

**TABLE OF CHANGES – FORM**  
**Form I-914, Application for T Nonimmigrant Status**  
**OMB Number: 1615-0999**  
**Date 06/10/2020**

**Reason for Revision: Fee Rule**  
**Project Phase: Post G1056**

- Please note – all instances of “if any” and “if applicable” have been removed from Form I-914.

Legend for Proposed Text:

- Black font = Current text
- Red font = Changes

Expires 04/30/2021

Edition Date 04/15/2019

Current Page Number and Section	Current Text	Proposed Text
<b>Page 1</b>	[Page 1] ... <i>To Be Completed by Attorney or Representative, if any</i> ...	[Page 1] ... <i>To Be Completed by Attorney or Representative</i> ...
<b>Page 1,</b> <b>PART B. General Information About You</b> (Person filing this form as a victim)	[Page 1] ... <b>Family Name</b> ( <i>Last Name</i> ) <b>Given Name</b> ( <i>First Name</i> ) <b>Middle Name</b> ( <i>if any</i> ) ... <b>A-Number</b> ( <i>if any</i> )  <b>U.S. Social Security Number</b> ( <i>if any</i> ) ...	[Page 1] ... <b>Family Name</b> ( <i>Last Name</i> ) <b>Given Name</b> ( <i>First Name</i> ) <b>Middle Name</b> ... <b>A-Number</b>  <b>U.S. Social Security Number</b> ...
<b>Page 2,</b> <b>PART C. Additional Information</b>	[Page 2] ... Attach additional sheets of paper as needed. Write your name and Alien Registration Number (A-Number), if any, at the top of each sheet and indicate the number of the	[Page 2] ... Attach additional sheets of paper as needed. Write your name and Alien Registration Number ( <b>A-Number</b> ), at the top of each sheet and indicate the number of the item

	item that you are answering. Include the Part and letter or number relating to the additional information you provided (example: Part C, 3).	that you are answering. Include the Part and letter or number relating to the additional information you provided (example: Part C, 3).
<b>Page 6-7,</b>  <b>PART E. Information About Your Family Members</b>	<p>[Page 6]</p> <p>...</p> <p>1. Spouse  <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b> (<i>if any</i>)</p> <p>...</p> <p>[Page 7]</p> <p>2. Children</p> <p>a. <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b> (<i>if any</i>)</p> <p>...</p> <p>b. <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b> (<i>if any</i>)</p> <p>...</p> <p>c. <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b> (<i>if any</i>)</p> <p>...</p>	<p>[Page 6]</p> <p>...</p> <p>1. Spouse  <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b></p> <p>...</p> <p>[Page 7]</p> <p>2. Children</p> <p>a. <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b></p> <p>...</p> <p>b. <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b></p> <p>...</p> <p>c. <b>Family Name</b> (<i>Last Name</i>)  <b>Given Name</b> (<i>First Name</i>)  <b>Middle Name</b></p> <p>...</p>