



# Application to Extend/Change Nonimmigrant Status

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-539  
OMB No. 1615-0003  
Expires 12/31/2015

For USCIS Use Only		Fee Stamp	Action Block
Returned			
Resubmitted			
Relocated	Received Sent		
Remarks:	<input type="checkbox"/> <b>Granted</b>	<input type="checkbox"/> <b>Denied</b>	<input type="checkbox"/> <b>Applicant interviewed on</b> _____
	New Class _____	<input type="checkbox"/> Still within period of stay	
	Dates: From ____/____/____ To ____/____/____	<input type="checkbox"/> S/D to: _____ <input type="checkbox"/> Place under docket control	

**To Be Completed by an Attorney or Representative, if any.** ☐ Fill in box if G-28 is attached to represent the applicant.  
Attorney State License Number: \_\_\_\_\_

► **START HERE - Type or print in black ink.**

## Part 1. Information About You

1.a. Family Name (Last Name) \_\_\_\_\_  
1.b. Given Name (First Name) \_\_\_\_\_  
1.c. Middle Name \_\_\_\_\_

5. Country of Citizenship \_\_\_\_\_

6. Date of Birth (mm/dd/yyyy) ► \_\_\_\_\_

7. U.S. Social Security Number (if any) ► \_\_\_\_\_

8. Date of Last Arrival Into the U.S. (mm/dd/yyyy) ► \_\_\_\_\_

9.a. I-94 Arrival/Departure Record Number ► \_\_\_\_\_

9.b. Passport Number \_\_\_\_\_

9.c. Travel Document Number \_\_\_\_\_

9.d. Country of Issuance for Passport or Travel Document \_\_\_\_\_

9.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy) ► \_\_\_\_\_

10. Current Nonimmigrant Status \_\_\_\_\_

11. Expires on (mm/dd/yyyy) ► \_\_\_\_\_

## Physical Address

2.a. In Care Of Name \_\_\_\_\_

2.b. Street Number and Name \_\_\_\_\_

2.c. Apt. ☐ Ste. ☐ Flr. ☐ \_\_\_\_\_

2.d. City or Town \_\_\_\_\_

2.e. State \_\_\_\_\_ 2.f. Zip Code \_\_\_\_\_

## Other Information

3. Alien Registration Number (A-Number) ► A- \_\_\_\_\_

4. Country of Birth \_\_\_\_\_

**Part 2. Application Type** *(See instructions for fee)*I am applying for: *(Check one)*

- 1.a. ☐ An extension of stay in my current status.
- 1.b. ☐ A change of status. The new status I am requesting is:

- 1.c. ☐ Reinstatement to student status.

Number of people included in this application: *(Check one)*

- 2.a. ☐ I am the only applicant.
- 2.b. ☐ Members of my family are filing this application with me.

The total number of people (including me) in the application is: *(Complete the supplement for each co-applicant.)*

2.b.1.

**Part 3. Processing Information**

1. I/We request that my/our current or requested status be extended until  
(mm/dd/yyyy) ►

2. Is this application based on an extension or change of status already granted to your spouse, child, or parent?  
☐ Yes ☐ No

- 2.a. If "Yes", provide USCIS Receipt #  
►

3. Is this application based on a separate petition or application to give your spouse, child, or parent an extension or change of status?  
☐ Yes, filed with this I-539. ☐ No  
☐ Yes, filed previously and pending with USCIS.

- 3.a. If pending with USCIS, provide USCIS Receipt #  
►

If the petition or application is pending with USCIS, also give the following data.

- 3.a.1. First and last name of petitioner or applicant

Office filed at:

- 3.a.2. City or Town

- 3.a.3. State

- 3.a.4. Filed on (mm/dd/yyyy) ►

**Part 4. Additional Information**

For Principal Applicant, provide Passport information:

- 1.a. Country of Issuance
- 1.b. Valid to (mm/dd/yyyy) ►

**Foreign Address**

- 2.a. Street Number and Name
- 2.b. Apt. ☐ Ste. ☐ Flr. ☐
- 2.c. City or Town
- 2.d. Postal Code
- 2.e. Province
- 2.f. Country

Answer the following questions. If you answer "Yes" to any question, describe the circumstances in detail and explain on a separate sheet of paper.

