B Were you, and all dependents included in this application, issued an Arrival/Departure Card (I-94; I-94W; I-95) when you entered the United States?

Yes. (If "Yes," please give the following information for each applicant included in this application).

Type of Card

Name exactly as it appeared on the card, if known

Class of Admission

Date of Admission (*mm/dd/yyyy*)

Place of Admission

No. (If "No," explain why not below.)

C Have you, or any dependent included in this application, been employed in the U.S. since last admitted or granted an extension or change of status?

Yes No

If "Yes," fully describe the employment, include the name of the person employed, name and address of the employer, weekly income and whether the employment was specifically authorized by USCIS:

D Have you, or any dependents included in this application, violated your status since entry into the United States?

Yes No

If "Yes," fully describe how status was violated.

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Section 4. Preparer Information.

Complete the information below if applicable. USCIS requires the disclosure of any person other than the applicant(s) who prepared or assisted in preparing the content of this form. USCIS does not require disclosure of persons or entities who only transcribed into electronic form the information provided in written form solely by the applicant(s) or other disclosed preparers or representatives.

- The preparer is an attorney, or BIA authorized representative who only prepared the form and will not be representing the applicant further.

Preparer's USCIS r-Account #

- The preparer is NOT an attorney, or BIA authorized representative. Provide the following concerning this preparer.

Last Name (Family Name)

First Name (Given Name)

U.S. Social Security Number

Street Address

City

State

Zip Code

Was the preparer paid to prepare this Form? Yes No

Does the preparer have a pre-existing relationship with the applicant? Yes No

If "Yes" - what kind? *(Check all that apply)*

- Relative Personal friend Clergyman
 Neighbor Business associate Preparer authorized by law

Declaration: To be completed by all preparers, including attorneys and authorized representatives

I declare that I prepared this account information at the request of the applicant, that it is based on all the information of which I have knowledge, and that the information is true to the best of my knowledge.

Preparer's Signature

Date of Signature (mm/dd/yyyy)

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This is a multi-page form. Make sure you complete all sections that apply to you.

Section 5. Designation of Representation.

Until such time as the authorization is withdrawn or terminated, the applicant(s) authorize USCIS and other agencies of the United States Government administering U.S. citizenship and immigration laws to disclose any information pertaining to the applicant in any record or system of records relating to immigration matters to the representative named below, and to his or her law firm or BIA recognized organization, pursuant to the Privacy Act of 1974.

Representative

Last Name (Family Name)

First Name (Given Name)

Middle Name

USCIS r-Account #

Section 6. Your signature and attestation, and authorization of representation.

Do not sign until your application is complete and you are ready to file.

I certify, swear or affirm, under penalty of perjury under the laws of the United States of America, that all the information and evidence submitted to establish and maintain this account is true and correct. I authorize the release of any information from my records, that USCIS or another U.S. federal agency should need at any time to determine eligibility for any benefit, product or service sought.

I hereby designate the representative as identified in Section 5 to represent and receive all communications with respect to this account. Furthermore, I take full responsibility for the accuracy of any representations made by my agent or attorney on my behalf. I recognize that this authorization is limited to the above application

I further understand that submitting this application does not in itself grant me status, a benefit, product or service.

Your Signature

Note - You must indicate as follows to complete attestation - /s/ Please type in your Full Legal Name (eg. /s/ John S. Smith)

Date of Signature (mm/dd/yyyy) / /

This is a multi-page form. Make sure you complete all sections that apply to you.