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I-539 Application to Extend/Change

**Nonimmigrant Status** 

**OMB control number 1615-0003** 

Edits in support of: Biometrics Rule NPRM

I-539 INTERACTIVE FORM Copy in gray boxes is approved copy Step: indicates the form navigation eler Section: indicates the form sub-navigal Questions/Sub-Questions: Based on Instructional text: Text that appears dil Hels text: Text that appears below or or	Simple Continue   Co										
Conditional question logic is indicated in	n ( ) before question										
Heading Application to Extend/Change	Current Sub-Heading Revised	sub-Heading	Current Body Text  Currently, you may file an Application to Extend/Change Nonimmigrant Status (I-539) online only if you are filing for yourself and wish to extend	REVISED DODY 1EXT	CTA  Learn more about <a (remently="" (ssiap)="" (ssiap,="" 1437="" 1937,="" 1937,<="" 2.="" 42="" act="" admission="" and="" assistance"="" but="" context,="" et="" exist="" federal="" general="" greenly="" housing="" href="https://www.uscis.gov/i-&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Application to Extend/Change&lt;br&gt;Nonimmigrant Status  Before you start your application&lt;/th&gt;&lt;th&gt;Eligibility&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;your F. J. F. 2, M-1, or M-2 nonimmigrant status.  If you have any other nonimmigrant status to are filing with additional applicants, you must file a paper Form I-539. If you need to change or reinstate your nonimmigrant status, life a paper form.  You may be eligible to apply for an extension of your authorized stay if:  You were building windted into the funded States with a nonimmigrant visa.  Your nonimmigrant visa status remains valid  You have not visally admitted into the funded States with a nonimmigrant visa.  You have not visally dentified into the funded States with a nonimmigrant visa.  You have not visalled the conditions of your admission.  Your pasport is valid and will remain valid for the duration of your stay.  You have not visalled the conditions of your admission.  Your pasport is valid and will remain valid for the duration of your stay.  Your pasport is valid and will remain valid for the duration of your stay.  Your pasport is valid and will remain valid for the duration of your stay.  You have not visalled the conditions of your admission.  Your pasport is valid and will remain valid for the duration of your stay.  You have not valid the noniminaginal status you seek to benefit of change you have not received public benefits for more than 12 months within any 36 month period (unless you qualify for any of the exemptions below):  PUBLIC BORETTS:  L Any Federal, state, local, or tribal cash assistance for income maintenance including.  a. Supplemental Security isomen (SSI).  L Temporary Assistance for Needy Families (TANF): or  c. Federal, state, or local cash benefit programs for income maintenance (often called " in="" intension="" may="" northiousiance="" of="" other="" poblic="" polymore="" program="" rainess);="" rossing="" s.="" seq.;="" stamps");="" state="" states="" supplemental="" th="" the="" tood="" u.s.c.="" under="" volled="" which=""><th></th><th>Learn more about <a href="https://www.ucisi.gov/">https://www.ucisi.gov/"&gt;https://www.ucisi.gov/</a> 539"&gt;extending or changing your nonimmigrant status</th></a> /s>		Learn more about <a href="https://www.ucisi.gov/">https://www.ucisi.gov/"&gt;https://www.ucisi.gov/</a> 539">extending or changing your nonimmigrant status				
			and dependents are limited to the same period of authorized stay as the principal immigrant.  You may NOT be granted an extension or change of status if you were admitted under the Visa Waiver Program or if your current status is:  - An alien in transit (I) or in transit without a visa (IVVO)  - A crewman (I)  - A financiery or dependent of a financiery (Ir 1 or K-2)  EXCEPTION: A K2 and K4 are eligible to apply for an extension of status. They should file for an extension during the processing of Form I-130 filed on their behalf and up to completion of their adjustment-of-status application.								
	Multiple Applicants		You may include your spouse and your unmarried children under 21 years of age as co-applicants in your application for the same extension or change of status, but only if you are all now in the same status or they are all in derivative status.								
	Fee		Note: Extensions granted to members of a family group must be for the same period of time. The shortest period granted to any member of the family, that lie granted to all imembers of the family.  We will automatically calculate the cost for you when you submit your application.  The application fee is \$370. An additional biometrics services fee of \$85 is required for you and for each person included on a Form I-539A.		Learn more about <a href="https://www.uscis.gov/feewaiver">filing a fee</a>						
	Refund Policy		USGS does not refund fees, regardless of any action we take on your application, petition, or request.  By continuing this transaction, you acknowledge that you must submit fees in the exact amount and that you are paying the fees for a government service. You further agree that the filing fee, biometric fee, and any other paid costs related to this financial transaction are final and not refundable.  Please refer to the instructions for the form(s) you are filing for additional information or you may call the USGS Contact Center at 800-375-5283. The USGS Contact Center provides information in English and Spanish. For TTY (deaf or hard of hearing) 800-767-1833.		walver ( la .						
	Filing online		Submitting your application online is the same as mailing in a completed paper form. They both gather the same information and cost the same.								
	Documents you may need		Most applicants will be required to submit:  Nonimmigrant Arrival-Departure Record (1-94) for all applicants - Pasport and ruleved document numbers - A valid passport  Several other documents will be required depending on your current nonimmigrant status. We will automatically determine which documents you should provide us as you fill out your application.								
After you submit your application	Track your case online  Respond to requests for information		After you submit your form, you can track its status through your USCIS account. Sign in to your account often to check your case status and read any important messages from USCIS.  If we need more information from you, we will send you a Request for Evidence (RFE) or Request for Information (RFI). You can respond to our request and upload your documents through your USCIS account.		No.						
	ruvinos your diometrics Sometr	ncs appointment	If necessary, we will contact you to schedule an appointment at an Application Support Center near you. At the appointment, we will get your fingerprints, photograph, and signature.	A few weeks after you submit your application, we will contact you to schedule an appointment at an Application Support Center near you. At the appointment, we will get your fingerprints, photograph, and signature.  Every includiously who is an applicant, petitioner, derivative, beneficiary, or sponsor of an immigration benefit request or other request submitted to USCS is required to submit biometric unless USCS wavels or exempts the requirement. USCS will notifyyou of the time and place of your appointment if you must appear and will provide requirements for recheduling if necessary, if you fail to submit any biometrics as required, USCS may deep your application, petition, or request.  DIS may store the biometrics submitted by an inclividual and use or reseabliments or conduct background and security checks, including a choice of criminal history records maintained by the Federal Bureau or Investigation (Fili), verify identity, produce documents, determine eligibility for immigration and naturalization beavilty. To perform any other functions necessary for administering and enforcing immigration and naturalization less and any other law within IDS substorty.							
Completing your form online	Provide as many responses as you		You should provide as many responses as you can. Incomplete fields or sections and missing information can slow down the process after you	The state of the s							
Completing your form online	can  We will automatically save your		submit your form. If you do not finish your form in one session, you can sign in to your account to continue where you left off.  We will automatically save your information when you select next to go to a new page or navigate to another section of the form. Your responses								
	responses DHS Privacy Notice		will be saved for 30 days. You can sign in to your account at anytime to continue where you left off.  AUTHORITIES: The information requested on this application, and the associated evidence, is collected pursuant to the U.S. Code sections 1103 and 1184-and 1181 for the Code of Federal Reculations oards 130, 214 and 248.  PURPOSE: The primary purpose for providing the requested information on this application is to apply for an extension of stay or a change from one noniminging rate eagery. Disk villure the information your provide to grant or deep the immigration benefit you are overline  OISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if acolicable), and any requested evidence, may delay a final decision or result in denial of your acolication.								