3. Are you, or any other person included on the application, an applicant for an immigrant visa? ☐ Yes ☐ No
4. Has an immigrant petition ever been filed for you or for any other person included in this application? ☐ Yes ☐ No
5. 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 application? ☐ Yes ☐ No

6. Have you, or any other person included in this application, ever been arrested or convicted of any criminal offense since last entering the United States? ☐ Yes ☐ No

Have you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

7. Acts involving torture or genocide? ☐ Yes ☐ No
8. Killing any person? ☐ Yes ☐ No
9. Intentionally and severely injuring any person? ☐ Yes ☐ No
10. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened? ☐ Yes ☐ No
11. Limiting or denying any person's ability to exercise religious beliefs? ☐ Yes ☐ No

#### Part 4. Additional Information (continued)

12. Have you 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, guerrilla group, militia, or insurgent organization? ☐ Yes ☐ No
13. Have you EVER served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? ☐ Yes ☐ No
14. Have you EVER 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? ☐ Yes ☐ No
15. Have you EVER 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? ☐ Yes ☐ No
16. Have you EVER received any type of military, paramilitary, or weapons training? ☐ Yes ☐ No
17. Have you, or any other person included in this application, done anything that violated the terms of the nonimmigrant status you now hold? ☐ Yes ☐ No
18. Are you, or any other person included in this application, now in removal proceedings? ☐ Yes ☐ No
19. Have you, or any other person included in this application, been employed in the United States since last admitted or granted an extension or change of status? ☐ Yes ☐ No

If you answered "Yes" to number 18, give the following information concerning the removal proceedings on the attached page entitled "**Part 4. Additional Information for Answers to Numbers 18 and 19**" Include the name of the person in removal proceedings and information on jurisdiction, date proceedings began, and status of proceedings.

If you answered "No" to number 19, fully describe how you are supporting yourself on the attached page entitled "**Part 4. Additional Information for Answers to Numbers 18 and 19.**" Include the source, amount, and basis for any income.

If you answered "Yes" to number 19, fully describe the employment on the attached page entitled "**Part 4. Additional Information for Answers to Numbers 18 and 19.**" Include the name of the person employed, name and address of the employer, weekly income, and whether the employment was specifically authorized by USCIS.

20. Are you currently or have you ever been a J-1 exchange visitor or a J-2 dependent of a J-1 exchange visitor? ☐ Yes ☐ No

If "Yes," you must provide the dates you maintained status as a J-1 exchange visitor or J-2 dependent. Willful failure to disclose this information (or other relevant information) can result in your application being denied. Also, provide proof of your J-1 or J-2 status, such as a copy of Form DS-2019, Certificate of Eligibility for Exchange Visitor Status, or a copy of your passport that includes the J visa stamp.

#### Part 5. Applicant's Statement (Read the information on penalties in the instructions before completing this section. You must file this application while in the United States.)

##### Applicant's Statement (Check One):

- 1.a. ☐ I can read and understand English, and have read and understand each and every question and instruction on this form, as well as my answer to each question.
- 1.b. ☐ Each and every question and instruction on this form, as well as my answer to each question, has been read to me by the person named below:

\_\_\_\_\_

in a language in which I am fluent. I understand each and every question and instruction on this form, as well as my answer to each question.

#### Part 6. Signature of Applicant (Read the information on penalties in the instructions before completing this section. You must file this application while in the United States.)

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it is all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking.

1. Signature of Applicant

\_\_\_\_\_

2. Date of Signature (mm/dd/yyyy) ►

\_\_\_\_\_

3. Daytime Phone Number ( ) -

\_\_\_\_\_-\_\_\_\_

4. Mobile Phone Number ( ) -

\_\_\_\_\_-\_\_\_\_

5. E-Mail Address

\_\_\_\_\_

**NOTE:** If you do not completely fill out this form or fail to submit required documents listed in the instructions, you may not be found eligible for the requested benefit and this application may be denied.

