

Part 4: Benefit Request Type & Eligibility

3.3 Benefit Request Type

In this section, you must indicate what benefit you are seeking.

If you have family members with you in the United States, you as the principal applicant will be asked to provide information about them as well.

NOTE: Any family members wishing to file a separate benefit request must first establish their own account in USCIS ELIS. You **cannot** use another person's USCIS ELIS account, even if that person is related to you.

If you are assisting a family member with completing their benefit request:

- **The family member must have his or her own USCIS ELIS account**, and
- You must enter information about yourself in the section for "Preparers" during the Online Setup Assistant process.

Only the account holder can e-sign his or her application, **except** in cases involving:

- A parent or legal guardian of an individual under the age of 14, or
- An individual who is physically incapacitated or developmentally disabled.

For cases involving the above-mentioned exceptions, you must create an account for the child or disabled person **in their name** and then complete a benefit request for them. You will be required to provide documentation to establish that you are the legal guardian or parent, and you must complete the "Preparer" section of the request before you e-sign on their behalf.

3.3.1 Benefit Request Type

Select the type of benefit you are requesting.

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.

▶ Add Additional Page Information

Extension of Stay

1. If you are filing your benefit request only for yourself, provide your current immigration status and the date to which you would like to extend your status. Generally, the date to which you can extend your status will be determined by your nonimmigrant visa status and how long you have already been in the United States.

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.

▶ Add Additional Page Information

Application to Extend / Change Nonimmigrant Status

Benefit Request Type

Single Extension of Stay * Indicates Required Field

What is your current immigration status?*

Select ←

I request that my current status be extended until*:

←

mm/dd/yyyy

▶ Add Additional Page Information

- If you are filing your benefit request with family members who are included in your request, provide **your** current immigration status and the date to which you would like to extend to your stay.

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.

▶ Add Additional Page Information

Application to Extend / Change Nonimmigrant Status

Benefit Request Type

Family Extension of Stay * Indicates Required Field

What is your current immigration status?*

Select ←

We request that our current status be extended until*:

←

mm/dd/yyyy

Beneficiaries*

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

▶ Add Additional Page Information

3. If you are currently in B-2 (visitor for pleasure) nonimmigrant status and you are seeking an extension of stay, you must submit documentation showing that either you are able to pay for your expenses or someone else is able to support you while you are in the United States.
4. You must provide the full legal names for each family member applicant/beneficiary included in your benefit request.

Application to Extend / Change Nonimmigrant Status

Benefit Request Type
Family Extension of Stay

* Indicates Required Field

What is your current immigration status?*

Select

We request that our current status be extended until*:

mm/dd/yyyy

Beneficiaries* ←

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Add

► Add Additional Page Information

Application to Extend / Change Nonimmigrant Status

Benefit Request Type
Family Extension of Stay

* Indicates Required Field

What is your current immigration status?*

Select

We request that our current status be extended until*:

mm/dd/yyyy

Beneficiaries*

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Beneficiary 1 ←

Last Name*: First Name*: Middle Name*:
 X

Family Name No First Name No Middle Name

Add

5. If your family member has no first name, select “No first name.” If your family member has no middle name, select “No middle name.”

Application to Extend / Change Nonimmigrant Status

Benefit Request Type
Family Extension of Stay

* Indicates Required Field

What is your current immigration status?*

Select

We request that our current status be extended until*:

mm/dd/yyyy

Beneficiaries*

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Beneficiary 1

Last Name*: First Name*: Middle Name*: X

Family Name No First Name No Middle Name

Add

Change of Nonimmigrant Status

1. All members of your family must currently be seeking a change of nonimmigrant status to the same nonimmigrant status that you are seeking.

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.

► Add Additional Page Information

2. If you are filing your request individually, select the category for your current nonimmigrant status (for example, B-1) and then select the new nonimmigrant status to which you want to change.

3. If you are in B-2 (visitor for pleasure) status and seek to change status to F-1 (academic student) or M-1 (vocational student), you must submit documentation showing that you or someone else can pay for your studies and support while you are in the United States.
4. If you are filing your request with family members who are in the United States with you, select the category for **your** current immigrant status (not the family member's) and the new nonimmigrant status to which you and your family want to change.

