

TABLE OF CHANGES – FORM
Form G-845, Verification Request
OMB Number: 1615-0101
Date 9/08/2014

Reason for Revision: Form, instructions, and supplement were revised to incorporate form design and standard language updates, and operational and customer needs.

Current Location	Current Text	Proposed Text
New		<p>[Page 1]</p> <p>START HERE – Type or print in black ink.</p> <p>[Page 2-4, in the header]</p> <p>Applicant's Last Name Applicant's First Name Case Verification Number</p>
Page 1-2, Section A. To Be Completed by Registered Agency Only	<p>[Page 1]</p> <p>To: U.S. Citizenship and Immigration Services (USCIS) Attn: USCIS SAVE Program Status Verification Office [Fillable field]</p> <p>From: Type or Stamp Name and Address of Registered Agency [Fillable field]</p> <p>Print clearly since USCIS may use above agency address with a No. 10 window envelope.</p> <p>1. Immigration Document Number...</p> <p>Alien Registration Number (A-Number)</p>	<p>[Page 1]</p> <p>Part 1. Information from the Registered Agency</p> <p>NOTE: Only the Registered Agency should complete this information.</p> <p>To: U.S. Citizenship and Immigration Services (USCIS) Attn: USCIS SAVE Program Status Verification Office [Drop-down box]</p> <hr/> <hr/> <hr/> <p>Stamp, type, or print the name and address of the Registered Agency. (Print clearly since USCIS may use agency address below with a No. 10 window envelope.)</p> <p>From: [Fillable fields]</p> <p>Applicant Information</p> <p>Immigration Document Number</p> <p>1.a. Alien Registration Number (A-Number)</p>

<p>I-94 (Arrival-Departure Record) Number</p> <p>Other immigration number (if A-Number/I-94 Number not available):</p> <p>Identify document containing the other immigration number:</p> <p>2. Applicant's name as shown on the immigration document (Last, First, Middle)</p> <p>3. Nationality...</p> <p>9. Check all that apply:</p> <p>a. Photocopy of primary immigration document attached. Ensure copies are legible. If there is print on both sides of the immigration document, attach a copy of front and back.</p> <p>b. Other Information Attached (specify documents):</p> <p>10. Benefit TANF Unemployment Insurance Education Grant/Loan/ Work Study Employment Authorization Food Stamps Social Security Number Housing Assistance SSI or RSDI Medicaid/Medical Assistance Driver's License/ID Background Check Other (specify below)</p>	<p>1.b. Form I-94 Number (Arrival-Departure Record)</p> <p>1.c. Other Immigration Number</p> <p>1.d. Name or Form Number of Document Containing the Other Immigration Number</p> <p>Applicant's Full Name as Shown on the Immigration Document</p> <p>2.a. Last Name 2.b. First Name 2.c. Middle Name</p> <p>3. Case Verification Number</p> <p>4. Date of Birth (<i>mm/dd/yyyy</i>)</p> <p>5. Social Security Number</p> <p>6. Student and Exchange Visitor Information System (SEVIS) Number</p> <p>7. Citizenship or Nationality</p> <p>Documents Attached (Select all that apply)</p> <p>8.a. Photocopy of most recently issued immigration document attached. Ensure copies are legible and made from an original document. If the immigration document is printed on both sides, attach a copy of the front and back.</p> <p>8.b. Other Information Attached (Specify Documents)</p> <p>Benefits Sought 9.a. Background Check 9.b. Driver's License/ID 9.c. Education Grant/Loan/Work Study 9.d. Employment Authorization 9.e. Food Stamps 9.f. Housing Assistance 9.g. Medicaid/Medical Assistance 9.h. Social Security Number 9.i. SSI or RSDI 9.j. TANF 9.k. Unemployment Insurance 9.l. Other (Specify)</p> <p>[Page 2] Registered Agency Information</p>
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	<p>11. Name of Agency Official</p> <p>12. Title of Agency Official</p> <p>13. Telephone Number (include area code)</p> <p>14. Fax Number (include area code):</p> <p>15. Date (mm/dd/yyyy)</p> <p>[Page 2]</p> <p>Registered Agency Comments</p>	<p>10. Registered Agency Case Number</p> <p>Full Name of Agency Official</p> <p>11.a. Last Name</p> <p>11.b. First Name</p> <p>12. Title of Agency Official</p> <p>13.a. Daytime Telephone Number (include area code)</p> <p>13.b. Extension Number (if applicable)</p> <p>14. Fax Number (if any) (include area code)</p> <p>15. Date Request Completed (mm/dd/yyyy)</p> <p>16. Registered Agency Comments (if any)</p>
<p>Page 2, Section B. To Be Completed by USCIS</p>	<p>USCIS RESPONSES: After review of the documents, and/or information submitted, and/or of our records, we find that the document appears valid and relates to a/an:</p> <p>1. Lawful Permanent Resident alien of the United States.</p> <p>2. Conditional Resident alien of the United States.</p> <p>3. Alien employment authorized in the United States as indicated</p> <p>a. No expiration date (indefinite)</p> <p>b. Expires on (mm/dd/yyyy)</p> <p>c. Prior employment authorization date(s): [6 data collections]</p> <p>4. Alien not employment authorized in the United States</p> <p>5. Alien has an application pending for (specify USCIS benefit):</p> <p>6. Alien granted asylum or refugee status in the United States</p>	<p>[Page 2]</p> <p>Part 2. USCIS Responses</p> <p>NOTE: Only USCIS should complete this information.</p> <p>After review of the documents, information submitted, and our records, we find the following for the applicant:</p> <p>1. Lawful Permanent Resident of the United States</p> <p>2. Conditional Permanent Resident of the United States</p> <p>3. Applicant is employment authorized in the United States as indicated:</p> <p>_ No Expiration Date (Indefinite)</p> <p>_ Expiration Date (mm/dd/yyyy)</p> <p>_ Previous Employment Authorization Dates Start Date (mm/dd/yyyy) End Date (mm/dd/yyyy) Start Date (mm/dd/yyyy) End Date (mm/dd/yyyy) Start Date (mm/dd/yyyy) End Date (mm/dd/yyyy)</p> <p>4. Applicant is not employment authorized in the United States</p> <p>5. Applicant has an application pending for the following USCIS benefit:</p> <p>6. Applicant was granted asylum or refugee status in the United States</p>

