



U.S. Citizenship and Immigration Services

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Step-by-Step Online Application

* Required fields

You currently do not have any cases pending or in draft status.

If you choose not to file your benefit request today, the system will save a draft of your benefit request for 30 days.

If you do not file your benefit request within 30 days, all drafts of your request will be deleted and your USCIS ELIS account will be deleted.

If your account is deleted you will need to create a new account in USCIS ELIS before you can file a new benefit request.

If you previously filed a benefit request in USCIS ELIS, your USCIS ELIS online account will not be deleted. In the future, only those benefit requests that remain in a "DRAFT" state will be deleted after 30 days.

Available Benefits*:

Application to Extend/Change Nonimmigrant Status
- Select one -
Application to Extend/Change Nonimmigrant Status

Apply Online

If your Representative has provided you a Case Passcode, click [Enter Case Passcode](#).

Customers of USCIS ELIS may submit benefit requests to extend or change their status (currently referred to as the Form I-539, Application to Extend/Change Nonimmigrant Status OMB No. 1615-0122, Expires 01/31/2015). Please refer to the chart below to see if your benefit request can be filed in USCIS ELIS.

If you want to...	And you...	Then
Extend status	are a... B-1,B-2,F-1*,M-1 or M-2	You can e-file in USCIS ELIS.
Change status	want to become a... B-1,B-2,F-1**,F-2,J-1,J-2,M-1 or M-2	
Reinstate status	were a... F-1*** or M-1***	

*Individuals in the F-1 classification who received a date-specific visa that requires completion of a given course of study within a specific time can extend status in USCIS ELIS. Other F-1s are admitted for duration of status and should contact their designated school official to extend status.

**An M-1 student may not change status to an F-1 student per 8 CFR 248.1(c)(1).

***The spouse or child of an F-1 or M-1 student may be included in the principal's benefit request.

Important Notes:

- USCIS captures your Internet Protocol address and your web browser information when you file a benefit request.
- USCIS cannot electronically process fee waivers at this time in USCIS ELIS. Document processing is completed.

If you choose not to file your benefit request today, the system will save a draft of your benefit request for 30 days.

If you do not file your benefit request within 30 days, all drafts of your request will be deleted and your USCIS ELIS account will be deleted.

If your account is deleted you will need to create a new account in USCIS ELIS before you can file a new benefit request.

If you previously filed a benefit request in USCIS ELIS, your USCIS ELIS online account will not be deleted. In the future, only those benefit requests that remain in a "DRAFT" state will be deleted after 30 days.

Available Benefits*:

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If you want to...	And you...	Then
Extend status	are a... B-1,B-2,F-1*,M-1 or M-2	You can e-file in USCIS ELIS.
Change status	want to become a... B-1,B-2,F-1**,F-2,J-1,J-2,M-1 or M-2	
Reinstate status	were a... F-1*** or M-1***	

*Individuals in the F-1 classification who received a date-specific visa that requires completion of a given course of study within a specific time can extend status in USCIS ELIS. Other F-1s are admitted for duration of status and should contact their designated school official to extend status.

**An M-1 student may not change status to an F-1 student per 8 CFR 248.1(c)(1).

***The spouse or child of an F-1 or M-1 student may be included in the principal's benefit request.

Important Notes:

- USCIS captures your Internet Protocol address and your web browser information when you file a benefit request.
- USCIS cannot electronically process fee waivers at this time in USCIS ELIS. Payment processing is completed entirely through Department of Treasury's secure Pay.gov system. USCIS will not store or have access to your payment or credit card information.
- NEVER give out your USCIS ELIS account number or password to another individual or allow another person to use your USCIS ELIS account and password to file a benefit request.



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* Indicates Required Field

Important Information about USCIS ELIS Accounts and Benefit Applications

Each person (other than your spouse and/or child), who wants to file a benefit request must create his or her own unique account in USCIS ELIS.

NEVER give out your USCIS ELIS account number or password to another individual or allow another person to use your USCIS ELIS account and password to file a benefit request.

The following individuals can create an account in USCIS ELIS:

- Customers who will be filing a benefit request for themselves;
- Attorneys and Accredited Representatives certified by the Board of Immigration Appeals (BIA);
- Parents of minors under the age of 14; and
- Legal guardians for incapacitated or severely disabled individuals.

NOTE: The parent or legal guardian must create a USCIS ELIS account in the name of the child or incapacitated person. The parent or legal guardian also must list himself as the preparer of the benefit request. You May be asked to submit document to show that you are the legal guardian of, and have authority to act on behalf of, the incapacitated or severely disabled individual for whom you prepare the benefit request.

The following individuals **cannot** create an account in USCIS ELIS:

- Notarios Públicos ("Notarios") and Visa/Immigration Consultants ("Consultants");
- Attorneys who have been suspended, terminated or disbarred by a State court or attorney disciplinary board;
- Representatives who are not authorized by USCIS or the BIA to represent USCIS customers.

When Attorneys or Accredited Representatives submit a completed benefit request for their client, USCIS ELIS automatically creates an "inferred" account for the client. This inferred account is not accessible by the client until he or she creates a user account in USCIS ELIS.

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Can my family or friends help me file a benefit request in USCIS ELIS?