5. You must provide the full legal names for each family member applicant/beneficiary included in your benefit request.

Application to Extend / Change Nonimmigrant Status

Benefit Request Type
Family Status Change

* Indicates Required Field

What is your current immigration status?*

Select

The new nonimmigrant status I am requesting is:*

Select

Beneficiaries*

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Beneficiary 1

Last Name*: First Name*: Middle Name*: X

Family Name No First Name No Middle Name

Add

▶ Add Additional Page Information

6. If your family member has no first name, select “No first name.” If your family member has no middle name, select “No middle name.”

Application to Extend / Change Nonimmigrant Status

Benefit Request Type
Family Status Change

* Indicates Required Field

What is your current immigration status?*

Select

The new nonimmigrant status I am requesting is:*

Select

Beneficiaries*

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Beneficiary 1

Last Name*: First Name*: Middle Name*: X

Family Name No First Name No Middle Name

Add

▶ Add Additional Page Information

Reinstatement of Student Status

1. If you are filing your request individually, provide the nonimmigrant status you held before you became out of status and any documentation (or explanation of circumstances) to establish why reinstatement is warranted.

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.

► Add Additional Page Information

Application to Extend / Change Nonimmigrant Status

Benefit Request Type

Single Student Reinstatement

* Indicates Required Field

What is your current immigration status?*

Select ▼ ←

- Select
- F1
- F2
- F3
- J1
- J2
- M1
- M2
- M3

► Add Additional Page Information


2. If you are filing your request with family members who are included in your benefit request, provide **your** current nonimmigrant status.

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. 

► Add Additional Page Information


Application to Extend / Change Nonimmigrant Status

Benefit Request Type

Family Student Reinstatement

* Indicates Required Field

What is your current immigration status?*

Select 

- Select
- F1
- F2
- F3
- J1
- J2
- M1
- M2
- M3

Names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Add

► Add Additional Page Information

3. You must provide the full legal names for each family member applicant/beneficiary included in your benefit request.

Application to Extend / Change Nonimmigrant Status

Benefit Request Type
Family Student Reinstatement

* Indicates Required Field

What is your current immigration status?*

Select

Beneficiaries*

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Beneficiary 1

Last Name*: First Name*: Middle Name*: X

Family Name No First Name No Middle Name

Add

► Add Additional Page Information

- If your family member has no first name, select “No first name.” If your family member has no middle name, select “No middle name.”

Application to Extend / Change Nonimmigrant Status

Benefit Request Type
Family Student Reinstatement

* Indicates Required Field

What is your current immigration status?*

Select

Beneficiaries*

Add the names of the beneficiaries that you would like to include in this benefit request. Add the full legal name of each beneficiary. You will be required to add additional beneficiary information later in the benefit request.

Beneficiary 1

Last Name*: First Name*: Middle Name*: X

Family Name No First Name No Middle Name

Add

► Add Additional Page Information

3.3.2 Eligibility Information: General Instructions

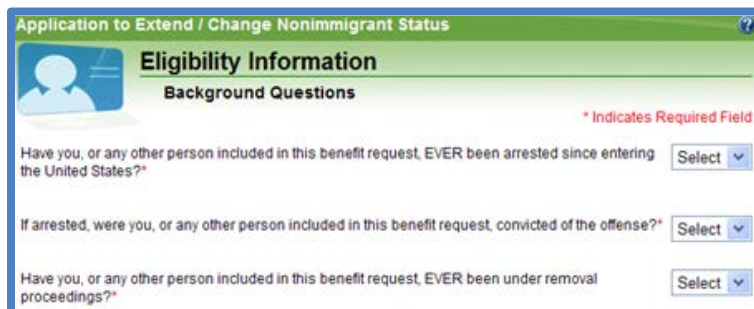
In this section, you are asked questions addressing your eligibility for the benefit you are requesting. Respond accurately to all questions and provide the requested information. For certain nonimmigrant categories, there are additional eligibility requirements that must be met before you can file a benefit request.