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ng	Current Sub-Heading	Revised Sub-Heading	Current Body Text	Revised Body Text	CTA
			ROUTINE USES: DIST may share the information you provide on this application and any additional requested evidence with other Foderal, state, local, and foreign government sequence is and authorized organizations. Dist follows approved routine use described in the seasoustee published system of records notices [DISFLSCS/E/C/E/B-200 Allen File, Index, and National File Tracking System, DNS/USES-007 Benefits information System) and the published privacy improvat assessment [DISFLSCS/E/C/E/E/B-200]. Oppropriate Linked Application information Amangement System and Associated Systems], which can be Cound at www.dls.gov/privacy. DHS may also share the information, as appropriate, for law enforcement purposes or in the interect or facional security.	ROUTINE USES: DIK may share the information you growle on this application and any additional requested evidence with other federal, state, to call, and foreign operment agencies and authorized organization. DIFS follows approved routine uses described in the association published system of records notices (DIFS/USCS/GE/CER-DOIA fillen Fille, Index, and National File Tracking system, DIFS/USCS/GE Benefits information system of records notices (DIFS/USCS/GE/CER-DOIA fillen Fille, Index, and National Fille Tracking system, DIFS/USCS/GE/DOIA fillen Fille, Index, and DIFS/USCS/GE/DOIA fillen Fille	f
	USCIS Compliance Review and Monitoring		By signing this application, you have stated under penalty of perjury (28 U.S.C. section 1746) that all information and documentation submitted with this application are complete, true, and correct. You also authorise the release of any information from your records that USCS may need to determine your epiliphility for the immigration benefit you are seeking and consent to USCS serfying soch information.		
			DHS has the authority to verify any information you submit to establish eligibility for the immigration benefit you are seeking at any time. USCIS' legial authority to verify this information is in 8 USCI. sections 1103, 1153, and 1184, and 8 CRI parts 1103, 204, 205, and 214. To ensure compliance with applicable leaves and authority. USCISC may verify information before or either or pure see selected.		
			Agency verification methods may include, but are not limited to: review of public records and information; contact through written correspondence the internet, fax, other electronic transmission, or telephone; unannounced physical site inspections of residences and locations of employment; and interview. USSS will use information obtained through verification to assess your compliance with the laws and to determine your eligibility for an immigration benefit.		
			Subject to the restrictions under 8 CFR 103.2[b](16), USCIS will provide you with an opportunity to address any advense or derogatory information that may result from a USCIS compliance review, verification, or site visit after a formal decision is made on your case or after the agency has initiated an adverse action which may result in revocation or termination of an approval.		
	Paperwork Reduction Act		An agency may not conduct or sponsor in information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 2.38 hours per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application, prespring statements, statching necessary documentation, and submitting the application. The collection of biometrics is estimated to require 1 hour and 10 minutes. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:		s
			U.S. Citisenship and Immingration Services, Regulatory Coordination Division Office of Policy and Strategy and Strategy 20 Massachusetts Ave NW Washington, DC 205392-7400	U.S. Ciliurahitip and Immigration Services, Regulatory Coordination Division Office of Polity and Strategy 20 Massachuetts Ave TRW Washington, C. 2023-29 243	
			Do not mail your completed Form I-539 to this address.	Do not mail your completed Form I-539 to this address.	
			OMB Number: 1615-0003 Expires: 08/31/2020	OMB Number: 1615-0003 Expires: 08/31/2020	

# I-539 INTERACTIVE FORM COPY: QUESTIONS, INSTRUCTIONAL AND HELP TEXT, AND OTHER COPY

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Section: Indicates the form sub-navigation element. Copy for questions should be grouped by appropriate section.

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Help text: Text that appears below or next to an input field, partially hidden. Users can click to expand. Provides additional contextual or clarifying information about a question.

CTA: copy for button

Page breaks are indicated by a horizontal line (the same sub-navigation can have multiple pages)

Step	Section	Paper Form Question #	Question	Sub-Question	Field Type	Instructional Text	Help Text
Getting Started	Basis for eligibility	1.15	a What is your current nonimmigrant status?		Dropdown		
		1.1(	6 Were you granted Duration of Status (D/S)?	Yes/No	Radio		Notation on certain nonimmigrant Form I-94 indicating that the individual, such as an F-1 nonimmigrant student, is authorized to remain in the U.S. as long as he or she maintains a valid status.
		1.15	b When does your current nonimmigrant status expire?		Date		
	Reason for request	2.1	What are you applying for?	Reinstatement to student status	checkbox		
		2.2		An extension of stay in my current status	checkbox		
		2.3.a		A change of status	checkbox		
		2.3.c	(IF CHANGE OF STATUS) What is the change of status you are requesting?		dropdown		
		2.3.b	(IF CHANGE OF STATUS) What is the effective date of change?	month/day/year	date		
		3.1	What date are you requesting your current or requested status be extended until?	month/day/year	date		

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Step	Section	Paper Form Question Question #	Sub-Question	Field Type	Instructional Text	Help Text
	Preparer and interpreter information	Is someone assisting you with completing this application?	Yes/No	Radio		
		(IF YES) is a preparer assisting you with completing this application?	Yes/No	Radio	A preparer is anyone who completes or helps you complete all or part of your application using information and answers that you provide.	
		(IF YES) Is an interpreter assisting you with completing this application?	Yes/No	Radio	provide.	
	Preparer information	(IF YES TO PREPARER) What is	Given name (first name)	Text		
		your preparer's full name?	Given name (machame)	· CAC		
		8.1.b 8.1.a	Family name (last name)	Text		
		What is your preparer's business or organization 8.2 name?	ranny name (lase name)	Text		
		C.Z. Hullie:	My preparer is not part of a business or organization.	Checkbox		
		What is your preparer's 8.3.h mailing address?	Country	Text		
		8.3.a	Address line 1	Text	Street number and name	
		8.3.b	Address line 2	Text	Apartment, suite, unit, or floor	
		8.3.c	City or town	Text		
		0.0.1/0.05	State/Province (FOR	Dropdown		
		8.3.d/8.3.f	FOREIGN ADDRESS)	T		
		8.3.e/8.3.g	ZIP code/Postal code (FOR FOREIGN ADDRESS)	rext		
		o.s.e/o.s.g What is your preparer's	Daytime telephone number	Text		
		8.4 contact information?				
			Mobile telephone number	Text		
		8.5				

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Step	Section	Paper Form Question	Sub-Question	Field Type	Instructional Text	Help Text
		Question #				
			My preparer does not have	Checkbox		
			a mobile telephone			
		0.6	number.	<b>-</b> .		
		8.6	Email address	Text		
			My preparer does not have	Спесквох		
		(IE VEC TO INTERPRETED) WIL	an email address.	<del>-</del> .		
	Interpreter information	(IF YES TO INTERPRETER) Wh	at Given name (first name)	Text		
		is your interpreter's full				
		7.1.b name?	Family name (last name)	Tout		
		7.1.a	Family name (last name)	Text		
		What is your interpreter's		Text		
		business or organization 7.2 name?				
		7.2 Hame:	My interpreter is not part	Checkhoy		
			of a business or	CHECKBOX		
			organization.			
		What is your interpreter's	Country	Text		
		7.3.h mailing address?	country	Text		
		7.3.a 7.3.a	Address line 1	Text	Street number and name	
		7.3.b	Address line 2	Text	Apartment, suite, unit, or floor	
		7.3.c	City or town	Text		
			State/Province (FOR	Dropdown		
		7.3.d/f	FOREIGN ADDRESS)			
		,	ZIP code/Postal code (FOR	Text		
		7.3.e/g	FOREIGN ADDRESS)			
		What is your interpreter's	Daytime telephone number	Text		
		7.4 contact information?	•			
			Mobile telephone number			
		7.5				
			My interpreter does not			
			have a mobile telephone			
			number.			
		7.6	Email address	Text		
			My interpreter does not	Checkbox		
			have an email address.			