Yes. Family members, neighbors, friends or paid preparers may assist you as you personally complete your benefit request online. They cannot complete your benefit request for you or submit it on your behalf. If you receive assistance in preparing your application, you must identify the person who assisted you by entering the person's name in the Preparer section.

How will I know if USCIS ELIS is temporarily unavailable?

USCIS ELIS will inform account holders who have logged into the system when the system is temporarily unavailable. USCIS also will notify its customers of any temporary system outages at www.uscis.gov. In the unlikely event of a prolonged delay in system availability, your benefit request will be addressed through the current paper filing process.

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Last Name (Family Name)*:

First Name (Given Name)*:

Middle Name*:

☐ No First NameCheck No First Name if you
do not have a first name☒ No Middle NameCheck No Middle Name if you
do not have a middle name

Have you ever used any names other than the name entered above?

[▶ Add Additional Page Information](#)**TIPS**

The name you provide must be the same as it appears on your passport, birth certificate, or other legal form of identification. If you only have one name, please provide it in the space for "Family Name" and select the option to indicate "No First Name" and "No Middle Name."

If you have ever used any other name(s), please select "Yes" and add any other name(s). Please insert only one name per addition. Examples of other names can include a maiden name, nicknames, part of a first or last name, or a shortened or altered version of a legal name.

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About You

Addresses

* Indicates Required Field

Physical Address

Street #:	Street Name*:	Apt./Suite #:
	Enter Your Address	
Country*:	City/Town*:	
United States	Enter Your Address	
State:	ZIP Code:	
Select	20001	
Province:	Postal Code:	

Mailing Address

Note: The USCIS will not mail official government correspondence including benefit request decision notices if a non-U.S. based address is submitted for the Mailing Address.

☒ Same as Physical Address

In Care of Name:

Street #:	Street Name or P.O. Box*:	Apt./Suite #:
	Enter Your Address	
Country*:	City/Town*:	
United States	Enter Your Address	
State:	ZIP Code:	
Select	20001	
Province:	Postal Code:	

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Address:

Please provide your current mailing and physical address in the United States. If they are the same, please check the box to indicate your mailing address is the same as your physical address.

USCIS will not mail any notices or decisions to an address outside the United States. Include your most recent address outside the United States, if you have one, under Supplemental Biographic Information -- Residence History in your benefit request.

Note: If you abbreviate Road (Rd), Street (St), etc., do not use a period (.). You will see an error message. Only alphanumeric characters(A-Z, 0-9), hyphens (-), commas (,), and apostrophes (') are allowed.

Note: Please provide a ZIP Code for any US address entered.

Note: USCIS encourages you to save your benefit request frequently.

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Application to Extend / Change Nonimmigrant Status



About You

Contact Preferences

* Indicates Required Field

Please provide your contact information.

Email

E-mail:

@uscis.dhs.gov

To change Email address, please go to View My Profile , click on Account tab then click Change Email Address

Contact Numbers

Mobile/Cell Phone:

123-123-1234

Work Phone:

123-123-1234

Extension:

If any

Home Phone:

123-123-1234

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USCIS will contact you via USPS mail. If you would prefer USCIS to contact you by email, you may select your preference and provide the requested information. It is important that you provide a correct telephone number in the event USCIS needs to contact you. If you need assistance, contact USCIS Customer Service at 1-800-375-5283 between the hours of 8am to 8pm in each U.S. time zone. (1-800-767-1833 TDD for people who are deaf or hard of hearing.)

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Application to Extend / Change Nonimmigrant Status



About You

Biographic Information

* Indicates Required Field

Are you currently a member of the U.S. Military?

Select

Date of Birth*

Month*

Day*

Year*

Select

Select

Select

Country of Birth*

City or Town of Birth:

Select

State of Birth

Province of Birth:

Select

Gender*

Select

Citizenship*

Country of Citizenship List

Country of Citizenship

Action

Country of Citizenship:

Select

Add

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Please provide your biographic information exactly as it appears on your birth certificate or other government-issued identity document.

Enter your date of birth using the MM/DD/YYYY format even if your birth certificate or other government-issued identity document uses a different format.

If you need assistance, contact USCIS Customer Service at 1-800-375-5283 between the hours of 8am to 8pm in each U.S. time zone. (1-800-767-1833 TDD for people who are deaf or hard of hearing.)

To avoid processing delays USCIS encourages you to answer all questions. Some fields become required based on your previous answers.

Note: USCIS encourages you to save your benefit request frequently.

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About You

Immigration

* Indicates Required Field

What was your immigration status at the time of your most recent arrival into the United States?

Select

Place of most recent arrival into the United States:

City or Town

Date of most recent arrival into the United States:

mm/dd/yyyy

Do you have a Form I-94/I-94W/I-95 Arrival-Departure Record Number OR an entry stamp in your passport to establish that you entered under the Visa Waiver Program Electronic System for Travel Authorization?*

Yes

Arrival-Departure Record Number:

12345678901

Your Form I-94,I-94W,I-95, or entry stamp placed on your Passport expires on:

mm/dd/yyyy

Do you have an alien registration number?*

No

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Please provide the U.S. Immigration Status you received when you entered the United States. For example, select the appropriate category - "B-1", "B-2", "F-1", "J-1", etc.

In most cases, you can determine your current immigration status by reviewing for example, your visa stamp, passport, admission document(s) or immigration officer stamp on your I-94.