J Exchange Visitors Subject to the 2-Year Foreign Residence Requirement

1. Some J-1 and J-2 exchange visitors are subject to the 2-year foreign residence requirement found in Section 212(e) of the Immigration and Nationality Act (INA), as amended. This obligation requires the J-1 exchange visitor applicants and, in some cases, their J-2 dependents to return to their home country for 2 years at the end of the J-1 program.
2. The J visa issued by the U.S. Department of State and placed in your passport, in most instances, will indicate whether or not you or your dependents are subject to the 2-year foreign residence requirement.
3. If you are subject to the 2-year foreign residence requirement under INA 212(e), you cannot change your nonimmigrant status until the 2-year requirement is either fulfilled or waived prior to you filing a request to change nonimmigrant status.

Criminal History

You must respond “Yes” to pertinent questions in this section if you have been arrested, detained, fingerprinted or convicted in connection with any criminal activity—even if no charges were ever filed after your arrest or if your conviction was expunged.



The screenshot shows a web form titled "Application to Extend / Change Nonimmigrant Status" with a sub-section "Eligibility Information" and "Background Questions". A red asterisk indicates required fields. The questions are:

- Have you, or any other person included in this benefit request, EVER been arrested since entering the United States? (Select dropdown)
- If arrested, were you, or any other person included in this benefit request, convicted of the offense? (Select dropdown)
- Have you, or any other person included in this benefit request, EVER been under removal proceedings? (Select dropdown)

If you answer “Yes” to any of these eligibility questions, you must submit the following documents with your benefit request. They are listed here under the heading for the category you may fit into.

No Charges Filed

If you have ever been arrested or detained by any law enforcement officer for any reason but charges were **NOT** filed, submit an original official statement by the arresting agency or applicable court confirming that no charges were filed. If you cannot obtain an official statement, explain why in the additional space provided.

Charges Filed

If you have ever been arrested or detained by any law enforcement officer for any reason, and charges were filed, submit:

- An original or court-certified copy of the complete arrest record; and

- A certified copy of the final court disposition for each incident (dismissal order, conviction record or acquittal order).

The arrest record(s) must be a complete official record from the law enforcement agency that made the arrest. The record(s) should show the name of the law enforcement agency that made the arrest, who was arrested, the date of the arrest, and the reason for the arrest (the charge[s] or citation[s] made by the law enforcement agency).

Convictions and Court Dispositions

If charges were filed against you without an arrest, you were indicted, or you have ever been convicted or placed in an alternative sentencing program or rehabilitative program (such as a drug-treatment or community-service program), submit:

- An original or court-certified copy of the sentencing record for each incident; and
- Evidence that you completed your sentence.

All dispositions must be from the court where your case was tried. If the case has not yet been to trial, submit official notification from the court of the pending court date. If any motions to dismiss were filed, provide the entire court proceedings (not just the disposition of the motion). The court dispositions must reflect the date of the offense, the charge, and the final disposition by the court.

Inability to Submit Court Documents

If you are unable to submit court documents, or if the case was dismissed prior to going to trial, obtain an original letter from the court or the district attorney's office of the city or municipality where the arrest or conviction occurred. This letter must indicate the date of the offense, the charge, and the final disposition by the court.

3.3.3 Eligibility Information: Specific Instructions

Account Information

1. If you were issued a Form I-94, I-94W or I-95 and still have it in your possession, select "Yes."

The screenshot shows a web application window titled "Application to Extend / Change Nonimmigrant Status". The main heading is "Eligibility Information" with a sub-heading "Arrival Departure Record". A question asks, "Do you currently have the Form I-94, I-94W, or I-95 issued to you in your possession?". To the right of the question is a dropdown menu with "Select" chosen. A red arrow points to the "Yes" option. A red asterisk and the text "* Indicates Required Field" are positioned above the dropdown. At the bottom of the form area, there is a button that says "Add Additional Page Information".