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Step	Section	Paper Form Question #	Question	Sub-Question	Field Type	Instructional Text	Help Text
			What language is your		Text		
			interpreter using to interpret				
	this application for you?						
		6.1.b	)				

#### Biometrics Rule NPRM - edits made

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al text: I ext that appears directly b	below a question and provides instructions for answering the question or completing an input field, partially hidden. Hears can click to expand. Provides additional contex	g this step/section of the form. dual or clarifying information about a question.					
or button s are indicated by a horizontal line	e (the same sub-navigation can have multiple pages)						
question logic is indicated in ( ) be	ection Paper Form Current Question Revised Question Question #	Current Sub-Question Revised Sub-Question	Current Field Revised Field Type Type	Current Instructional Text	Revised Instructional Text	Current Help Text	Revised Help Text
Your Name	1.1.b What is your current legal name?	Given name (first name)	Text	Your current legal name is the name on your birth certificate, unless it changed after birth by a legal action such as marriage or court order. Do not			
	1.1.¢	Middle name (if applicable)	Text	provide any nicknames here.			
Your Contact	1.1.a 1.4.a What is your current mailing	Family name (last name) In care of name (if any)	Text Text				
Information	1.4.a What is your current mailing address? 1.4.b	Address line 1	Text	Street number and name		We will be a second and the second	
	1.00	Auditess line 1	Text	avect number and name		We will use your current mailing address to contact you throughout th application process. We may not be able to contact you if you do not provide a complete and valid address. Please provide a U.S. address only.	
	1.4.c	Address line 2	Text	Apartment, suite, unit, or floor			
	1.4.d 1.4.e	City or town State	Text Text				
	1.4.f Where do you live now?	ZIP code I live at my current mailing	Text Checkbox				
	where ao you live now?	address	CHECKBOX				
	1.5.a	Address line 1	Text	Street number and name			
	1.5.b	Address line 2	Text	Apartment, suite, unit, or floor			
	1.5.c 1.5.d	City or town State	Text Text				
	1.5.e 4.2.a What is your physical	ZIP code Address line 1	Text Text	Street number and name			
	address abroad?						
	4.2.b 4.2.c	Address line 2 City or town	Text Text	Apartment, suite, unit, or floor			
	4.2.d	Province	Text				
	4.2.e 4.2.f	Postal Code Country	Text Dropdown				
	6.3 How can we contact you?	Daytime telephone number	Text				
	6.4	Mobile telephone number	Text				
		This is the same as my mobile telephone number.	Checkbox				
Additional	6.5 1.2 What is your A-Number?	Email address	Text Text				
Information	1.2 White your A Number.						
		I do not have or know my A- number	Checkbox				
	1.3 What is your USCIS Online Account Number?	I do not have an USCIS Online Account Number	Checkbox	You can find your USCIS Online Account Number by signing in to your account and going to your profile page.	t		
				If you previously filed an application, petition, or request using the USCIS online filing system, provide the USCIS Online Account Number you were issued.			
				If you previously filed certain applications, petitions, or requests on a paper form via a USCIS Lockbox facility, you may have received a USCIS Online Account Access Notice issuing you a USCIS Online Account Number. You can find this number at the top of the notice.			
				The USCIS Online Account Number is not the same as an A-Number. The USC Online Account Number was previously called the USCIS Electronic Immigration Surface (USCIS ELIC) Number.	IS		
	1.8 What is your date of birth?	month/date/year	Date	teneurorine Surteen ELECTE ELES Mumber			
	1.9 What is your U.S. Social Security number?		Text				
		I do not have a U.S. Social Secuirity Number	Checkbox				
	What is your current						
	4.1.a passport number? 4.1.b What country issued your		Dropdown				
	passport? 4.1.c What date does your	Country	date	If you are the Principal Applicant, provide your current passport information.			
	passport expire?	month/date/year	uate				
Your Immigration	1.6 What is your country of						
Information	birth?		Dropdown				
	1.7 What is your country of citizenship or nationality?			Provide the name of the country as it currently exists, where you are current a citizen or national. If the country no longer exists, use the current name of the country.			
				If you are a citizen or national of more than one country, provide the name of the foreign country that issued your last passport.	f		
			Tout	If you are stateless, enter the name of the current country where you were			
			Text	last a citizen or national			

#### Biometrics Rule NPRM - edits made

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rrent Section Revised Section	ne sub-navigation can have multiple pages) stion	Revised Question	Current Sub-Question	Revised Sub-Question	Current Field	Revised Field	Current Instructional Text	Revised Instructional Text	Current Help Text	Revised Help Text
rrent Section Revised Section	Question #	Revised Question	Current Sub-Question	Revised Sub-Question	Type	Type	Current Instructional Text	Revised Instructional Text	Current Help Text	Revised Help Text
	1.10  What is your date of last arrival into the United						Provide information about your most recent entry into the United States		This information may be found on your home incommittee in review of the property of the proper	
	States? 1.11 What is your I-94 Arrival- Departure Record Number?				Text				Information.	
	1.12 What is the passport				Text					
	number listed on your I-94? 1.13 What is your travel document number? 1.14.a What country issued your				Text					
	passport or travel document? 1.14.b What is the expiration date for your passport or travel				Dropdown					
	document?				date					
Describe yourself								We require you to complete the categories below to conduct background checks. Providing this information as part of your application may reduce the time you spend at your biometrics services appointment.		
		What is your ethnicity?		Hispanic or Latino Not Hispanic or Latino		Radio		Hispanic or Latino refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.		
		What is your race?		White		Checkbox		Select all that apply. Your race is different from your ethnicity and should reflect your geographical origins.		White  A person having origins in
										original peoples of Europe East, or North Africa.
				Asian		Checkbox				Asian
										A person having origins in original peoples of the Far Southeast Asia, or the Ind subcontinent including, for Cambodia, China, India, Ja Malaysia, Pakistan, the Ph Islands, Thailand, and Viet
				Black or African American	n	Checkbox				Black or African American A person having origins in
				American Indian or Alaski Native	a	Checkbox				black racial groups of Afric American Indian or Alaska
				nuite.						A person having origins in original peoples of North America (including Centra and who maintains tribal community attachment.
				Native Hawaiian or Other Pacific Islander		Checkbox				Native Hawaiian or Other Islander
										A person having origins in original peoples of Hawaii Samoa, or other Pacific Isl
		What is your height? What is your weight? What is the color of your eyes?		Feet/inches Pounds Black/Blue/Brown/Gray/Gen/Hazel/Maroon/Pink/ Unknown/other	Gr /	Text Text Dropdown				
		What is the color of your hair?		Bald (no hair)/Black/Blonde/Brow Gray/Red/Sandy/White/	n/	Dropdown				

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Step	Section	Paper Form Question #	Question	Sub-Question	Field Type	Instructional Text
Moral Character	Party and group affiliations	4.7.a	Have you, or any other person included on this application, EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in acts involving torture or genocide?	Yes/No	Radio	
		4.7.b	(IF YES) Provide an explanation. Have you, or any other person included on this application, EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in killing any person?	Yes/No	Textarea Radio	
		4.7.c	(IF YES) Provide an explanation. Have you, or any other person included on this application, EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in intentionally and severely injuring	Yes/No	Textarea Radio	
		4.7.d	any person?  (IF YES) Provide an explanation.  Have you, or any other person included on this application, EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in engaging in any kind of sexual contact or relations with any person who did not consent or was unable to consent, or was being forced or threatened?	Yes/No	Textarea Radio	
			(IF YES) Provide an explanation.		Textarea	

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Step	Section	Paper Form Question #		Sub-Question	Field Type	Instructional Text
	4.7.e		Have you, or any other person included on this application, EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in limiting or denying any person's ability to exercise religious beliefs?	Yes/No	Radio	
			(IF YES) Provide an explanation.		Textarea	
		4.8.a	Have you, or any person included on the application, EVER served in, been a member of, assisted, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, insurgent organization, or any other armed group? (IF YES) Provide an explanation.	Yes/No	Radio Textarea	
		4.8.b	(IF 1E3) Provide an explanation.	Vac/Na		
		4.0.0	Have you, or any person included in this application, EVER worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?	Yes/No	Radio	
			(IF YES) Provide an explanation.		Textarea	
		4.9	Have you, or any other person included in this application, EVER been a member of, assisted, 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	Radio	

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Step	Section	Paper Form		Sub-Question	Field Type	Instructional Text
		Question #				
			(IF YES) Provide an explanation.		Textarea	
		4.10		Yes/No	Radio	
			Have you, or any person included in this application,			
			EVER assisted or participated in selling, providing, or			
			transporting weapons to any person who, to your			
			knowledge, used them against another person?			
			(IF YES) Provide an explanation.		Textarea	
		4.11	Have you, or any person included in this application	Yes/No	Radio	
			EVER received any type of military, paramilitary, or			
			weapons training?			
			(IF YES) Provide an explanation.		Textarea	
	Immigration	4.12		Yes/No	Radio	
	Proceedings		Have you, or any person included in this application,			
			done anything that violated the terms of the			
			nonimmigrant status you now hold?			
			(IF YES) Provide an explanation.		Textarea	
		4.13	Are you, or any other person included in this	Yes/No	Radio	
			application, now in removal proceedings?			
			(IF YES) Provide an explanation with the name of the		Textarea	
			person in removal proceedings, and information on			
			jurisdiction, date proceedings began, and status of			
			proceedings.			