Note: Not all Foreign Nationals are issued an I-94 on admission to the US.

The date field allows entries with or without the leading zeroes when entering the day/month. For example, February 1, YYYY can be entered as 2/1/YYYY or 02/01/YYYY.

- Name
- Addresses
- Contact Info
- Biographic Info
- Immigration
- Government ID



About You

Government Identification

* Indicates Required Field

USCIS must have information from an official government-issued identity document that belongs to you if you have one. This identity document **must** contain a photo.

Do you have a government-issued identity document?*

Yes

ID Type	Number	Expiration Date	Action
---------	--------	-----------------	--------

Add New ID Type

Government-issued Identity Type:

Passport

Passport Issuing Country:

Select

Passport Number*:

Passport Expiration Date:

mm/dd/yyyy

Add

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Photo Identification:

Please select the appropriate document type and provide the ID number for at least one of the listed documents. If you do not have a U.S. passport, an unexpired foreign passport, or a U.S. Driver's License, then select "Other Government ID". Examples of documents that fall under the "Other Government ID" category include foreign driver's licenses or military identification cards with your photograph. You will be required to submit electronically all documents listed as identity documents.

If you do not have any government-issued photo identity document, please provide an explanation in the space provided.

Please provide the ID number for at least one of the documents listed. You may wish to electronically submit the listed identification documents as evidence.

After 20 minutes of inactivity, you will be timed out of the system. If this occurs you must start again at the last saved section.

The date field allows entries with or without the leading zeroes when entering the day/month. For example, February 1, YYYY can be entered as 2/1/YYYY or 02/01/YYYY.



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APPLY ONLINE - FORMS AVAILABLE FOR ONLINE APPLICATION



Benefit Request Type

* Indicates Required Field

Select the one option below that best describes your intent:

- ☒ I am applying for an extension of stay in my current status and I am the only applicant.
- ☐ Members of my family and I are applying for an extension of stay in our current status and we are all seeking the same benefit.
- ☐ I am applying for a change of status and I am the only applicant.
- ☐ Members of my family and I are applying for a change of status and we are all seeking the same benefit.
- ☐ I am seeking a reinstatement to student status.
- ☐ Members of my family and I are seeking a reinstatement to student/student dependent status.

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TIPS

If you wish to extend your current lawful status, you must be in the same, lawful nonimmigrant status for which you are requesting an extension.

USCIS will determine your eligibility for a benefit based on the required information and documentation submitted with this request. Any other supplemental information that may be requested by USCIS or obtained from required background checks will also be used to determine your eligibility.

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Benefit Request Type

* Indicates Required Field

- All Benefit Request Progress Has Been Saved.

Select the one option below that best describes your intent:

- ☒ I am applying for an extension of stay in my current status and I am the only applicant.
- ☐ Members of my family and I are applying for an extension of stay in our current status and we are all seeking the same benefit.
- ☐ I am applying for a change of status and I am the only applicant.
- ☐ Members of my family and I are applying for a change of status and we are all seeking the same benefit.
- ☐ I am seeking a reinstatement to student status.
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TIPS

If you wish to extend your current lawful status, you must be in the same, lawful nonimmigrant status for which you are requesting an extension.

USCIS will determine your eligibility for a benefit based on the required information and documentation submitted with this request. Any other supplemental information that may be requested by USCIS or obtained from required background checks will also be used to determine your eligibility.

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Application to Extend / Change Nonimmigrant Status



Benefit Request Type

Single Extension of Stay

* Indicates Required Field

What is your current immigration status?*

B2

I request that my current status be extended until*:

mm/dd/yyyy

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Benefit Request Type:

Customers in C, D, K-1, K-2, K-3, K-4, S, WB, WT, or TWOV nonimmigrant status may not seek a change of nonimmigrant status.

If you need assistance, contact USCIS Customer Service at 1-800-375-5283 between the hours of 8am to 8pm in each U.S. time zone. (1-800-767-1833 TDD for people who are deaf or hard of hearing.)

The date field allows entries with or without the leading zeroes when entering the day/month. For example, February 1, YYYY can be entered as 2/1/YYYY or 02/01/YYYY.

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Eligibility Information

Arrival Departure Record

* Indicates Required Field

Do you currently have the Form I-94, I-94W, or I-95 issued to you in your possession?

Yes

You will be required to submit a copy, front and back, of Form I-94, Arrival-Departure Record, of each person included in this benefit request.

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Arrival/Departure Record
(Form I-94):

Most Foreign Nationals are issued a Form I-94, I-94W, or I-95 at the time of their admission to the United States, as well as when they change or extend their status.

If you were issued a Form I-94, I-94W, or I-95 and still have it in your possession, please select "Yes". You will be required to electronically submit a Form I-94, I-94W, or I-95 as evidence of your status when you file this benefit request.

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Are you filing this benefit request for status based on a Principal Alien's nonimmigrant status?

No

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A Principal Alien is a person who applies for or has nonimmigrant status, and based on their application or nonimmigrant status you are seeking to derive nonimmigrant status.

For example, If you are the spouse or child of an individual who has or is seeking F-1 student status, you may request F-2 dependent status.