2. You must submit a scanned copy of the Form I-94, I-94W or I-95 as evidence of your status when you file this benefit request.

Application to Extend / Change Nonimmigrant Status

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?

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.

▶ Add Additional Page Information

Principal Alien

A principal alien is the person who applies for an immigrant status and from whom another person may derive lawful status under immigration law or regulations (usually spouses and minor unmarried children).

Application to Extend / Change Nonimmigrant Status

Eligibility Information
Principal Alien

* Indicates Required Field

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

▶ Add Additional Page Information

1. If you are filing a request for status based on a principal alien's status, select "Yes."

Application to Extend / Change Nonimmigrant Status

Eligibility Information
Principal Alien

* Indicates Required Field

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

Select
Yes
No

▶ Add Additional Page Information

2. Indicate the status the principal alien currently has or, if he or she has a pending request with USCIS, the status the principal alien will receive if approved.

Application to Extend / Change Nonimmigrant Status

Eligibility Information

Principal Alien * Indicates Required Field

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

The principal alien is requesting or has acquired nonimmigrant status through:

Principal Alien's nonimmigrant status: ←

- Select -
 - Select -
 A Form I-539T that was previously filed with USCIS.
 Inspection and admission into the United States in his or her current nonimmigrant status.

► Add Additional Page Information

3. Provide the principal alien's current physical address.

Application to Extend / Change Nonimmigrant Status

Eligibility Information

Principal Alien - Information * Indicates Required Field

Last Name (Family Name)*:

First Name (Given Name)*: No First Name
Check this box if you do not have a first name

Middle Name*: No Middle Name
Check this box if you do not have a middle name

Principal Alien's Date of Birth*:
 Month*: Day*: Year*:

Principal Alien's Country of Birth: City or Town of Birth:

Principal Alien's Gender:

Principal Alien's Country of Citizenship:
 You have no Country of Citizenship listed. Please select the country of your citizenship from the drop down.

Add Principal Alien Country of Citizenship:

Type of Relationship to the Principal Alien. I am the Principal Alien's:

Select

Principal Alien's USCIS Account Identifier:

Arrival-Departure Record Number:

12345678901

A-Number:

A123456789

► Add Additional Page Information

The screenshot shows the 'Eligibility Information' section for 'Principal Alien - Address'. A red arrow points to the 'Physical Address' heading. Below this heading are several input fields: 'Street #', 'Street Name', and 'Apt./Suite #' (all empty text boxes); 'Country' (a dropdown menu with 'Select' chosen); 'City' (an empty text box); 'State' (a dropdown menu with 'Select' chosen); 'Zip Code' (an empty text box); 'Province' (an empty text box); and 'Postal Code' (an empty text box). A red asterisk with the text '* Indicates Required Field' is located in the top right corner of the form area.

Education Information

1. If you or any family member are seeking to change status to, or from, F (academic student), M (vocational student), or J (exchange visitor), select "Yes" to indicate that you are seeking a change in status.

The screenshot shows the 'Eligibility Information' section for 'Education Information'. A red arrow points to the first dropdown menu. The question is: 'Are you, or any other person included in this benefit request currently in, or, requesting a change to F, M, or J nonimmigrant status?'. The dropdown menu is open, showing options: 'Select', 'Yes', and 'No'. The second question is: '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?'. The dropdown menu for this question is also open, showing 'Select'. A red asterisk with the text '* Indicates Required Field' is located in the top right corner of the form area.

2. Provide your SEVIS registration number, which appears on your approved I-20A-B. (Example: N123456789)

Application to Extend / Change Nonimmigrant Status

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? Yes

SEVIS Case Number*:

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? Select

► Add Additional Page Information

- If you or any accompanying family members are currently in B-2 (visitor for pleasure) status and seeking to change status to either F-1 (academic student), M-1 (vocational student) or J-1 (exchange visitor), select “Yes” to indicate that you are seeking a change in status.

Application to Extend / Change Nonimmigrant Status

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? Select

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? Select

Select
Yes
No

► Add Additional Page Information

- Provide the information requested to establish how you will support yourself and any accompanying family members financially while in the United States.