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Step	Section Paper Form Question Question #		Sub-Question	Field Type	Instructional Text	
Your Application	Information about request	3.2.a.	Is this application based on an extension or change of status already granted to your spouse, child, or parent?	yes/no	radio	
		3.2.b	(IF YES) Provide the USCIS receipt number for the extension or change already granted to your spouse, child, or parent.		number	The USCIS receipt number is a unique 13-character identifier that consists of three capital letters followed by 10 numbers (for example, ABC1234567890). You can find it on notices of action USCIS has sent your spouse, child or parent.
		3.3.a	Is this application based on a separate petition or application to give your spouse, child, or parent an extension or change if status?	Yes, filed with this I-539	checkbox	
			• • • • • • • • • • • • • • • • • • •	Yes, filed previously and pending with USCIS	checkbox	
				No	checkbox	
		3.3.b	(IF YES PENDING) Provide the USCIS receipt number for the pending case.		number	The USCIS receipt number is a unique 13-character identifier that consists of three capital letters followed by 10 numbers (for example, ABC1234567890). You can find it on notices of action USCIS has sent your spouse, child or parent.
		3.4	(IF YES PENDING) What is the name of the petitioner or applicant for the pending application?	Given name (first name)	Text	
				Family name (last name)	Text	
		3.5	What date was the petition or application filed?	Month/day/year	date	

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Step	tep Section P C		Question	Sub-Question	Field Type	Instructional Text
	Additional information about request	4.3	Are you, or any other person included on the application, an applicant for an immigrant visa?	Yes/No	radio	
			(IF YES) Provide an explanation.		text area	
		4.4	Has an immigrant petition EVER been filed for you or for any other person-included in this application?	yes/no	radio	
			(IF YES) Provide an explanation.		text area	
		4.5	Has an Application to Register Permanent Resident or Adjust Status (I-485), EVER been filed by you or by any other person included in this application?	yes/no	radio	
			(IF YES) Provide an explanation.		text area	
		4.6	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	radio	
			(IF YES) Provide an explanation.		text area	
		4.14	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	radio	
			(IF YES)Describe the employment and include the name of the person employed, name and address of the employer, weekly income, and whether the employment was specifically authorized by USCIS.		text area	

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p	Section	Paper Form	Question	Sub-Question	Field Type	Instructional Text
		Question #				
			(IF NO)Describe how you are supporting yourself. Include any documentary evidence of the source, amount, and basis for any income.		text area	Such evidence may include, but is not limited to:  • complete bank statements for checking and/or savings accounts showing all transactions,  • other cash assets, or
		4.15	Are you, or any other person included on the application, currently or have you ever been a J-1 exchange visitor or a J-2 dependent of a J-1	yes/no	radio	<ul> <li>affidavits of support from a sponsor.</li> </ul>
			exchange visitor? (IF YES)Provide the dates you maintained status as a J-1 exchange visitor or J-2 dependent.		text area	
	Co-Applicants	2.4/2.5.a	Are you the only applicant applying with this form?	Yes/No	Radio button	
		2.5.b	(IF NO) What is the total number of people (including yourself) in this application?		Textfield	

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Step	Section	Paper Form Question #	Question	Sub-Question	Field Type	Instructional Text	Help Text
Public Benefit	Public benefit information	5.1	Since obtaining the nonimmigrant status that you seek to extend or from which you seek to change, have you ever received, or are you currently certified to receive in the future any of the following public benefits? (See below and select all that apply)	certified to receive public benefits.	checkbox	1. Any Federal, state, local, or tribal cash assistance for income maintenance including:  a. Supplemental Security Income (SSI);  b. Temporary Assistance for Needy Families (TANF); or  c. Federal, state, or local cash benefit programs for income maintenance (often called "General Assistance" in the state context, but which may exist under other names);  2. Supplemental Nutrition Assistance Program (SNAP, formerly called "Food Stamps");  3. Section 8 Housing Assistance under the Housing Choice Voucher Program;  4. Section 8 Project-Based Rental Assistance (including Moderate Rehabilitation):	
				No, I have not received any of the public benefits listed above	checkbox		
				No, I am not certified to receive any of the public benefits listed above	checkbox		
	(IF 5.1 = Yes) Public benefit information to		(if Yes) Select all of the public benefits which you received or are currently certified to receive:	Any federal, state, local or tribal cash assistance for income maintenance	checkbox		
				Supplemental Security Income (SSI) Temporary Assistance for Needy Families (TANF)	checkbox checkbox		
				General Assistance (GA) Supplemental Nutrition Assistance Program (SNAP, formerly called "Food Stamps")	checkbox checkbox		
				Section 8 Housing Assistance under the Housing Choice Voucher Program	checkbox		
				Section 8 Project-Based Rental Assistance (including Moderate Rehabilitation)	checkbox		
				Public Housing under the Housing Act of 1937, 42 U.S.C. 1437 et seq.	checkbox		

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Section	Paper Form Question #	Question	Sub-Question	Field Type	e Instructional Text	Help Text
			Federally-funded Medicaid	checkbox		
(IF 5.1 = Yes) Public benefit history		Your public benefits			List all of the public benefits which you received or are set to receive below.	
	5.2.a-d	I What type of public benefit have you received?		dropdown	This dropdown list is based on the public benefits you indicated you are currently receiving or certified to receive. Select from the public benefits listed in the dropdown menu to provide the additional information about that public benefit.	
		What Agency Granted You the Benefit?		text area		
		What date did you start receiving the		date		
		benefit?			Date You Started Receiving the Benefit or if Certified, Date You Will Start Receiving the Benefit or Date Your Coverage Starts	
		What date did the benefit or coverage end or what is the date it expires?		date		
Public benefit additional information	5.4.a.	Have you received, applied for, or have been certified to receive federally-funded Medicaid in connection with any of the following? (Select all that apply)		text area		
			An emergency medical condition.	checkbox		
			For a service under the Individuals with Disabilities Education Act (IDEA).	checkbox		
			Other school-based benefits or services available up to the oldest age eligible for secondary education under state law.	checkbox		
			While you were under the age of 21.	checkbox		
			While you were pregnant or during the 60-day period following the last day of pregnancy.  None of the above statements apply to			
			me.	CITCCROOX		
	5.4.b.	(IF 5.4.a ≠ None of the above) Provide the applicable start and end dates for federally-funded Medicaid.		date		
	5.3	(If Yes to 5.1) Do any of the following	To I am enlisted in the Armed Forces, or	date checkbox		
	3.3	apply to you?	am serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.	CITCONDOX		

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Step	Section	Paper Form Question Question #	Sub-Question	Field Type	Instructional Text	Help Text
			I am the spouse or the child of an individual who is enlisted in the Armed Forces, or who is serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.	checkbox		
			At the time I received the public benefits, I (or my spouse or parent) was enlisted in the Armed Forces, or was serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.	checkbox		
			At the time I received the public benefits, I was present in the United States in a status exempt from the public charge ground of inadmissibility.	checkbox		
			At the time I received the public benefits, I was present in the United States after being granted a waiver off the public charge ground of inadmissibility.	checkbox		
			I am a child currently residing abroad who entered the United States with a nonimmigrant visa to attend an N-600K, Application for Citizenship and Issuance of Certificate under INA Section 322 interview.	checkbox		
			None of the above statements apply to me.	checkbox		

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Step	Section	Paper Form Question #	Question	Sub-Question	Field Type	Instructional Text
Additional Explanation	Additional explanation	9.1.a-9.7.d	You may provide additional information for your application	Additional information	Textbox	If you need to provide any additional information for any of your answers to the questions in this form, enter it into the space below. You should include the questions that you are referencing.
						If you do not need to provide any additional information, you may leave this section blank.