## Part 7. Interpreter's Statement

1. Language Used

I certify that I am fluent in English and the above-mentioned language. I further certify that I have read each and every question and instruction on this form, as well as the answer to each question, to this applicant in the above-mentioned language, and the applicant has understood each and every instruction and question on the form, as well as the answer to each question.

2.a. Interpreter's Family Name (*Last Name*)

2.b. Interpreter's Given Name (*First Name*)

3. Interpreter's Business or Organization Name

## Interpreter's Mailing Address

4.a. Street Number and Name

4.b. Apt. ☐ Ste. ☐ Flr. ☐

4.c. City or Town

4.d. State

4.e. Zip Code

4.f. Postal Code

4.g. Province

4.h. Country

5. Daytime Phone Number ( ) -

6. Fax Number ( ) -

7. E-Mail Address

8.a. Signature of Interpreter

8.b. Date of Signature (*mm/dd/yyyy*) ►

## Part 8. Signature of Person Preparing This Application, If Other Than the Applicant

Provide the following information concerning the preparer:

1.a. Preparer's Family Name (*Last Name*)

1.b. Preparer's Given Name (*First Name*)

2. Preparer's Business or Organization Name

## Preparer's Contact Information

4. Preparer's Daytime Phone Number

Extension

5. Preparer's E-mail Address (*if any*)

## Declaration

To be completed by all preparers, including attorneys and authorized representatives: I declare that I prepared this benefit request 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.

6.a. Signature of Preparer

6.b. Date of Signature (*mm/dd/yyyy*) ►

## Preparer's Mailing Address

3.a. Street Number and Name

3.b. Apt. ☐ Ste. ☐ Flr. ☐

3.c. City or Town

3.d. State

3.e. Zip Code

3.f. Postal Code

3.g. Province

3.h. Country

**Part 4. (continued) Additional Information for Answers to Numbers 18 and 19.**

**If you answered "Yes" to number 18** in Part 4 of this form, give the following information concerning the removal proceedings. Include the name of the person in removal proceedings and information on jurisdiction, date proceedings began, and status of proceedings.

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If you answered "Yes" to number 19** in Part 4 of this form, 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.

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If you answered "No" to number 19** in Part 4 of this form, fully describe how you are supporting yourself. Include the source, amount and basis for any income.

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Supplement-1. Attach to Form I-539 when more than one person is included in this application. (List each person separately. Do not include the person named in Form I-539.)**

**Person 1**

**1.a.** Family Name (Last Name)

**1.b.** Given Name (First Name)

**1.c.** Middle Name

**1.d.** Date of Birth (mm/dd/yyyy) ►

**1.e.** Country of Birth

**1.f.** Country of Citizenship

**1.g.** U.S. Social Security Number (if any)

**1.h.** Alien Registration Number (A-Number)   
► A-

**1.i.** Date of Arrival (mm/dd/yyyy) ►

**1.j.** I-94 Arrival/Departure Record Number

**1.k.** Passport Number

**1.l.** Travel Document Number

**1.m.** Country of Issuance for Passport or Travel Document

**1.n.** Expiration Date for Passport or Travel Document (mm/dd/yyyy) ►

**1.o.** Current Nonimmigrant Status

**1.p.** Expires on (mm/dd/yyyy) ►

**Person 2**

**2.a.** Family Name (Last Name)

**2.b.** Given Name (First Name)

**2.c.** Middle Name

**2.d.** Date of Birth (mm/dd/yyyy) ►

**2.e.** Country of Birth

**2.f.** Country of Citizenship

**2.g.** U.S. Social Security Number (if any)

**2.h.** Alien Registration Number (A-Number)   
► A-

**2.i.** Date of Arrival (mm/dd/yyyy) ►

**2.j.** I-94 Arrival/Departure Record Number

**2.k.** Passport Number

**2.l.** Travel Document Number

**2.m.** Country of Issuance for Passport or Travel Document

**2.n.** Expiration Date for Passport or Travel Document (mm/dd/yyyy) ►

**2.o.** Current Nonimmigrant Status

**2.p.** Expires on (mm/dd/yyyy) ►

**Supplement-1. Attach to Form I-539 when more than one person is included in the petition or application.**  
(List each person separately. Do not include the person named in Form I-539.) (continued)