Application to Extend / Change Nonimmigrant Status

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?


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?

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 

Middle Name 

Amount of financial support to be provided per month: 

\$1,234.56

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

Scholarship or grant from educational institution in the amount of: 

\$1,234.56

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J1/J2 Exchange Visitor Visa


1. Provide the name of the person who is in J1 or J2 status.

Application to Extend / Change Nonimmigrant Status

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?



Select
Select
Yes
No

[Add Additional Page Information](#)

Application to Extend / Change Nonimmigrant Status

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?

Name of the person included in this benefit request who is in a J nonimmigrant status
 ←

Is the person in J nonimmigrant status subject to the 2-year foreign residence requirement? (See Help for Detailed instructions):

► Add Additional Page Information

2. If the person who is currently in J1 or J2 status is subject to the 2-year home residence requirement, select "Yes."

Application to Extend / Change Nonimmigrant Status

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?

Name of the person included in this benefit request who is in a J nonimmigrant status

Is the person in J nonimmigrant status subject to the 2-year foreign residence requirement? (See Help for Detailed instructions):

 ←

3. If the person who is currently in J1 or J2 status has received a waiver of the 2-year home residence requirement, select "Yes."

Application to Extend / Change Nonimmigrant Status

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? Yes

Name of the person included in this benefit request who is in a J nonimmigrant status
Select a Person

Is the person in J nonimmigrant status subject to the 2-year foreign residence requirement? (See Help for Detailed instructions):
Yes

Has that person already received a waiver of the 2-year foreign residence requirement from USCIS? (See Help for Detailed Instructions)
Select
Yes
No

► Add Additional Page Information

Application to Extend / Change Nonimmigrant Status

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? Yes

Name of the person included in this benefit request who is in a J nonimmigrant status
Select a Person

Is the person in J nonimmigrant status subject to the 2-year foreign residence requirement? (See Help for Detailed instructions):
Yes

Has that person already received a waiver of the 2-year foreign residence requirement from USCIS? (See Help for Detailed Instructions)
Yes

USCIS Receipt/Case Number of the approved waiver:
[Text Box]

Immigrant Visa

1. If you or any family members currently have an application for an immigrant visa pending on your or their behalf with a U.S. consulate or embassy outside the United States, select "Yes."

2. Provide the name of the person who filed the immigrant visa as well as the USCIS receipt number (example: EAC-123456789) for the associated immigrant visa petition filing.

3. If you or any accompanying family members are currently the beneficiary of a visa petition, or the beneficiary of an applicant for a nonimmigrant or immigrant visa, select "Yes."

Application to Extend / Change Nonimmigrant Status

Eligibility Information
Immigrant Visa

* Indicates Required Field

Are you, or any other person included on this benefit request currently an applicant for an immigrant visa?

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?

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 application?

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4. Provide the name of the person or organization who filed the immigrant visa petition and the USCIS receipt number (example: EAC-123456789) for the filing.

Application to Extend / Change Nonimmigrant Status

Eligibility Information
Immigrant Visa

* Indicates Required Field

Are you, or any other person included on this benefit request currently an applicant for an immigrant visa?

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?

Name of the person included in this benefit request application who filed the application for the non-immigrant or immigrant visa:

USCIS Receipt/Case Number of the immigrant petition that was filed on your behalf:

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 application?

▶ Add Additional Page Information

5. If you or any accompanying family member are currently waiting for a decision from USCIS on an **application to adjust status to lawful permanent residence**, select "Yes."

Application to Extend / Change Nonimmigrant Status

Eligibility Information
Immigrant Visa

* Indicates Required Field

Are you, or any other person included on this benefit request currently an applicant for an immigrant visa?

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?

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 application?

▶ Add Additional Page Information

6. Provide the name of the person who filed the application for adjustment of status as well as the USCIS receipt number (example: EAC-123456789) or "A" number (example: A0999999999) for the filing.