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Step	Section	Evidence Title	Field Type	Instructional Text	Logic
Evidence	Required evidence	Your Nonimmigrant Arrival/Departure Record (I-94)	Upload	Upload an image or copy of both sides of your Nonimmigrant Arrival/Departure Record (I-94).	Required for all applicants (exclude T and U nonimmigrants)
				If you were admitted to the United States by U.S. Customs and Border Protection (CBP) at an airport or seaport after April 30, 2013, you may have been issued an electronic I-94 by CBP, instead of a paper form. Visit <a href="https://www.cbp.gov/i94">CBP</a> to obtain a copy of your I-94.	
				If you are unable to obtain a copy of your I-94 from CBP, go to <a href="https://www.uscis.gov/i-102">USCIS I-102</a> to find additional I-94 Replacement Information.	
		Additional applicants' Nonimmigrant Arrival/Departure Record (I-94)	Upload	Upload an image or copy of both sides of the Nonimmigrant Arrival/Departure Record (I-94) for each person included in your application.	Required for all additional applicants (exclude T and U nonimmigrants)
				If they were admitted to the United States by CBP at an airport or seaport after April 30, 2013, they may have been issued an electronic Nonimmigrant Arrival/Departure Record by CBP, instead of a paper form. Visit the <a href="https://www.cbp.gov/i94">CBP website</a> to obtain a paper version of their Nonimmigrant Arrival/Departure Record.	
				If you are unable to obtain a copy of their I-94 from CBP, go to the <a href="https://www.uscis.gov/i-102">USCIS I-102</a> page to find additional I-94 Replacement Information.	
		Your Nonimmigrant Arrival/Departure Record (I-94) or Approval Notice (I-797)	Upload	Upload an image or copy of both sides of your Nonimmigrant Arrival/Departure Record (I-94). If you do not have your Nonimmigrant Arrival/Departure Record, you can upload a copy of your Approval Notice (I-797) or an image of your passport that shows you have already been granted status.	If nonimmigrant status = T (law enforcement OR exceptional circumstances), T derivative (T-2, T-3, T-4, T-5, T-6), U (law enforcement OR exceptional circumstances), U-1, U-2, U-3, U-4, U-5
				If you were admitted to the United States by CBP at an airport or seaport after April 30, 2013, you may have been issued an electronic Nonimmigrant Arrival/Departure Record by CBP, instead of a paper form. Visit the <a href="https://www.cbp.gov/i94">CBP website</a> to obtain a paper version of your Nonimmigrant Arrival/Departure Record.	
				If you are unable to obtain a copy of your I-94 from CBP, go to the <a href="https://www.uscis.gov/i-102">USCIS I-102</a> page to find additional I-94 Replacement Information.	

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ep Section	indicated in ( ) before question  Evidence Title	Field Type	Instructional Text	Logic
	Additional applicants' Nonimmigrant Arrival/Departure L Record (I-94) or Approval Notice (I-797)		Upload an image or copy of both sides of the Nonimmigrant Arrival/Departure Record (I-94) for each person included in your application. If you do not have your Nonimmigrant Arrival/Departure Record, you can upload a copy of your Approval Notice (I-797) or an image of your passport that shows you have already been granted status.	If nonimmigrant status = T (law enforcement OR exceptional circumstances), T derivative (T-2, T-3, T-4, T-5, T-6), U (law enforcement OR exceptional circumstances), U-1, U-2, U-3, U-4, U-5
			If they were admitted to the United States by CBP at an airport or seaport after April 30, 2013, they may have been issued an electronic Nonimmigrant Arrival/Departure Record by CBP, instead of a paper form. Visit the <a href="https://www.cbp.gov/i94">CBP website</a> to obtain a paper version of their Nonimmigrant Arrival/Departure Record.	
			If you are unable to obtain a copy of their I-94 from CBP, go to the <a href="https://www.uscis.gov/i-102">USCIS I-102</a> page to find additional I-94 Replacement Information.	
	Your Interagency Record of Request - A, G, or NATO Dependent Employment, Authorization, or Change/Adjustment to/from A, G, or NATO Status (I-566)	Upload	Upload an image or copy of the Iteragency Record of Request - A, G, or NATO Dependent Employment, Authorization, or Change/Adjustment to/from A, G, or NATO Status (I-566) that is certified by the Department of State and indicates your accredited status.	If nonimmigrant status = A, G
	Your employer's Nonimmigrant Arrival/Departure Record (I-94)	Upload	Upload an image or copy of your employer's Nonimmigrant Arrival/Departure Record (I-94) or an approval notice demonstrating their A status.	If nonimmigrant status = A-3
	Your employer's Nonimmigrant Arrival/Departure Record (I-94)	Upload	Upload an image or copy of your employer's Nonimmigrant Arrival/Departure Record (I-94) or an approval notice demonstrating their G status.	If nonimmigrant status = G-5
	Letter from your employer	Upload	Upload an image or copy of a letter from your employer stating:  Your duties  That the employer intends to personally employ you for the entirety of your contract	If nonimmigrant status = A-3, G-5
	Your employer's Interagency Record of Request - A, G, or NATO Dependent Employment, Authorization, or Change/Adjustment to/from A, G, or NATO Status (I-566)	Upload	<ul> <li>Arrangements you have made to depart from the United States</li> <li>Upload an image or copy of your employer's Interagency Record of Request - A,</li> <li>G, or NATO Dependent Employment, Authorization, or Change/Adjustment</li> <li>to/from A, G, or NATO Status (I-566) that is certified by the Department of State</li> <li>and indicates your employer's continuing accredited status.</li> </ul>	If nonimmigrant status = A-3, G-5
	Your written statement	Upload	Upload a written statement explaining in detail:  • The reasons for your request for an extension or change  • The reasons why your extended stay would be temporary, including what arrangements you have made to depart from the United States  • Any effect the extended stay may have on your foreign employment or residency	If nonimmigrant status = B-1 or B-2

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Step	Section	Evidence Title	Field Type	Instructional Text	Logic
		Evidence of your lawful residence in Commonwealth of Northern Mariana Islands	Upload	Upload an image or copy of proof of your lawful presence in the Commonwealth of the Northern Mariana Islands (CNMI) as defined in 8 CFR 214.2(w)(l)(v).	If nonimmigrant status = CW-2 (Dependent of CW-1)
		Evidence of your relationship with the CW-1 transitional worker	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the CW-1 transitional worker. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = CW-2
		Additional evidence for CW-2 applicants	Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker in the CNMI (I-129CW) that was filed on behalf of the CW-1 transitional worker  2. A copy of the Receipt Notice (I-797) related to the transitional worker's already pending petition  3. A copy of the front and back of the transitional worker's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the transitional worker has already been granted status for the period requested on your application	If nonimmigrant status = CW-2
		Evidence of your relationship with the principal E nonimmigrant		Upload an image or copy of any evidence that shows each applicant's relationship to the principal E nonimmigrant. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = E-1 Treaty Traders, E-1 employees, E-2 Treaty Investors, E-2 employees, E-2 CNMI Investors, E-3 Australian Specialty Occupation Professionals
		Additional evidence for dependents of principal E nonimmigrants	Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker (I-129) that was filed on behalf of the principal E nonimmigrant  2. A copy of the Receipt Notice (I-797) related to the principal E nonimmigrant's already pending Petition for a Nonimmigrant Worker (I-129)  3. A copy of the front and back of the principal E nonimmigrant's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the principal E nonimmigrant has already been granted status for the period requested on your application.	If nonimmigrant status = E-1 Treaty Traders, E-1 employees, E-2 Treaty Investors, E-2 employees, E-2 CNMI Investors, E-3 Australian Specialty Occupation Professionals