**Person 3**

**3.a.** Family Name (Last Name)

**3.b.** Given Name (First Name)

**3.c.** Middle Name

**3.d.** Date of Birth (mm/dd/yyyy) ▶

**3.e.** Country of Birth

**3.f.** Country of Citizenship

**3.g.** U.S. Social Security Number (if any)

**3.h.** Alien Registration Number (A-Number)   
▶ A-

**3.i.** Date of Arrival (mm/dd/yyyy) ▶

**3.j.** I-94 Arrival/Departure Record Number

**3.k.** Passport Number

**3.l.** Travel Document Number

**3.m.** Country of Issuance for Passport or Travel Document

**3.n.** Expiration Date for Passport or Travel Document (mm/dd/yyyy) ▶

**3.o.** Current Nonimmigrant Status

**3.p.** Expires on (mm/dd/yyyy) ▶

**Person 4**

**4.a.** Family Name (Last Name)

**4.b.** Given Name (First Name)

**4.c.** Middle Name

**4.d.** Date of Birth (mm/dd/yyyy) ▶

**4.e.** Country of Birth

**4.f.** Country of Citizenship

**4.g.** U.S. Social Security Number (if any)

**4.h.** Alien Registration Number (A-Number)   
▶ A-

**4.i.** Date of Arrival (mm/dd/yyyy) ▶

**4.j.** I-94 Arrival/Departure Record Number

**4.k.** Passport Number

**4.l.** Travel Document Number

**4.m.** Country of Issuance for Passport or Travel Document

**4.n.** Expiration Date for Passport or Travel Document (mm/dd/yyyy) ▶

**4.o.** Current Nonimmigrant Status

**4.p.** Expires on (mm/dd/yyyy) ▶

**Supplement-1. Attach to Form I-539 when more than one person is included in the petition or application.**  
(List each person separately. Do not include the person named in Form I-539.) (continued)

**Person 5**

**5.a.** Family Name (Last Name)

**5.b.** Given Name (First Name)

**5.c.** Middle Name

**5.d.** Date of Birth (mm/dd/yyyy) ▶

**5.e.** Country of Birth

**5.f.** Country of Citizenship

**5.g.** U.S. Social Security Number (if any)

**5.h.** Alien Registration Number (A-Number)

**5.i.** Date of Arrival (mm/dd/yyyy) ▶

**5.j.** I-94 Arrival/Departure Record Number

**5.k.** Passport Number

**5.l.** Travel Document Number

**5.m.** Country of Issuance for Passport or Travel Document

**5.n.** Expiration Date for Passport or Travel Document (mm/dd/yyyy) ▶

**5.o.** Current Nonimmigrant Status

**5.p.** Expires on (mm/dd/yyyy) ▶

**Person 6**

**6.a.** Family Name (Last Name)

**6.b.** Given Name (First Name)

**6.c.** Middle Name

**6.d.** Date of Birth (mm/dd/yyyy) ▶

**6.e.** Country of Birth

**6.f.** Country of Citizenship

**6.g.** U.S. Social Security Number (if any)

**6.h.** Alien Registration Number (A-Number)

**6.i.** Date of Arrival (mm/dd/yyyy) ▶

**6.j.** I-94 Arrival/Departure Record Number

**6.k.** Passport Number

**6.l.** Travel Document Number

**6.m.** Country of Issuance for Passport or Travel Document

**6.n.** Expiration Date for Passport or Travel Document (mm/dd/yyyy) ▶

**6.o.** Current Nonimmigrant Status

**6.p.** Expires on (mm/dd/yyyy) ▶