Application to Extend / Change Nonimmigrant Status


Eligibility Information
Immigrant Visa

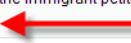
* Indicates Required Field

Are you, or any other person included on this benefit request currently an applicant for an immigrant visa?

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?

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 application?

Name of the person included in this benefit request who filed the Form I-485:
 

USCIS Receipt/Case Number of the immigrant petition that was filed on your behalf:
 

▶ Add Additional Page Information

Background Questions

1. You must answer all the questions related to your eligibility for the benefit request and your eligibility for this benefit request.

Application to Extend / Change Nonimmigrant Status

Eligibility Information

Background Questions

* Indicates Required Field

Have you, or any other person included in this benefit request, EVER been arrested since entering the United States?*

If arrested, were you, or any other person included in this benefit request, convicted of the offense?*

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

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?*

Acts involving genocide?*

Killing any person/people?*

Intentionally and severely injuring any person/people?*

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

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

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?*

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

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?*

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?*

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

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?*

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?*

► Add Additional Page Information

- You also must answer "Yes" if any family member has been arrested or convicted.

Explanation

1. If you answered “Yes” to any question in the “Background Questions” section, you must provide an explanation for and information about the incident or situation. You also should describe any extenuating circumstances that may help USCIS determine your eligibility.

Application to Extend / Change Nonimmigrant Status

Eligibility Information

Elaboration * Indicates Required Field

You answered Yes to the following question(s), please provide an explanation

- [Ever Arrested] Have you, or any other person included in this benefit request, EVER been arrested since entering the United States?
- [Convicted] If arrested, were you, or any other person included in this benefit request, convicted of the offense?
- [Ever In Removal] Have you, or any other person included in this benefit request, EVER been under removal proceedings?
- [Involved in Torture] Acts involving torture?
- [Involved in Genocide] Acts involving genocide?
- [Killed people] Killing any person/people?
- [Weapons Training] Received any type of military, paramilitary, or weapons training?
- [Overstayed in US] 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?

Name	Question Type	Country	State	Start Date	End Date	Action
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Add Elaboration Information:

For Background Question

- [Ever Arrested] Have you, or any other person included in this benefit request, EVER been arrested since entering the United States?
- [Convicted] If arrested, were you, or any other person included in this benefit request, convicted of the offense?
- [Ever In Removal] Have you, or any other person included in this benefit request, EVER been under removal proceedings?
- [Involved in Torture] Acts involving torture?
- [Involved in Genocide] Acts involving genocide?
- [Killed people] Killing any person/people?
- [Weapons Training] Received any type of military, paramilitary, or weapons training?

[Overstayed in US] 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?

Name of the person in the benefit requested involved in the incident:
 --Select the Person--

Country of Incident: City/Town of Incident:

State of the Incident: Other Country State/Province of Incident:

Entity or Organization Involved:

Period of Incident(Start): Period of Incident(End):

Explanation of the incident, activity, act, issue, reason, and/or duties involved:

[▶ Add Additional Page Information](#)

2. Provide the city or town, as well as the state, province and country (if not in the United States), where you were arrested, detained, and/or convicted.

Name of the person in the benefit requested involved in the incident:
 --Select the Person--

Country of Incident: City/Town of Incident:

State of the Incident: Other Country State/Province of Incident:

Entity or Organization Involved:

Period of Incident(Start): Period of Incident(End):

Explanation of the incident, activity, act, issue, reason, and/or duties involved:

[▶ Add Additional Page Information](#)

3. Provide the name of the law enforcement agency involved in the incident and the date of the incident.

Name of the person in the benefit requested involved in the incident:
 --Select the Person--

Country of Incident: Select City/Town of Incident:

State of the Incident: Select Other Country State/Province of Incident:

Entity or Organization Involved:

Period of Incident(Start): Period of Incident(End):

mm/dd/yyyy mm/dd/yyyy

Explanation of the incident, activity, act, issue, reason, and/or duties involved:

► Add Additional Page Information

4. If you or a family member were convicted, provide the name of the court where the conviction occurred.
5. You **must** provide a copy of all arrest, conviction and court disposition records.