# I-539 INTERACTIVE FORM COPY: QUESTIONS, INSTRUCTIONAL AND HELP TEXT, AND OTHER COPY

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tep Section	s indicated in ( ) before question  Evidence Title	Field Type	Instructional Text	Logic
	Your Certificate of Eligibility for Nonimmigrant Student (I- 20)	Upload	Upload an image or copy of your Certificate of Eligibility for Nonimmigrant Student (I-20), issued by the school where you will study.	If nonimmigrant status = F-1 (and requesting change or reinstatement), M-1
	Proof of ability to pay	Upload	Upload an image or copy of any documentation that demonstrates your ability to pay for your studies and support yourself, and any accompanying dependent family members, while you are in the United States.	.,
	Evidence for reinstatement	Upload	Upload an image or copy of any documentation that shows that your violation of status resulted from circumstances beyond your control or that your violation relates to a reduction in your course load that would have been within a Designated Schools Official's (DSO's) power to authorize, and that failure to approve reinstatement would result in extreme hardship for you.	If nonimmigrant status = F-1 (requesting reinstatement), M-1 (requesting reinstatement)
			If you have been out of status for more than 5 months at the time of filing your request for reinstatement, you must also provide evidence that your failure to file within the 5 month period was the result of exceptional circumstances and that you filed your request for reinstatement as promptly as possible under these exceptional circumstances.	
	Evidence of your relationship with the H temporary worker	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the H temporary worker. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = H-4
	Additional evidence for dependents of an H temporary worker	Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker (I-129) that was filed on behalf of the H temporary worker  2. A copy of the Receipt Notice (I-797) related to the H temporary worker's already pending Petition for a Nonimmigrant Worker (I-129)  3. A copy of the front and back of the H temporary worker's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the H temporary worker has already been granted status for the period requested on your application.	If nonimmigrant status = H-4
	Letter from your employer	Upload	Upload an image or copy of a letter from the employing media organization that:  • Verifies your employment  • Establishes that you are a representative of that media organization  • Describes your compensation and work to be performed	If nonimmigrant status = I
	Evidence of your relationship with the principal nonimmigrant	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the principal nonimmigrant. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = I (dependent)
	Your Certificate of Eligibility for Exchange Visitor Status (DS-2019)	Upload	Upload an image or copy of your Certificate of Eligibility for Exchange Visitor Status (DS-2019).	If nonimmigrant status = J-1 (changing to J-1)

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Page breaks are indicated by a horizontal line (the same sub-navigation can have multiple pages)

Step Section	ic is indicated in ( ) before question  Evidence Title	Field Type	Instructional Text	Logic
	Evidence of your relationship with the Lintracompany transferee	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the L intracompany transferee. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = L-2
	Additional evidence for dependents of an L intracompany transferee	/ Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker (I-129) that was filed on behalf of the L intracompany transferee  2. A copy of the Receipt Notice (I-797) related to the L intracompany transferee's already pending Petition for a Nonimmigrant Worker (I-129)  3. A copy of the front and back of the L intracompany transferee's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the L intracompany transferee has already been granted status for the period requested on your application.	If nonimmigrant status = L-2
	Evidence supporting your reason for an extension	Upload	Upload an image or copy of any evidence supporting your reason for requesting an extension. You may request an extension if:  • Compelling educational or medical reasons have resulted in a delay of your course of study  • You are applying for a post-completion optional practical training  • You are transferring to a different school	if nonimmigrant status = M-1 (extension)
			If you are transferring schools 6 months, or more, after the date you first admitted, you will need to upload evidence showing you are unable to remain at the school you were initially admitted to attend due to circumstances beyond your control.	
	Evidence of your relationship with the O nonimmigrant worker	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the O nonimmigrant worker. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = O-3
	Additional evidence for dependents of an O nonimmigrant worker	Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker (I-129) that was filed on behalf of the O nonimmigrant worker  2. A copy of the Receipt Notice (I-797) related to the O nonimmigrant worker's already pending Petition for a Nonimmigrant Worker (I-129)  3. A copy of the front and back of the O nonimmigrant worker's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the O nonimmigrant worker has already been granted status for the period requested on your application.	If nonimmigrant status = 0-3
	Evidence of your relationship with the P nonimmigrant worker	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the P nonimmigrant worker. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = P-4

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Step	Section	ndicated in ( ) before question  Evidence Title	Field Type	Instructional Text	Logic
		Additional evidence for dependents of an P nonimmigrant worker	: Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker (I-129) that was filed on behalf of the P nonimmigrant worker  2. A copy of the Receipt Notice (I-797) related to the P nonimmigrant worker's already pending Petition for a Nonimmigrant Worker (I-129)  3. A copy of the front and back of the P nonimmigrant worker's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the P nonimmigrant worker has already been granted status for the period requested on your application.	If nonimmigrant status = P-4
		Evidence of your relationship with the R religious worker	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the R religious worker. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = R-2
		Additional evidence for dependents of an R religious worker	Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker (I-129) that was filed on behalf of the R religious worker  2. A copy of the Receipt Notice (I-797) related to the R religious worker's already pending Petition for a Nonimmigrant Worker (I-129)  3. A copy of the front and back of the R religious worker's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the R religious worker has already been granted status for the period requested on your application.	If nonimmigrant status = R-2
		Evidence of your relationship with the TN professional worker	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the TN professional worker. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = TD
		Additional evidence for dependents of a TN professional worker	Upload	Upload an image or copy of one of the following:  1. Petition for a Nonimmigrant Worker (I-129) that was filed on behalf of the TN professional worker  2. A copy of the Receipt Notice (I-797) related to the TN professional worker's already pending Petition for a Nonimmigrant Worker (I-129)  3. A copy of the front and back of the TN professional worker's most recent Nonimmigrant Arrival/Departure Record (I-94)  4. A copy of the Approval Notice (I-797) showing the TN professional worker has already been granted status for the period requested on your application.	If nonimmigrant status = TD
		Evidence demonstrating law enforcement need	Upload	Upload an image or copy of any evidence demonstrating law enforcement need. This may include a Declaration of Law Enforcement Officer for Victims or Trafficking in Persons (I-914, Supplement B) or other evidence from law enforcement explaining that your presence is necessary, and any other credible evidence.	If nonimmigrant status = T (law enforcement need)

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Step	Section	Evidence Title	Field Type	Instructional Text	Logic
		Evidence demonstrating exceptional circumstances	Upload	Upload an image or copy of any evidence that demonstrates your exceptional circumstances. This may include an affirmative statement or any other credible evidence.	If nonimmigrant status = T (exceptional circumstances), U (exceptional circumstances)
		Evidence supporting your reason for an extension	Upload	Upload a written statement explaining the need and reason for your request for an extension.	If nonimmigrant status = T-2, T-3, T-4, T-5, T-6, U-2, U-3, U-4, U-5
		Evidence of your relationship with the T-1 nonimmigrant principal	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the T-1 nonimmigrant principal. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = T-2, T-3, T-4, T-5, T-6
		Evidence demonstrating law enforcement need	Upload	Upload an image or copy of any evidence demonstrating law enforcement need. This may include a U Nonimmigrant Status Certification (I-918, Supplement B) or other evidence from law enforcement explaining that your presence is necessary, and any other credible evidence.	If nonimmigrant status = U (law enforcement need)
		Evidence of your relationship with the U-1 nonimmigrant principal	Upload	Upload an image or copy of any evidence that shows each applicant's relationship to the U-1 nonimmigrant principal. This may include a birth certificate, marriage certificate, or proof of termination of any prior marriages.	If nonimmigrant status = U-2, U-3, U-4, U-5
		Evidence you received any public benefits.	Upload	Upload evidence in the form of a letter, notice, certification, or other agency documents that contain the following:  1. Your name;  2. Name and contact information for the public benefit granting agency;  3. Type of benefit;  4. Date you started receiving the benefit or if certified, date you will start receiving the benefit; and  5. Date benefit or coverage ended or expires (mm/dd/yyyy) (if applicable)	If selected 5.1: "Yes, I have received or I am currently certified to receive public benefits."
		Evidence of public benefit disenrollment request.	Upload	Upload evidence of your request to disenroll if the public benefit-granting agency has not processed your request (if applicable).	If selected 5.1: "Yes, I have received or I am currently certified to receive public benefits."
		Evidence your enlistment in the U.S. Armed Forces, serving in active duty or in the Ready Reserve component of the U.S. Armed forces.	Upload	Upload certified evidence of alien's enlistment/service issued by the authorizing official of the executive department in which service member is serving.	If 5.3 = "I am enlisted in the Armed Forces, or am serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces"  OR; "At the time I received the public benefits, I (or my spouse or parent) was enlisted in the Armed Forces, or was servin in active duty or in the Ready Reserve Component of the U.S. Armed Forces."

