



H-1B Registration

U.S. employers or agents who seek to obtain H-1B nonimmigrant classification on behalf of an individual subject to the H-1B numerical allocations will need to submit a registration during a designated registration period, unless the registration requirement is suspended by USCIS.

You may submit up to 250 beneficiaries for a one registrant (employer or agent) per [submission](#).

The annual initial registration period will last a minimum of 14 calendar days and will start at least 14 calendar days before the earliest date on which H-1B cap-subject petitions may be filed for a particular fiscal year.

If a sufficient number of registrations projected as needed to reach the H-1B regular cap have not been received within the 14 days initial registration period, we will notify all registrants who have properly registered that their registrations have been selected. We will keep the registration open past the initial registration period until we have determined that we have received enough registrations projected as needed to meet the H-1B regular cap.

After the end of the initial registration period, if USCIS has received more registrations than needed to meet the projected number of registrations to reach the regular cap, [USCIS will first select registrations generally based on the highest Occupational Employment Statistics \(OES\) wage levels that the proffered wages equal or exceed for the relevant Standard Occupational Classification \(SOC\) codes and area\(s\) of intended employment](#). A similar process will apply for those who may be eligible for the [advanced degree exemption](#). [This ranking process will not affect the order of selection as between the regular cap and the advanced degree exemption; the wage level ranking will occur first for the regular cap selection and then for the advanced degree exemption](#). A Form I-129, Petition for a Nonimmigrant Worker, may then be filed by the petitioner, [during the applicable filing period](#), based on a selected registration to request classification of the beneficiary as an H-1B worker.



Before you start your registration



Eligibility

A U.S. employer or agent may file H-1B cap petitions, and as such, will be required to submit an H-1B Registration to be eligible to file the H-1B cap petition.

U.S. Employers: Person or entity in U.S. that:

- Engages a person to work in the U.S.;
- Has an employer-employee relationship with the beneficiary; and
- Has an EIN.

Agents: A U.S. individual or company in business as an agent may file an H-1B Registration for workers who are traditionally self-employed or workers who use agents to arrange short-term employment on their behalf with numerous employers, and in cases where a foreign employer authorizes the agent to act on its behalf.



Duplicates

A registrant (employer or agent) may only submit one registration per beneficiary in any fiscal year. If a registrant submits more than one registration per beneficiary in the same fiscal year, all registrations filed by that registrant relating to that beneficiary for that fiscal year will be considered invalid.

Fee

Fee: \$10 per registration

We will send you to Pay.gov, our safe, secure payment website, to make your payment and submit your registration online. If your current document is incorrect due to a typographical or clerical error caused by USCIS, there is no fee.

Refund Policy

USCIS does not refund fees, regardless of any action we take on your application, petition, or request.

By continuing this transaction, you acknowledge that you must submit fees in the exact amount and that you are paying the fees for a government service. You further agree that the filing fee, biometric fee, and any other paid costs related to this financial transaction are final and not refundable.

Please refer to the instructions for the form(s) you are filing for additional information or you may call the USCIS Contact Center at 800-375-5283. For TTY (deaf or hard of hearing) 800-767-1833.

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U.S. Citizenship and
Immigration Services



Completing your form online



We will automatically save your responses

We will automatically save your information when you select next to go to a new page or navigate to another section of the registration. We will save your draft information until the registration period closes.



How to continue filling out your registration

After you start your registration, you can exit and sign in to your account again to continue where you left off.

DHS Privacy Notice

AUTHORITIES: The information requested on this form is collected under the Immigration and Nationality Act sections 101(a)(15)(H)(i)(b) and 214(a), (c)(1), (g); 8 U.S. Code 1101(a)(15)(H)(i)(b) and 1184(a), (c)(1), and (g); and the regulatory authority under 8 Code of Federal Regulations 214.2(h).

PURPOSE: The primary purpose for providing the requested information on this form is to register prospective beneficiaries for the annual H-1B cap selection process. DHS uses the provided information to select a projected number of registrations needed to generate a sufficient number of H-1B cap petitions to reach the annual H-1B numerical limitations, including the advanced degree exemption, and associate selected registrations with subsequently filed H-1B cap petitions. Unless the registration requirement is suspended, a registrant must have a selected registration to be eligible to file an H-1B cap petition for the named beneficiary.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may preclude you from filing an H-1B cap petition on the named beneficiary's behalf.

ROUTINE USES: DHS may share the information you provide on this form and any additional requested evidence with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-007 Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-034(a) H-1B Registration Final Rule] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act

An agency may not conduct or sponsor information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at **50** minutes per response, including the time for reviewing instructions, gathering the required information, completing the application, preparing statements, and submitting the application electronically. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

U.S. Citizenship and Immigration Services, Regulatory Coordination Division
Office of Policy and Strategy
20 Massachusetts Ave NW
Washington, DC 20529-2140

Do not mail your completed H-1B registration to this address.