If you need assistance, contact USCIS Customer Service at 1-800-375-5283 between the hours of 8am to 8pm in each U.S. time zone. (1-800-767-1833 TDD for people who are deaf or hard of hearing.)

After 20 minutes of inactivity, you will be timed out of the system. If this occurs you must start again at the last saved section.

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Eligibility Information

Education Information

* Indicates Required Field

Are you, or any other person included in this benefit request currently in, or, requesting a change to F, M, or J nonimmigrant status?

No

Are you a B-2 visitor applying to extend your stay, or are you applying to change your status to that of an F-1 or M-1 student?

No

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Changing your Status to an F-1 or M-1 Student:

You must electronically submit documentation that demonstrates you or someone else has the ability to pay for your studies, and support you while you are in the United States.

InfoPass

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Application to Extend / Change Nonimmigrant Status

Eligibility Information

Education Information

Are you, or any other person included in this benefit request currently in, or, requesting a change to F, M, or J nonimmigrant status? No

Are you a B-2 visitor applying to extend your stay, or are you applying to change your status to that of an F-1 or M-1 student? Yes

Person/People who will provide financial support:

Provide the following information concerning how you will support yourself financially in the United States in your requested status. Complete all that apply:

Last Name First Name

Enter applicant's name Enter applicant's name

Middle Name

Enter applicant's name

Amount of financial support to be provided per month:

\$5000.00

\$1,234.56

Relationship of person/people to the applicant in this case:

Self

Scholarship or grant from educational institution in the amount of:

\$1,234.56

Add Additional Page Information

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TIPS

Changing your Status to an F-1 or M-1 Student:

You must electronically submit documentation that demonstrates you or someone else has the ability to pay for your studies, and support you while you are in the United States.



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Eligibility Information

J1/J2 Visa

* Indicates Required Field

Are you, or any other person included in this benefit request, in a current J1 or J2 nonimmigrant status?

No

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TIPS

Some J-1 and J-2 exchange visitors are subject to the 2-year foreign residency requirement (Immigration and Nationality Act in Section 212(e)).

The J-1 and, in some cases, their J-2 dependents are required to return to their home country for 2 years at the end of the J-1 program.

In most cases, the "J" visa stamp issued by the U.S. Department of State will indicate whether or not you are subject to the 2 year foreign residency requirement.

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Eligibility Information

Immigrant Visa

* Indicates Required Field

Are you, or any other person included in this benefit request, currently an applicant for an immigrant visa or adjustment of status?

No

To your knowledge, are you, or any other person included on this benefit request the beneficiary of any other nonimmigrant or immigrant application or petition?

No

Has Form I-485, Application to Register Permanent Residence or Adjust Status, ever been filed by you or by any other person included in this benefit request?

No

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TIPS

An immigrant visa allows you to travel to the United States and apply for admission as a lawful permanent resident (LPR).

To apply for an immigrant visa, a foreign citizen must be sponsored by a U.S. citizen relative(s), U.S. lawful permanent resident, or by a prospective employer, and be the beneficiary of an approved petition filed with the USCIS.

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Eligibility Information

Background Questions

* Indicates Required Field

Have you, or any other person included in this benefit request, EVER been arrested, charged, cited, or detained by any law enforcement officer (including USCIS or former INS and military officers) for any reason?*

No

Have you, or any other person included in this benefit request, EVER been convicted of a crime or offense?*

No

Have you, or any other person included in this benefit request, EVER been in exclusion, deportation, or removal proceedings?*

No

Have you, or any other person included in this benefit request, EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

Acts involving torture?*

No

Acts involving genocide?*

No

Killing any person/people?*

No

Intentionally and severely injuring any person/people?*

No

Engaged in any kind of sexual contact or relationship with any person/people who were being forced or threatened?*

No

Limited or denied any person's ability to exercise their religious beliefs?*

No

Have you, or any other person included in this benefit request, EVER:

Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, or insurgent organization?*

No

Worked in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?*

No

Been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?*

No

Assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?*

No

TIPS

This series of questions is related to your admissibility to the United States or other eligibility for this benefit request.

If you answer "Yes" to any question in this section, you will be required to provide an explanation and all relevant information about the incident or situation in question.

If you need assistance, contact USCIS Customer Service at 1-800-375-5283 between the hours of 8am to 8pm in each U.S. time zone. (1-800-767-1833 TDD for people who are deaf or hard of hearing.)

After 20 minutes of inactivity, you will be timed out of the system. If this occurs you must start again at the last saved section.

Acts involving genocide?*

No

Killing any person/people?*

No

Intentionally and severely injuring any person/people?*

No

Engaged in any kind of sexual contact or relationship with any person/people who were being forced or threatened?*

No

Limited or denied any person's ability to exercise their religious beliefs?*

No

Have you, or any other person included in this benefit request, EVER:

Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, or insurgent organization?*

No

Worked in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?*

No

Been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?*

No

Assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?*

No

Received any type of military, paramilitary, or weapons training?*

No

Have you or any person included in this benefit request been employed in the United States since your or his or her last entry into the United States or the day of his or her last grant of an extension or change of status?*

No

Have you, or any other person included in this benefit request remained in the United States past your or his or her authorized period of stay?*

No

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After 20 minutes of inactivity, you will be timed out of the system. If this occurs you must start again at the last saved section.