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Section	Evidence Title	Field Type	Instructional Text	Logic
	Evidence of your relationship to a service member of the U.S. Armed forces.	Upload	Upload a copy of Form DD-1173, United States Uniformed Services Identification and Privilege Card (Dependent).	enlisted in the Armed Forces, or who is serving in at duty or in the Ready Reserve Component of the U.S. Forces."  OR;  "At the time I received the public benefits, I (or my or parent) was enlisted in the Armed Forces, or was in active duty or in the Ready Reserve Component of
	Evidence of receiving Federal-Funded Medicaid by a child under 21 years of age.	Upload	Upload a copy of the following (if applicable):  1. A statement with information regarding the "emergency medical condition" determination (if applicable);  2. Documentation of these payments under the IDEA or school-based service; and  3. Pregnancy verification letter from medical professional including estimated duration of pregnancy.	U.S. Armed Forces."  If 5.4.a. = "While you were under the age of 21."OR "An emergency medical condition." OR; "For a service under the Individuals with Disabilitie Education Act (IDEA)." OR; "Other school-based benefits or services available u oldest age eligible for secondary education under s' law." OR; "While you were pregnant or during the 60-day per
	Proof of child's N-600K interview notice.	Upload	Upload a copy of the N-600K interview notice.	following the last day of pregnancy." If 5.3 = "I am a child currently residing abroad who the United States with a nonimmigrant visa to atter 600K, Application for Citizenship and Issuance of Ce Under INA Section 322 interview."
	Evidence you received public benefits while in a category that is exempt from public charge.	Upload	Upload information that evidences of your status or that you received a waiver for the public charge ground of inadmissibility, such as  1. Approval notice (such as Form I-797, Notice of Action); or  2. Form I-94, Arrival/Departure Record.	If 5.3 = "At the time I received the public benefits, I present in the United States in a status exempt fror public charge ground of inadmissibility."
	Evidence you received public benefits while in a category which had received a waiver for public charge.	Upload	Upload information that evidences of your status or that you received a waiver for the public charge ground of inadmissibility, such as  1. Approval notice (such as Form I-797, Notice of Action); or  2. Form I-94, Arrival/Departure Record.	If 5.3 = "At the time I received the public benefits, I present in the United States after being granted a v off the public charge ground of inadmissibility."
Additional evidence	Additional evidence you want to provide	Upload	You can provide additional documents that support your application and help explain any of your answers on the application. If you want to provide additional evidence now, upload any documents below.	All applicants

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e indicated by a horizontal line ( estion logic is indicated in ( ) bet Section	fore question	m Question	Current Sub-Question Re	Revised Sub-Question Field Type	Current Instructional Text	Revised Instructional Text	Help Text	
Section	Question		Current Sub-Question No.	Kevised Sub-Question Field Type	Current Instructional Text	Revised Instructional Text	неір гехт	'
Submit Review your		Check your application before			We will review your application to check for accuracy and completeness before you submit it.	s		
аррисацоп		you submit			We encourage you to provide as many responses as you can throughou			
					the application, to the best of your knowledge. Missing information car slow down the review process after you submit your application.	1		
					You can return to this page to review your application as many times as you want before you submit it.	•		
		Your eligibility			You will submit your application using the following basis for eligibility.			
		Your request reaso	n		Title: Your request reason is: {{Application type}} Based on the reason for your request, your form filing fee is: {{Dollar			
		Alerts and warning	s		amount}} You have one or more alerts and warnings based on the information yo	U		
					provided in your application.			
					A red alert means you have incomplete or incorrect responses to certail questions. You cannot submit your application with any alerts.	n		
					A yellow warning means you may be missing information or may need			
					to follow-up with us about your responses. You can still submit your application, but some warnings may slow down the review process after	a a		
					you submit your application.			
Your application summary	n				Here is a summary of all the information you provided in your application.			
					Make sure you have provided responses for everything that applies to			
					you before you submit your application. You can edit your responses by going to each application section using the site navigation.	•		
Preparer	8.7.a	Preparer's	I am <b>not</b> an attorney or accredited representative but have prepared this application on behalf of the	Radio	Your preparer must read the statements below and select the statemen	nt		
signature		statement	applicant and with the applicant's consent.		that applies to him or her.			
					If your preparer is an attorney or accredited representative whose representation extends beyond preparation of this application, he or sh	ne e		
					may be obliged to submit a completed Notice of Entry of Appearance a: Attorney or Accredited Representative (G-28) with your application.	s		
	8.7.b		I am an attorney or accredited representative and my representation of the applicant in this case does	Radio				
	8.7.b		not extend beyond the preparation of this application.  I am an attorney or accredited representative and my representation of the applicant in this case	Radio				
	8	Preparer's	extends beyond the preparation of this application.  By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the	Checkbax	Your preparer must read and agree to the certification below.			
		certification	applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including					
			the Applicant's Dedaration and Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or					
			authorized me to obtain or use.  As the applicant's preparer, you must sign on paper and provide your signature page to the applicant.					
			Follow these steps:					
			Download the Preparer Signature page     Print the Preparer Signature page					
			Read and sign the Preparer Signature page     Give the signed Preparer Signature page to the applicant					
			The applicant will need to scan and upload your completed signature page on the next screen.					
	8.8.a	/b Preparer's signatu		Upload	Scan and upload your preparer's completed signature page below.			
Interpreter	7	upload Interpreter's	I certify, under penalty of perjury, that: I am fluent in English and the language provided in the Getting	Checkbax	Your interpreter must read and agree to the certification below.			
signature		certification	Started section of this application, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant					
			informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.					
			As the applicant's interpreter, you must sign on paper and provide your signature page to the applicant.					
			Follow these steps:					
			Download the Interpreter Signature page     Print the Interpreter Signature page					
			Read and sign the Interpreter Signature page     Give the signed Interpreter Signature page to the applicant					
			Give the signed interpreter signature page to the applicant  The applicant will need to scan and upload your completed signature page on the next screen.					
	7.7 -	/b Interpreter's	тис вручность will need to stain and uproad your completed signature page on the next screen.	Upload	Scan and upload your interpreter's completed signature page below.			
Your signature		signature upload Applicant's	I can read and understand English, and I have read and understand every question and instruction on	Checkbax	You must read and agree to the statement below.		Read the Penalties section of	of the Form I-
rour angulature	0.2.0	statement	this application and my answer to every question.	CHEADUR	and upon to the statement show.		539 Instructions before comp	pleting this
	6.2	Applicant's statement	At my request, the preparer named in the Getting Started section of this application/[preparer name] prepared this application for me based only upon information I provided or authorized.	Checkbax	You must read and agree to the statement below.		ALLEGIE.	
		regarding the	ровремення по по обосо операрот mornadum provided от вишитией.					
	6.1.b	Applicant's	The interpreter named in the Getting Started section of this application read to me every question and	Checkbax	You must read and agree to the statement below.			
		statement	instruction on this application and my answer to every question in the language I specified in the Getting Started section, a language in which I am fluent, and I understood everything.					