OMB No. 1615-0144
Expires: 1/31/2022

[Start registration](#)

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U.S. Citizenship and
Immigration Services

What is the legal name of the prospective petitioning company or organization?

If filing as an individual registrant, provide the individual's legal name.

What is the Doing Business As name of the prospective petitioning company or organization?

Doing Business As (DBA) name is the operating name of a company, as opposed to the legal name of the company.

The prospective petitioning company or organization does not have a Doing Business As name.

What is the employer identification number (EIN) of the prospective petitioning company or organization?

If filing as an individual registrant, provide the registrant's individual IRS Tax Number (SSN or ITIN).

What is the primary U.S. office address of the prospective petitioning company or organization?

USCIS notices will not be mailed to this address.

Address line 1

Address line 2

City or town

State

ZIP code

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About Registrant

About Beneficiary

Review and Submit

Employer/Agent

Authorized Signatory

What is the authorized signatory's legal name?

Given name (first name)

Middle name (if applicable)

Family name (last name)

What is the authorized signatory's title?

What is the authorized signatory's contact information?

Daytime phone number

Email address

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About Registrant

About Beneficiary

Review and Submit

Beneficiary Information

[Save and exit](#)

 [Company or organization name]

Beneficiary Information

You may submit up to 250 beneficiaries for one registrant (employer/agent) per **submission**.

[+ Add a beneficiary](#)

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Beneficiary Information

[Company or organization name]

Beneficiary Information

You may submit up to 250 beneficiaries for one registrant (employer/agent) per submission.

What is the beneficiary's legal name?

Given name (first name)

Beneficiary does not have a first name.

Middle name

Beneficiary does not have a middle name.

Family name (last name)

What is the beneficiary's gender?

Female

Male

What is the beneficiary's date of birth?

Are you requesting consideration under the INA 214(g)(5)(C) advanced degree exemption because the beneficiary has earned, or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education?

Yes

No

What is the beneficiary's country of birth?

Select one 

What is the beneficiary's country of citizenship?

Select one 

What is the beneficiary's passport number?

Beneficiary does not have a passport number.

Additional Information

As of the date of submission of this registration, what is the highest Occupational Employment Statistics (OES) wage level that the beneficiary's proffered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment or other applicable corresponding wage level? (Select one).

- Wage Level IV
- Wage Level III
- Wage Level II
- Wage Level I and below

The proffered wage is the wage that the employer intends to pay the beneficiary. The SOC code and area(s) of intended employment will be indicated on the LCA filed with the petition.

If using a private wage survey, select the highest OES wage level that the proffered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment. If the proffered wage is less than the Level I OES wage, select the box for "Wage Level I and below."

If the beneficiary will work in multiple locations, or in multiple positions if the registrant is an agent, select the box for the lowest corresponding OES wage level that the proffered wage will equal or exceed.

If the relevant SOC code does not have current OES prevailing wage information available, follow U.S. Department of Labor guidance [[link to 2009 DOL Policy Guidance](#)] on prevailing wage determinations to determine and select the OES prevailing wage level that corresponds with the proffered position requirements.

Add beneficiary

Cancel



Beneficiary Information

[Company or organization name]

Beneficiary Information

You may submit up to 250 beneficiaries for one registrant (employer/agent) per **submission.**

+ Add another beneficiary

Beneficiary	Action
Aberg, Arnold 09/13/1974	Edit Delete

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About Registrant

About Beneficiary

Review and Submit

Beneficiary Information

[Company or organization name]

Beneficiary Information

You may submit up to 250 beneficiaries for one registrant (employer/agent) per submission.

+Add a beneficiary

Beneficiary	Action
Aberg, Arnold 09/13/1974	Edit Delete
Curie, Marie 02/04/1999	Edit Delete
Johnson, Katherine 07/30/1968	Edit Delete
Vonsutter, Berta 04/24/1980	Edit Delete
Vonsutter, Berta 04/24/1980	Edit Delete
Vonsutter, Berta 04/24/1980	Edit Delete
Vonsutter, Berta 04/24/1980	Edit Delete
Vonsutter, Berta 04/24/1980	Edit Delete
Vonsutter, Berta 04/24/1980	Edit Delete
Vonsutter, Berta 04/24/1980	Edit Delete
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Review and Submit

Review

[Summary](#)

[Authorized Signatory
Signature](#)

Check your registration before you submit

We will review your registration to check for completeness before you submit it.

We encourage you to provide as many responses as you can throughout the registration, to the best of your knowledge. Missing information can slow down the review process after you submit your registration.

You can return to this page to review your registration as many times as you want before you submit it.

Your fee


 Your form filing fee is: \$XX.XX

Refund Policy: USCIS does not refund fees, regardless of any action we take on your application, petition, or request. By continuing the transaction, you acknowledge that you must submit fees in the exact amount and that you are paying the fees for a government service.

Alerts and warnings

You have one or more alerts based on the information you provided in your registration.

A green alert means you have completed all required fields and responses.