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Supplemental Biographic Information

Employment History

* Indicates Required Field

Employment History

Employer Name	Start Date	End Date	Action
---------------	------------	----------	--------

Add Employment Record

Employer Name: Date Employment Began: Date Employment Ended:
mm/dd/yyyy mm/dd/yyyy

Occupation:

Employer Address

Street #: Street Name:
Country: City/Town:
State: ZIP Code:
Province: Postal Code:

Add

► Add Additional Page Information

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TIPS

Please provide information about all your previous and current employers for the last five years starting with the most recent employer first.

After 20 minutes of inactivity, you will be timed out of the system. If this occurs you must start again at the last saved section.

To avoid processing delays USCIS encourages you to answer all questions. Some fields become required based on your previous answers.

The date field allows entries with or without the leading zeroes when entering the day/month. For example, February 1, YYYY can be entered as 2/1/YYYY or 02/01/YYYY.



Supplemental Biographic Information

Education History

* Indicates Required Field

Education History

Educational Institution	Start Date	End Date	Action
-------------------------	------------	----------	--------

Add New Education Record

Educational Institution Name:

Degree Received:

Major Field of Study:

Date of Attendance From:

mm/dd/yyyy

Date of Attendance To:

mm/dd/yyyy

Educational Institution Location

Country:

City/Town:

State:

ZIP Code:

Province:

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Supplemental Biographic Information

Residence History

* Indicates Required Field

Residence History

Address	Start Date	End Date	Action
---------	------------	----------	--------

Add Prior Address

Prior Address

Street #:	Street Name:	Apt./Suite #:
Country:	City/Town:	
Select		
State:	ZIP Code:	
Select		
Province:	Postal Code:	

On or about what date did you begin residing at the listed address:

mm/dd/yyyy

On or about what date did you stop residing at the listed address:

mm/dd/yyyy

Add

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TIPS

Please provide information about all your current and previous residences for the last five years starting with the most recent residence first.

In each field enter the date you began and the date you stopped living at each address using the month-day-year format (mm/dd/yyyy).

Click "Add" when you have finished.



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Upload Evidence

Upload Information

* Indicates Required Field

Acceptable File Standards: In order to process your Application to Extend/Change Nonimmigrant Status case, please add the requested evidence in the following file types (examples: .bmp, .doc, .jpg, .pdf, .tif) which **cannot exceed 6 megabytes (MB) per file**. [List of All Acceptable File Standards](#)

Scanned Images: If you are scanning your documents, please set the scan resolution to 300 DPI.

Responses & Comments: All evidence responses and comments must be provided in English.

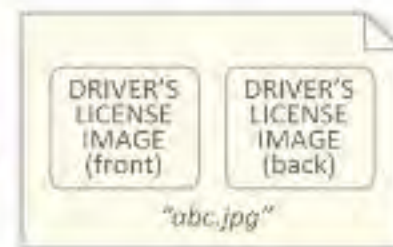
✓ Acceptable

Save each document type in a separate file.

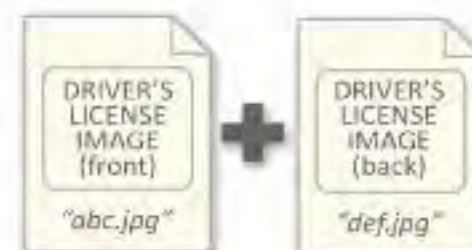


OR

If possible, keep pages to the same document type in one file.



Documents separated into multiple files should use unique file names.



⊘ Not Acceptable

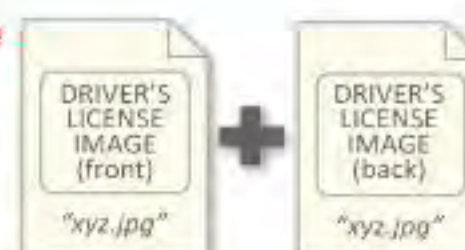
Do NOT save documents for multiple individuals to the same file.



Do NOT save multiple document types to the same file.



Do NOT use duplicate file names.



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Upload Evidence

Evidence Needed

* Indicates Required Field

The following is the list of evidence needed by USCIS in order to process your Application to Extend/Change Nonimmigrant Status case.

Please review and click "Next" when you are ready to begin providing evidence online.

All responses and comments must be provided in *English*.

+ Expand All / - Collapse All

Evidence Request For FirstName LastName - Primary Applicant

▼ Correspondence

You must provide at least **ONE** type of evidence for **Correspondence** support.

Respond With	Description
Medical information/Doctor Letter	A letter from a treating physician(s) that must state the following: 1) Date of Initial Consultation; 2) Diagnosis of the medical condition; 3) Whether the condition is considered acute or chronic; 4) Treatment prescribed and duration of treatment required; 5) If the physician is familiar with the availability of treatment in your home country, the physician should give an opinion on the quality and availability of the treatment.
Reason for Visit	A statement explaining in detail, each of the following: 1) The reason for the request; and 2) Why the extended stay will be temporary.

▼ Financial

You must provide at least **ONE** type of evidence for **Financial** support.

Respond With	Description
Affidavit of Support (I134)	A copy of an Affidavit of Support (I-134) demonstrating sponsorship by another individual.
Any Other Financial Evidence	Any other evidence that demonstrates you have sufficient funds to sustain yourself while in the United States.
Bank Statements	A copy of bank statements in the applicant's name.
Credit Card Statements	A copy of credit card statements in the applicant's name demonstrating sufficient funds for the duration of the visit to the United States.
Financial Transactions	A record of the exchange of goods or services for payment that provide evidence of sufficient funds.