Biometrics Rule NPRM - edits made

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	Paper Forn Question #	m Question	Current Sub-Question	Revised Sub-Question	Field Type	Current Instructional Text	Revised Instructional Text	Help Text	Primary CTA
	6	Applicant's declaration, certification and signature	I understand that USCIS may require that I submit original documents to USCIS at a later date.	Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCS may require that I submit original documents to USCS at a later date. Furthermore, I authorite the release of any information from any and all of my records that USCS may need to determine my eligibility for the immigration benefit that I seek.		You must read and agree to the certification below. If you knowingly and wilfully faisify or conceal a material fact or submit a false document with your application, we can deny your application and may deny any other immigration benefit. You may also face criminal prosecution and penalties provided by the law.	with your application, we can deny your application and may deny any		
			I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.	I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.		penances provided by the law.	If you are required to provide biometrics, at the appointment you must sign an oath reaffirming that:  1. You provided or authorized all information in the application;		
			I understand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:	[deleted]			2. You reviewed and understood all of the information contained in, and submitted with, your application; and 3. All of this information was complete, true, and correct at the time of filing.		
			<ol> <li>I reviewed and understood all of the information contained in, and submitted with, my application; and</li> <li>All of this information was complete, true, and correct at the time of filing.</li> </ol>						
			I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.	I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.					
		Federal Agency Disclosure and Authorizations	I authorize, as applicable, the Social Security Administration (SSA) to verify my Social Security number (to match my name, Social Security number, and date of birth with information in SSA records and provide the results of the match) to USCIS. I authorize SSA to provide explanatory information to USCIS as necessary.						
			I authorize, as applicable, the SSA, U.S. Department of Agriculture (USDA), U.S. Department of Health and Human Services (HHS), U.S. Department of Health and Human Services (HHS), U.S. Department of Health and Human Services (HHS), and the part of the Human Services (HHS), and the Human Services (HHS), HHS, HHS, HHS, HHS, HHS, HHS, HHS,						
			I authorize, as agalicable, custodians of records and other source of information pertaining to my request for or receipt of public benefits to release information regarding my request for and/or receipt public benefits, soon the request of the investigator, pecial again, or other oldy accordined representative of any Federal agency authorized above, regardless of any previous agreement to the contrary.						
			I understand that the information released by records custodians and sources of information is for official use by the Federal Covernment, that the U.S. Government will use it only to review if I have received public benefits in regards to my eligibility for immigration benefits and to enforce immigration laws, and that the U.S. Government may disclose the information only as authorized by law.						
			I have read and agree to the applicant's statement		Checkbox				
	6.6.a	Your signature				You must provide your digital signature below by typing your full legal name. We may deny your application if you do not completely fill out this application or fall to submit required documents. We will record the date of your signature with your application.		NOTE TO ALL APPLICANTS: If you do not completely fill out this applicatio or fail to submit required documents listed in the Instructions, USCIS may deny your application.	
Pay and submit	6.6.b		[Date of signature]			The final step to submit your I-539 is to pay the required fee.			
		Pay for and submit your application				Your application fee is: [\$XXXX.00] Your biometries fee is: [\$XXXX.00] Your treat fee is: [\$XXXX.00] You treat fee is: [\$XXXXX.01] If you have a form fee, we will send you to Pay gov — our safe, secure payment website — to make your payment and submit your application online.			Pay and subm
						Here are the steps in the payment and submission process:  1. Provide your billing information on Pay.gov			
						Provide your information for one of two billing options: credit card or U.S. bank account     Submit your payment			
						When you have paid your fee, your application will be submitted.			
						Pay.gov will redirect you to an application confirmation screen. You can			

<b>Biometrics R</b>	Biometrics Rule NPRM - no edits									
Heading	Sub-Heading	Body Text	Accordion Header	Accordion Body						
Before you start your application	Eligibility	<b>EXEMPTIONS</b> : The following are exempted from the public benefits listed above.	•	d An alien enlisted in the U.S. Armed Forces, serving in active duty or in the Ready Reserve component of the U.S. Armed forces; or the spouse or child of the service member.						
			Federal-funded Medicaid;	1. Receipt by a child under 21 years of age;						
				2. The receipt of Medicaid payment(s) for an "emergency medical condition;"						
				3. The receipt of Medicaid for services provided under the Individuals with Disabilities Education Act (IDEA);						
				4. The receipt of Medicaid for school-based benefits for children who are of an age eligible for secondary education as determined under state or local law; or 5. Receipt during pregnancy and during the 60-day period after the last day of pregnancy.						
			Children who will naturalize under INA	A Child currently residing abroad who entered the United States with a nonimmigrant visa to attend N-600K, Application for Citizenship and Issuance of Certificate under INA						
			322;	Section 322 interview.						
			Public benefits received while in an immigration category exempt from public charge;	Received public benefits while in a category that is exempt from public charge; or received public benefits while in a category had received a waiver for public charge.						

# I-539 FORM COPY: WARNINGS, ALERTS, NOTICES, AND ERRORS

Alert: Appears in red box; indicates missing required information or lack of eligibility; user cannot submit application Warning: Appears in yellow box; indicates potential eligibility issue or follow-up step; user can submit application Notice: Appears in blue box; indicates potential exemptions or other useful information; user can submit application Error: Appears in red text below a form field; user can submit application

Number Type	Logic	Message	Where the alert exists	
1 Yellow alert	This alert will show up during Beta - Beta 2.1	h3. You can file an individual extension request online only for certain statuses	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change- nonimmigrant-status/overview	Link goes to: https://www.uscis.gov/i- 539
1.1 Yellow alert	This alert will show up	At this time, you cannot file online if you:  * Need to extend your status and your nonimmigrant status is not listed above,  * Want to reinstate or change your nonimmigrant status, or  * Have additional applicants.  * Have an A, G, NATO, V, T or U nonimmigrant status  * Require a lawyer or accredited representative  You will need to file a paper Form I-539.  h3. You can file an individual extension request online only for certain	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change-	Link goes to: https://www.uscis.gov/i-
	during Beta 4.	statuses	nonimmigrant-status/overview	539
11 Yellow alert	This alert will show up	At this time, you cannot file online if you:  * Need to extend your status and your nonimmigrant status is not listed above,  * Have additional applicants.  * Have an A, G, NATO, V, T or U nonimmigrant status  * Require a lawyer or accredited representative  You will need to file a paper Form I-539.  h3. You can file an individual extension request online only for certain	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change-	Link goes to: https://www.uscis.gov/i-
1.1 Tellow diere	during Beta 5.	statuses	nonimmigrant-status/overview	539
		At this time, you cannot file online if you:  * Need to extend your status and your nonimmigrant status is not listed above,  * Have additional applicants.  * Have an A, G, NATO, V, T or U nonimmigrant status		
2 Yellow alert	This alert will show up during Beta - Beta 2.1	You will need to file a paper Form I-539. h3. You can file your extension request online only for certain statuses.	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change- nonimmigrant-status/2497/basis-for-eligibility	Link goes to: https://www.uscis.gov/i- 539
	·	You can complete this online form if your current nonimmigrant status is listed above and you are requesting an extension of status. You should submit the paper Form I-539 if your current nonimmigrant status is not listed above or you want to change or reinstate your nonimmigrant status.		
3 Red alert	This alert will show up during Beta - Beta 3. This will go away with Beta 4.	h3. Online filing is available only for extension of status requests.  You can complete this online form only if you are requesting an extension of your nonimmigrant status. You should file a paper Form I-539 if you want to change or reinstate your nonimmigrant status.	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change-nonimmigrant-status/2497/reason-for-request	Link goes to: https://www.uscis.gov/i- 539

# I-539 FORM COPY: WARNINGS, ALERTS, NOTICES, AND ERRORS

Alert: Appears in red box; indicates missing required information or lack of eligibility; user cannot submit application Warning: Appears in yellow box; indicates potential eligibility issue or follow-up step; user can submit application Notice: Appears in blue box; indicates potential exemptions or other useful information; user can submit application Error: Appears in red text below a form field; user can submit application

Number	Туре	Logic	Message	Where the alert exists	
	4 Red alert	This alert will show up during Beta - Beta 4. This will go away with Beta 5.		https://qa-my.uscis.dhs.gov/apply/application-to-extend-change- nonimmigrant-status/2497/additional-applicants	Link goes to: https://www.uscis.gov/i- 539
		wingo away with beta 3.	You can complete the online version of Form I-539 if you are requesting an extension for only yourself. If you want to include co-applicants, you must file the paper Form I-539.		
	5 Red alert	This will show up if I-94 is not uploaded	h3. You must upload an image or copy of your Nonimmigrant Arrival/Departure Record (I-94).	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change- nonimmigrant-status/4870/required-evidence	
	6 Yellow alert	Will show up if the user has not answered question about having Public Benefits	You cannot submit your application until you upload an image or copy of your I-94. h3. There are new question in the form  On October 15, 2019, the Public Benefits section was added to the I-539. If you started your I-539 before October 15, 2019, you may not have seen this section. You should fill out the Public Benefits section before submitting your form.	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change- nonimmigrant-status/4870/review-your-application	Link goes to: https://qa- my.uscis.dhs.gov/apply/application-to- extend-change-nonimmigrant- status/4870/public-benefits-information
	7 Yellow alert	Will show up on Public Benefits Additional Information page	CTA button link: "Go to Public Benefits section" h3. There is evidence that you should upload for public benefits  Click on Next to go to the Evidence section.	https://qa-my.uscis.dhs.gov/apply/application-to-extend-change- nonimmigrant-status/4870/public-benefits-additional-information	