<p>7. Alien paroled into the United States under section 212 of the Immigration and Nationality Act (INA).</p> <p>a. No expiration (Indefinite) b. Parole granted on <i>(mm/dd/yyyy)</i> c. Parole expires on <i>(mm/dd/yyyy)</i></p> <p>9. Conditional entrant of the United States.</p> <p>10. Nonimmigrant alien (Specify type or class below): [1 field]</p> <p>12. U.S. Citizen</p> <p>13. USCIS is searching indices for further information</p> <p>14. This document is not valid because it appears to be:</p> <p>a. Expired b. Altered c. Counterfeit</p> <p>8. Cuban/Haitian entrant of the United States</p> <p>11. American Indian born in Canada to whom the provisions of section 289 of the INA apply. Date status recognized (mm/dd/yyyy)</p>	<p>7. Applicant was paroled into the United States under section 212 of the Immigration and Nationality Act (INA).</p> <p>No Expiration Date (Indefinite) Parole Granted Date <i>(mm/dd/yyyy)</i> Parole Expiration Date <i>(mm/dd/yyyy)</i></p> <p>8. Conditional entrant of the United States</p> <p>9. Nonimmigrant (Specify type or class and expiration date) [2 fields] Type or Class Expiration Date <i>(mm/dd/yyyy)</i></p> <p>10. U.S. Citizen</p> <p>[below]</p> <p>[below]</p> <p>ADDITIONAL USCIS RESPONSES</p> <p>11. Cuban/Haitian entrant of the United States</p> <p>12. American Indian born in Canada to whom the provisions of INA 289 apply. Date Status Recognized <i>(mm/dd/yyyy)</i></p> <p>13. Mexican Born Member of the Texas or Oklahoma Band of Kickapoo Indians</p> <p>a. I-872 Issuance Date <i>(mm/dd/yyyy)</i> COA (KIC or KIP)_____</p> <p>b. Other foreign born American Indian Date of Entry <i>(mm/dd/yyyy)</i> COA_____</p> <p>[new] 14. Deferred Action for Childhood Arrivals (DACA)</p> <p>15. Temporary Protected Status (TPS)</p> <p>16. Deferred Action Status</p>
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<p>Page 3, Section C. USCIS Comments</p>	<p>1. Unable to process without an original consent of disclosure statement signed by the applicant. Resubmit request.</p> <p>2. No determination can be made from the information submitted. Obtain copy of the original alien registration document. Resubmit request.</p> <p>3. No determination can be made without seeing both sides of the documents submitted. Resubmit request.</p> <p>4. Cannot read document copy. Resubmit request.</p> <p>5. Other:</p> <p>[Box for] USCIS Stamp</p>	<p>[Page 3]</p> <p>Part 3. USCIS Comments</p> <p>NOTE: Only USCIS should complete this information.</p> <p>1. Unable to process request without an original consent of disclosure statement signed by the applicant. Resubmit request.</p> <p>2. No determination can be made because insufficient information was submitted. Obtain a copy of the applicant's most recently issued immigration document. Submit a new request.</p> <p>3. No determination can be made without seeing both sides of the applicant's immigration document. Attach copies (front and back) of the applicant's most recently issued immigration document and submit a new request.</p> <p>4. Copy provided of applicant's immigration document is illegible. Submit a new request with legible documents.</p> <p>5. Unable to verify status based on the document provided. If this is the applicant's most recently issued immigration document, refer the applicant to the document issuing authority.</p> <p>6. Other</p> <p>[Box for] USCIS Stamp</p>