 We found no alerts or warnings in your registration

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About Applicant About Beneficiary Review and Submit

Home Summary

H-1B Registration Summary

Here is a summary of all the information you provided in your registration.

Make sure you have provided responses for everything that applies to you before you submit your registration. You can edit your responses by going to each registration section using the navigation.

[Print Summary](#)

Registrant Information

Employer/Agent [Edit](#)

What is the legal name of the petitioner/petitioning company or organization? Corporation ABC

What is the Doing Business As name of the petitioner/petitioning company or organization? Corporation XYZ

What is the primary U.S. office address of the business or organization? 1234 Street, Philadelphia, PA 19104

Authorized Signatory [Edit](#)

What is the authorized signatory's legal name? Derrick Me

What is the authorized signatory's title? Head of Human Resources

What is the authorized signatory's contact information?

Daytime phone number: (881) 654-3210

Email address: h1b@corpabc.com

Beneficiary Information

Beneficiary [Edit](#)

What is the beneficiary's legal name? Arnold Abeng

What is the beneficiary's gender? Male

What is the beneficiary's date of birth? 10/19/1980

Are you requesting consideration under the INA 214(g)(5)(C) advanced degree exemption because the beneficiary has earned or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? Yes

What is the beneficiary's country of birth? Germany

What is the beneficiary's country of citizenship? Germany

What is the beneficiary's passport number? G0798-47640733

Beneficiary [Edit](#)

What is the beneficiary's legal name? Maria Cole

What is the beneficiary's gender? Female

What is the beneficiary's date of birth? 10/19/1980

Are you requesting consideration under the INA 214(g)(5)(C) advanced degree exemption because the beneficiary has earned or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? Yes

What is the beneficiary's country of birth? Germany

What is the beneficiary's country of citizenship? Germany

What is the beneficiary's passport number? G0798-47640733

Beneficiary [Edit](#)

What is the beneficiary's legal name? Katherine Johnson

What is the beneficiary's gender? Female

What is the beneficiary's date of birth? 10/19/1980

Are you requesting consideration under the INA 214(g)(5)(C) advanced degree exemption because the beneficiary has earned or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? Yes

What is the beneficiary's country of birth? Germany

What is the beneficiary's country of citizenship? Germany

What is the beneficiary's passport number? G0798-47640733

Beneficiary [Edit](#)

What is the beneficiary's legal name? Boris Vostanov

What is the beneficiary's gender? Female

What is the beneficiary's date of birth? 10/19/1980

Are you requesting consideration under the INA 214(g)(5)(C) advanced degree exemption because the beneficiary has earned or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? Yes

What is the beneficiary's country of birth? Germany

What is the beneficiary's country of citizenship? Germany

What is the beneficiary's passport number? G0798-47640733





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[Authorized Signatory Signature](#)

Authorized Signatory's Statement

You must read and agree to the statement below.

- I can read and understand English, and have read and understand every question and instruction on this registration, as well as my answer to every question.

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Summary

Authorized Signatory Signature

Authorized Signatory's Certification and Signature

You must read and agree to the certification below.



If submitting or authorizing this registration on behalf of an organization, by my signature, I certify that I am authorized to do so by the organization.

I authorize release of information contained in this registration to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I further certify, under penalty of perjury, that I have reviewed this registration and that all of the information contained in the registration is complete, true and correct and that I, or the organization on whose behalf this registration is being submitted, intend to file an H-1B petition on behalf of the beneficiary named in this registration if the beneficiary is selected.

I further certify that each registration represents a legitimate job offer and that the proffered wage on the petition will equal or exceed the wage level on the applicable registration.

I have read and agreed to the authorized signatory's statement.

Authorized Signatory's Signature

You must provide your electronic signature below by typing your full legal name. We may consider your registration to be invalid if you do not completely fill out and electronically sign this registration. We will record the date of your signature with your registration.

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About Registrant

About Beneficiary

Review and Submit

Review

Summary

Authorized Signatory
Signature

Pay for and submit your registration

The final step to submit your H-1B Registration is to pay the required fee.

Your registration fee: **\$XX.XX**

Refund Policy: USCIS does not refund fees, regardless of any action we take on your application, petition, or request. By continuing this transaction, you acknowledge that you must submit fees in the exact amount and that you are paying the fees for a government service.



We will send you to Pay.gov — our safe, secure payment website — to make your payment and submit your registration online.

Here are the steps in the payment and submission process:

1. Provide your billing information on Pay.gov
2. Provide your credit card or U.S. bank account information
3. Submit your payment

When you have paid your fee, your registration will be submitted.

Pay.gov will redirect you to a uscis.gov confirmation screen. You can track the status of your registration through your USCIS online account.

Pay and submit

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You have successfully submitted your H-1B Registration.

We will notify you when the selection process has ended. You can track the status of your registration through your USCIS account.

Each beneficiary has been assigned a confirmation number. This number is only associated with the submitted registration and cannot be used to track case status using Case Status Online.

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U.S. Citizenship and Immigration Services



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