▼ Identity

You must provide at least **ONE** type of evidence for **Identity** support.

Respond With	Description
Any Other Identity Evidence	Any other evidence that supports the identity information on the application.

Affidavit of Support (I134)	A copy of an Affidavit of Support (I-134) demonstrating sponsorship by another individual.
Any Other Financial Evidence	Any other evidence that demonstrates you have sufficient funds to sustain yourself while in the United States.
Bank Statements	A copy of bank statements in the applicant's name.
Credit Card Statements	A copy of credit card statements in the applicant's name demonstrating sufficient funds for the duration of the visit to the United States.
Financial Transactions	A record of the exchange of goods or services for payment that provide evidence of sufficient funds.

▼ Identity

You must provide at least **ONE** type of evidence for **Identity** support.

Respond With	Description
Any Other Identity Evidence	Any other evidence that supports the identity information on the application.
Drivers License/State ID	A copy of a U.S. driver's license issued by a government authority.
Passport Foreign	A legible copy of a foreign passport. Include only copies of pages showing the passport number, date of issue and expiration, photo, name, surname (family name), date, and place of birth. Uploading documentation of any blank pages in the passport is not required.
Passport US	A legible copy of a United States passport. Include only copies of pages showing the passport number, date of issue and expiration, photo, name, surname (family name), date and place of birth. Uploading documentation of any blank pages in the passport is not required.
Statement of Unavailable Identity Evidence	A statement as to why none of the requested identity evidence is available for submission.

▼ Immigration Status

You must provide at least **ONE** type of evidence for **Immigration Status** support.

Respond With	Description
Arrival/Departure Record	An I-94/I-94W/I-95 Arrival-Departure Record, demonstrating arrival-departure information and current nonimmigrant status.
Passport Stamp	A copy of an entry stamp on a passport that demonstrates: 1) Arrival-departure information; 2) Current nonimmigrant status; and/or 3) The familial relationship between multiple benefit seekers.

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Evidence

Manage Evidence

* Indicates Required Field

You must provide the needed evidence by adding a document or providing an explanation of no evidence. Incomplete information and/or unavailable evidence requires an explanation.

Correspondence (FirstName LastName - Primary Applicant)

Add Document

Please provide evidence or explanation of no evidence.

▼ Provide Comments

Enter Comments:

I want to do more sight seeing.

Financial (FirstName LastName - Primary Applicant)

Add Document

Please provide evidence or explanation of no evidence.

▼ Provide Comments

Enter Comments:

I do not have copies of my bank statements.

Identity (FirstName LastName - Primary Applicant)

Add Document

Financial (FirstName LastName - Primary Applicant)

[Add Document](#)

Please provide evidence or explanation of no evidence.

▼ Provide Comments

Enter Comments:

I do not have copies of my bank statements.

Identity (FirstName LastName - Primary Applicant)

[Add Document](#)

Please provide evidence or explanation of no evidence.

► Provide Comments

[Any Other Identity Evidence](#)[Drivers License/State ID](#)[Passport Foreign](#)[Passport U.S.](#)

Immigration Status (FirstName LastName - Primary Applicant)

[Add Document](#)

Please provide evidence or explanation of no evidence.

► Provide Comments

If you do not wish to upload evidence at this time, you can [Skip Upload](#)

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Evidence

Select and Add File

* Indicates Required Field

You have selected to provide evidence documentation for:

Evidence Needed: Identity (FirstName LastName - Primary Applicant)

Document Type: Passport Foreign

You can add up to 5 separate files at a time as evidence for Immigration Status.

+ Expand All / - Collapse All

▼ Upload File #1

1. What file are you adding?

Click "Browse" to select the appropriate file on your computer

File Name:

Browse...

[List of All Acceptable File Standards](#)

Max File size limit 6.0 MB

Examples:



► Upload File #2

► Upload File #3

► Upload File #4

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Evidence

Added Files

* Indicates Required Field

Your Added Files

NOTE: The files displayed on this list have *NOT* been uploaded and submitted to USCIS. You must finalize your response and submit your files as evidence to USCIS.

FILE NAME	EVIDENCE NEEDED	DOCUMENT TYPE	VIEW FILE	ACTION
Evidence.pdf	Identity (FirstName LastName - Primary Applicant)	Passport Foreign		

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Evidence

Manage Evidence

* Indicates Required Field

You must provide the needed evidence by adding a document or providing an explanation of no evidence. Incomplete information and/or unavailable evidence requires an explanation.

Correspondence (FirstName LastName - Primary Applicant)

Add Document

Please provide evidence or explanation of no evidence.

► Provide Comments

Financial (FirstName LastName - Primary Applicant)

Add Document

Please provide evidence or explanation of no evidence.

► Provide Comments

Identity (FirstName LastName - Primary Applicant)

Add Document

Document Type	File Name	Action
Passport Foreign	Evidence.pdf	

► Provide Comments

Immigration Status (FirstName LastName - Primary Applicant)

Add Document

Arrival/Departure Record

Passport Stamp

Please provide evidence or explanation of no evidence.

