

**Instructions for Form I-914, Supplement B, Declaration of
Law Enforcement Officer for Victim of Trafficking in Persons****Instructions**

Read these instructions carefully to properly complete this form. If you need more space to complete an answer, use a separate sheet of paper. Write the victim's name and Alien Registration Number (A-Number), if known, at the top of each sheet of paper and indicate the part and number of the item to which the answer refers.

What Is the Purpose of This Form?

Federal, State, and local Law Enforcement Officers should use Form I-914, Supplement B, to certify that an individual (the applicant) submitting Form I-914, Application for T Nonimmigrant Status, is a victim of a severe form of trafficking in persons.

When Should I Use Form I-914, Supplement B?

If you, the certifying Federal, State, or local Law Enforcement official, determine that this individual is or has been a victim of a severe form of trafficking in persons, you may complete this supplement form. The **applicant** will then submit the supplement to USCIS with his or her application for T nonimmigrant status.

You must complete the form based upon your knowledge of the case, including evidence developed by other law enforcement officers investigating the case.

To be eligible for T nonimmigrant status, the applicant must demonstrate that he or she is present in the United States as a result of being a victim of a severe form of trafficking in persons. Unless the applicant is under 18 years of age, he or she must also show that he or she has complied with any reasonable requests from Federal, State or local law enforcement in the investigation or prosecution of the trafficking crime of which he or she was a victim. These elements may be established without submitting Form I-914, Supplement B, but submission of the Supplement B is strongly advised.

Instructions

1. Type or print legibly in black ink.
2. If extra space is needed to complete any item, attach additional sheet of paper. Write the victim's name and A-Number, if known, at the top of each sheet of paper and indicate the part and number of the item to which the answer refers.
3. Answer all questions fully and accurately. State that an item is not applicable with "N/A." If the answer is none, write "None."

This form is divided into **Parts A** through **F**. The following information will help you fill out the form.

Part A. Victim Information

1. **Family Name** (Last Name) - Give victim's legal name.
2. **Given Name** (First Name) - Give victim's full first name, do not use "nicknames." (Example: If victim's name is Albert, do not use Al.)
3. **Other Names Used** - Provide all the names the victim has used that you are aware of, including maiden name if applicable, married names, nicknames, etc.
4. **Date of Birth** - Use eight numbers to show the victim's date of birth (example: May 1, 1979, should be written 05/01/1979).
5. **Gender** - Check the appropriate box.
6. **Alien Registration Number** (A-Number) - Provide the USCIS (former INS) file number if there is one, and if it is known to you.
7. **Social Security Number** - Provide the Social Security number if there is one, and if it is known to you.

Part B. Agency Information

1. **Name of Certifying Agency** - The certifying agency must be a Federal, State, or local law enforcement agency, prosecutor, or authority, or Federal or State judge that has responsibility for the investigation or prosecution, conviction, or sentencing of the trafficking in persons of which the applicant was a victim.
2. **Name of Certifying Official** - Give your name, title, and division or office.
3. **Agency Address** - Give the agency's mailing address.
4. **Agency Type** - Mark the appropriate box.
5. **Case Information** - Provide the case status information and case identification number, if applicable.

Part C. Statement of the Claim

In order to qualify for T nonimmigrant benefits, the individual must be or have been a victim of a severe form of trafficking in persons. Mark the box that describes the individual's victimization.

- 1. Sex trafficking in which a commercial sex act was induced by force, fraud, or coercion.
- 2. Sex trafficking and the victim is under the age of 18.
- 3. The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.
- 4. Not applicable - You do not believe this individual is a victim of trafficking.
- 5. Other - Attach additional sheets to explain.

Describe the victimization and the relationship of the victimization to the crime under investigation or prosecution by attaching additional sheets. Attach the results of any name or database inquiry and any relevant reports or findings. If the individual has expressed any fear of retaliation or revenge if removed from the United States, explain, attaching additional sheets if necessary.

Indicate the dates or which the acts of trafficking occurred, the statutory citations that are or were being investigated or prosecuted, the date on which the investigation or prosecution was initiated, and the date it was completed, if any.

Part D. Cooperation of the Victim

In order to qualify for T nonimmigrant status, the individual must show that he or she has complied with any reasonable requests from Federal, State, or local law enforcement in the investigation or prosecution of the acts of trafficking of which he or she was a victim, unless they are under the age of 18.

Mark the box that describes the individual's cooperation with you and explain, attaching additional sheets if necessary.

Part E. Family Members Implicated in Trafficking

List whether any of the victim's family members are believed to have been involved in the trafficking in persons of which the individual is a victim.

An alien victim is prohibited from filing for derivative T nonimmigrant status on behalf of a family member who participated in trafficking the alien victim which established his or her eligibility for T nonimmigrant status. Therefore, USCIS will not grant an immigration benefit to a family member who committed trafficking.

Part F. Attestation

NOTE: If the victim unreasonably refuses to assist in the investigation or prosecution of the acts of trafficking of which he or she is a victim, even after this form is submitted to USCIS, you **should** notify USCIS by sending a written statement to:

USCIS
Vermont Service Center
75 Lower Welden Street
St. Albans, VT 05479-0001

Include the victim's name, date of birth, and A-Number (if available) on all correspondence.

Privacy Act Notice

We ask for the information on this form, and associated evidence, to determine the victim's eligibility for the immigration benefit being sought. Our legal right to ask for this information can be found in the Immigration and Nationality Act, as amended. We may provide this information to other government agencies.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 30 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., 3rd Floor, Suite 3008, Washington, DC 20529-2210. OMB No. 1615-0099. **Do not mail your application to this address.**