

TABLE OF CHANGES – FORM
FORM I-360 – RELIGIOUS WORKER
10-20-2008

LOCATION	CURRENT VERSION	NEW VERSION
Page 4 - Add	Part 8. Information about the spouse and children of the person this petition is for ...	Part 8. Complete Only if Filing a Special Immigrant Religious Worker Petition [See below table]
Page 4 - Renumber	Part 9. Signature ...	Part 9. Information About the Spouse and Children of the Person This Petition is for ...
Page 5 - Renumber	Part 10. Signature of person preparing form, if other than above ...	Part 10. Signature ...
Page 5 - Renumber		Part 11. Signature of person preparing form, if other than above ...

Part 8. Complete Only if Filing a Special Immigrant Religious Worker Petition

Employer Attestation

1. Provide the following information about the prospective employer.

a. Number of members <u>of the prospective employer's organization</u>	
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b. Number of employees working at the same location where the beneficiary will be employed	
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c. Number of aliens holding special immigrant or nonimmigrant religious worker status currently employed or employed within the past five years	
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d. Number of Special Immigrant Religious Worker I-360 and Nonimmigrant Religious Worker I-129 Petitions Submitted by the prospective employer within the past five years	
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2. Has the alien or any of the alien's dependent family members previously been admitted to the United States for a period of stay in the R classification for the last five years?

Yes No

If yes, complete the blanks below. List the alien and any dependent family member's prior periods of stay in the R classification in the United States for the last five years. Be sure to list only those periods in which the alien and/or family members were actually in the United States in the R classification.

NOTE: Submit photocopies of Forms I-94 (Arrival-Departure Record), I-797 (Notice of Action), and/or other USCIS documents identifying these periods of stay in the R classification. If more space is needed, provide the information on additional sheets of paper.

Alien or Dependent Family Member's Name	Period of Stay (<i>mm/dd/yyyy</i>)	
	From:	To:

3. Provide a summary of the type of responsibilities of those employees who work at the same location where the beneficiary will be employed. If additional space is needed, provide the information on additional sheets of paper.

Position	Summary of the Type of Responsibilities for That Position

4. Describe the relationship, if any, between the religious organization in the United States and the organization abroad of which the alien is a member.

5. Provide the following information about the prospective employment:

Title of position offered.

Detailed description of the alien's proposed daily duties.

Description of the alien's qualifications for the position offered.

Description of the proposed salaried and/or non-salaried compensation.

List of the specific address(es) or location(s) where the alien will be working.

Does the prospective employer attest to **all of** the requirements described in statements 6 through 12 below?

Yes No [If "no," attach explanation\(s\).](#)

6. The prospective employer is a bona fide non-profit organization or a bona fide organization that is affiliated with the religious denomination and is tax-exempt as described in section 501(c)(3) of the Internal Revenue Code of 1986, subsequent amendment, or equivalent sections of prior enactments of the Internal Revenue Code. If the prospective employer is affiliated with the religious denomination, complete the Religious Denomination Certification below.

Yes No [If "no," attach explanation\(s\).](#)

7. The prospective employer is willing and able to provide salaried and/or non-salaried compensation at a level that the alien and any dependents will not become a public charge.

Yes No [If "no," attach explanation\(s\).](#)

8. The funds to pay the prospective employee's compensation do not include any monies obtained from the alien, excluding reasonable donations or tithing to the religious organization.

Yes No [If "no," attach explanation\(s\).](#)

9. If the position is not a religious vocation, the prospective employee will not engage in secular employment, and the prospective employer will provide salaried and/or non-salaried compensation.

Yes No [If "no," attach explanation\(s\).](#)

10. The offered position is full time, requiring at least an average of 35 hours of work per week.

Yes No [If "no," attach explanation\(s\).](#)

11. The alien has been a religious worker for at least two years immediately before Form I-360 was filed and is otherwise qualified for the position offered.

Yes No [If "no," attach explanation\(s\).](#)

12. The alien has been a member of the prospective employer's denomination for at least two years immediately before Form I-360 was filed.

Yes No [If "no," attach explanation\(s\).](#)

I certify under penalty of perjury under the laws of the United States of America that the contents of this attestation and the evidence submitted are true and correct.

Signature

Date (mm/dd/yyyy)

Printed Name

Title

Employer/Organization Name

Employer/Organization Street Address (do not use a post office or private mail box)

Suite Number

City State Zip Code

Daytime Phone Number (with area code) Fax Number (if any) E-mail Address (if any)

Religious Denomination Certification

I certify under penalty of perjury under the laws of the United States of America that:

Name of Employing Organization

is affiliated with:

Name of Religious Denomination

and that the attesting organization within the religious denomination is tax-exempt as described in section [under 501\(c\)\(3\)](#) of the Internal Revenue Code of 1986, subsequent amendment, or equivalent sections of prior enactments of the Internal Revenue Code. The contents of this certification are true and correct to the best of my knowledge

Signature Date (mm/dd/yyyy)

Printed Name Title

Attesting Organization Name

Attesting Organization Street Address (do not use a post office or private mail box) Suite Number

City State Zip Code

Daytime Phone Number (with area code) Fax Number (if any) E-mail Address (if any)