► Provide Comments

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Evidence

Select and Add File

* Indicates Required Field

You have selected to provide evidence documentation for:

Evidence Needed: Immigration Status (FirstName LastName - Primary Applicant)

Document Type: Passport Stamp

You can add up to 5 separate files at a time as evidence for Immigration Status.

+ Expand All / - Collapse All

▼ Upload File #1

1. What file are you adding?

Click "Browse" to select the appropriate file on your computer

File Name:

Browse...

[List of All Acceptable File Standards](#)

Max File size limit 6.0 MB

Examples:



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► Upload File #3

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Application to Extend / Change Non-immigrant Status



Evidence

Added Files

* Indicates Required Field

Your Added Files

NOTE: The files displayed on this list have *NOT* been uploaded and submitted to USCIS. You must finalize your response and submit your files as evidence to USCIS.

FILE NAME	EVIDENCE NEEDED	DOCUMENT TYPE	VIEW FILE	ACTION
Evidence.pdf	Identity (FirstName LastName - Primary Applicant)	Passport Foreign		
Evidence.pdf	Immigration Status (FirstName LastName - Primary Applicant)	Passport Stamp		

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Evidence

Manage Evidence

* Indicates Required Field

You must provide the needed evidence by adding a document or providing an explanation of no evidence. Incomplete information and/or unavailable evidence requires an explanation.

Correspondence (FirstName LastName - Primary Applicant)

Add Document

Please provide evidence or explanation of no evidence.

► Provide Comments

Financial (FirstName LastName - Primary Applicant)

Add Document

Please provide evidence or explanation of no evidence.

► Provide Comments

Identity (FirstName LastName - Primary Applicant)

Add Document

Document Type	File Name	Action
Passport Foreign	Evidence.pdf	

► Provide Comments

Immigration Status (FirstName LastName - Primary Applicant)

Add Document

Document Type	File Name	Action
---------------	-----------	--------

Financial (FirstName LastName - Primary Applicant)

[Add Document](#)

Please provide evidence or explanation of no evidence.

[► Provide Comments](#)

Identity (FirstName LastName - Primary Applicant)

[Add Document](#)

Document Type	File Name	Action
Passport Foreign	Evidence.pdf	

[► Provide Comments](#)

Immigration Status (FirstName LastName - Primary Applicant)

[Add Document](#)

Document Type	File Name	Action
Passport Stamp	Evidence.pdf	

[► Provide Comments](#)

If you do not wish to upload evidence at this time, you can [Skip Upload](#)

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Evidence

Review Evidence

* Indicates Required Field

Your Evidence Documentation

Please review the evidence provided below. If you wish to make any changes please return to Manage Evidence to update or add any evidence documentation.

FILE NAME	EVIDENCE NEEDED	DOCUMENT TYPE	VIEW FILE
Evidence.pdf	Identity (FirstName LastName - Primary Applicant)	Passport Foreign	
Evidence.pdf	Immigration Status (FirstName LastName - Primary Applicant)	Passport Stamp	

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Preparer

* Indicates Required Field

The questions on this benefit request were:

☒ Read by me, or to me, in the English language.

☐ Translated to me in the language below.

Translated to me in this language:

If translated, the translation was performed by

-- Select --

USCIS requires the disclosure of any person other than the applicant or petitioner who prepared or assisted in preparing this benefit request. If the person that helped you complete this benefit request only helped you by providing or helping you use a computer or electrical equipment to complete this benefit request, you do not need to provide that person's information or complete this section.

Did you prepare this benefit request yourself?

Yes

► Add Additional Page Information

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TIPS

The preparer is a U.S. State bar licensed attorney in good standing or BIA-accredited representative who will be representing the applicant or petitioner with the USCIS.

Assistance with Online Benefit Request - If you are applying for this benefit request and you have received help in completing this application online from a person who is not (1) a U.S. licensed attorney representing you before USCIS, (2) a qualified representative approved by the Board of Immigration Appeals or USCIS, (3) a legal guardian, or (4) a parent completing this request on behalf of a child who is under the age of 14 years, the person who assisted you MUST complete this section.

If you need assistance, contact USCIS Customer Service at 1-800-375-5283 between the hours of 8am to 8pm in each U.S. time zone. (1-800-767-1833 TDD for people who are deaf or hard of hearing.)

USCIS will be capturing your Internet Protocol (IP) address and browser information with your submission.

**FORMS****NEWS****RESOURCES****LAWS****OUTREACH****ABOUT US**[Benefit Home](#)[About You](#)[Benefit Request](#)[Eligibility Info](#)[Beneficiary Info](#)[Supplementary Info](#)[Upload Evidence Info](#)[Preparer Info](#)[Application Review](#)[Submission and E Sign](#)[Payment](#)**Application to Extend / Change Nonimmigrant Status****Benefit Request Review**** Indicates Required Field*

Please review the associated fees with your benefit request.

If you need to modify any part of your application, use the navigation tabs on the left to go to that section.

Primary Applicant	Fee
Application to Extend/Change Non-Immigrant Status	\$290
Total Cost for Primary Applicant	\$290
Total Cost of Benefit Application:	
\$290	

[Back](#)[Exit](#)[Save](#)[Next](#)**TIPS**

You can remove a co-applicant from the benefit request at this time prior to submission. All related information will be removed from the benefit request as well.

Please note, if you wish to add the co-applicant you will be required to go back and complete the co-applicant's information again.

After 20 minutes of inactivity, you will be timed out of the system. If this occurs you must start again at the last saved section.

If you need assistance, contact USCIS Customer Service at 1-800-375-5283 between the hours of 8am to 8pm in each U.S. time zone. (1-800-767-1833 TDD for people who are deaf or hard of hearing.)

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Submission & E-Sign

Review Benefit Data

* Indicates Required Field

The file you have opened complies with the PDF/A standard and has been opened read-only to prevent modification.

TIPS

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Electronic Filing Only



USCIS Electronic Application to Extend / Change Nonimmigrant Status

Department of Homeland Security
U.S. Citizenship and Immigration Services (USCIS)

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This document is a printable version of your electronically submitted information as of Wednesday Oct 10 2012 3:54:14 PM EDT
All time stamps shown on this snapshot should be considered as representing the same time zone that appears to the stamp shown here

Part 1. Information About You

Account Information

1. Do you have a USCIS Account Identifier?
☐ Yes ☐ No
2. Do you have an Alien Registration Number (A Number)?
☐ Yes ☒ No A-

Name(s)

- 3.a. Last Name (Family Name)
- 3.b. First Name (Given Name)
- 3.c. Middle Name
- 3.d. No First Name ☐
- 3.e. No Middle Name ☐
- 3.f. Have you ever used any other names other than the name entered above?
☐ Yes ☐ No

Addresses

Physical Address

- 4.a.1. Street Number
- 4.a.2. Street Name or P.O. Box
- 4.a.3. Apartment / Suite Number
- 4.a.4. City or Town
- 4.a.5. State
- 4.a.6. ZIP Code
- 4.a.7. Province
- 4.a.8. Postal Code
- 4.a.9. Country

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E-Sign



Application to Extend / Change Nonimmigrant Status

Submission & E-Sign

E-Sign

* Indicates Required Field

E-Signature Attestation

Benefit Seeker - I understand that submitting this benefit request and information does not in itself grant me any immigration status or any benefit. By my signature, I certify, swear or affirm, under penalty of perjury under the laws of the United States of America, that all information and evidence submitted to establish and maintain this account and to seek this benefit is true and correct. I authorize the release of any information from my records that the U.S. Citizenship and Immigration Services (USCIS) or another U.S. Federal agency should need at any time to determine eligibility for any immigration benefit, document, or service sought, including the Social Security Administration, Internal Revenue Service, Department of Justice, Department of State, Department of Labor, and any vital statistics bureau, licensing entity, or state benefit agency. By my signature, I acknowledge that I understand under section 262 of the Immigration and Nationality Act (INA), if I am an alien who has been or will be in the United States for more than 30 days, I am required to register with USCIS. I understand and acknowledge that, under section 265 of the INA, I am required to provide USCIS with my current physical address and written notice of any change of physical address within 10 days of the change. I understand that USCIS will use the most recent physical address that I provide for all future

☒ * I have read and agree to the above E-Signature Attestation and the Privacy Act Statement and I have reviewed and responded to all the questions on this benefit request.

SIGNATURE:

Full Name: *

Enter Your Full Name

Enter your full legal name as it appears in your official government-issued identity document.

USCIS ELIS Password:*

••••••••

Enter your USCIS ELIS Online Account password.

NOTE:

Your typed written full legal name and corresponding USCIS ELIS password submitted electronically as part of this document signifies you as the identified signatory.

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Submission & E-Sign

Review Benefit Data

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- Please be patient while the E-Sign process completes...

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Payment

* Indicates Required Field

Case E-Signed Successfully.

You can now submit payment at this time. USCIS will not process your case until payment is received in full. Electronic payments are processed by Pay.gov, a secure United States government website.

Item Description	Fee
Application to Extend/Change Non-Immigrant Status	\$290
Total Cost:	\$290

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TIPS

Windows Internet Explorer



Do you really want to EXIT the Benefit Request Application process?

OK

Cancel



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Efile Exit

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You have successfully exited out of the Benefit Request Application



You can track the progress of your benefit applications or
continue the request process from the View My Cases.

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Message

From: csr@uscis.dhs.gov
To: Chung, Joseph W (CTR)
Cc:
Subject: Cancellation of Online Access

Sent: Fri 11/9/2012 5:01 AM

According to our records, you initiated a request for online access with U.S. Citizenship and Immigration Services (USCIS) on 10/09/2012. However, a benefit request must be started within 30 calendar days from the date you initially request online access, and a benefit request must be completed within 30 calendar days from the date it was started. Unfortunately, the time to complete and submit your benefit request in ELIS has expired.

Therefore, the account that was created on 10/09/2012 has been deleted.

If you would like to create a new account for online access to USCIS ELIS, please use this link and follow the instructions for creating a new account:

<https://public.trn-cist.devtecc.uscis.dhs.gov/cislogin/login>

If you have any questions, please contact customer service at (800) 375-5283 or (800) 767-1833 (TTY) or e-mail us at AccountHelp@uscis.gov, for assistance.

PLEASE DO NOT REPLY TO THIS MESSAGE.

joseph.w.chung@uscis.dhs.gov

20121009153952Z