Overview | I-539: | USCIS

| Skip to Main Conte • <u>My Forms</u> • <u>Logout</u> | <u>ent</u> | ? | | | | 2 |
|--|---------------|------|----------------|---------------|---------|--------------|
| | | | ? | | | |
| ? | Filing Status | Form | Form Checklist | Certify Forms | Payment | Confirmation |
| E-filing USC | CIS Form | | | | | |

Welcome to the U.S. Citizenship and Immigration Services' (USCIS) Electronic Filing (E-Filing) Introduction web page.

USCIS' E-Filing system allows you to complete and submit certain USCIS public use forms entirely online.

- In order to electronically file your application in the quickest and most effective manner, please ensure you have the following available:
- Adobe Acrobat Reader version 5.0
- Netscape 4.7 or higher, or Internet Explorer 5.0 or higher
- A printer to print your application and confirmation receipt page
- A copy of the form instructions for the form you intend to complete

Additionally, follow the steps below:

- You MUST complete all fields marked * in order to successfully submit your form and fee payment. If all of the fields marked * are not filled out, you will be prompted to do so before the submission process can be completed.
- You MUST use the "Back" and "Continue" buttons at the bottom of each page to navigate the application. DO NOT use the navigation buttons supplied by your browser.
- You MUST certify the validity of your application through a check box on the form.
- You MUST follow the "Next Step" instructions on the Confirmation Receipt notice that will be generated after you submit an e-filed application to ensure the proper processing of you application. Failure to follow these "Next Step" instructions could result application processing delays or even application denial.
- You MUST contact the USCIS National Customer Service Center, if instructed to do so on your Confirmation Receipt notice, at 1-800-375-5283 [TTY 1-800-767-1833] to schedule an appointment with your local Application Support Center using your Confirmation Receipt notice or your official Receipt Notice (I-797). The Application Support Center will collect a digital photograph, signature, and fingerprint from you at your appointment.

YOUR APPLICATION CANNOT BE PROCESSED UNTIL YOU HAVE:

- Appeared for your Appointment at the Application Support Center (if required).
- Submitted required supporting documentation (if any).

PLEASE ALSO NOTE:

• We strongly encourage you to SAVE your application electronically and to sign and keep a hardcopy of your application for your records.



Please read our <u>Secure Site Statement</u>. Please read our <u>Accessibility Statement</u>.

Filing Status | I-539 | USCIS

| Skip to Main Conte • <u>My Forms</u> • <u>Logout</u> | e <u>nt</u> | ? | | | | 2 |
|--|---------------|------|----------------|---------------|---------|--------------|
| | | | ? | | | |
| ? | Filing Status | Form | Form Checklist | Certify Forms | Payment | Confirmation |
| Filing Status | | | | | | |

In order to electronically process your application, you must provide information for the items

marked * below.

1. Attorney or non-attorney

Please indicate below if you are filing this form as a qualified attorney or otherwise: *

I am filing the form **for myself** or **to assist someone**. I am not a Qualified Attorney.

I am a Qualified Attorney or Organization Representative.

◄ Back Cancel Continue ►

Please read our <u>Secure Site Statement</u>. Please read our <u>Accessibility Statement</u>.

| U.S. Citizenship and Immigration Services | Securing America's Promise | 1 | 1 | |
|---|------------------------------|---------|--------------|--|
| My Forms Logout | | | | |
| I-539 Form: Application to Exten | d/Change Immigration Status | | | |
| Overview Filing Status Form | Form Checklist Certify Forms | Payment | Confirmation | |

Part 1. Information about you.

| In order to electronically process your application, you must provide information for the items | |
|---|--|
| marked * below. | |

| ιcu | DCIOW. | | |
|-----|---|--|-------------|
| | Family Name: * | | |
| | Given Name: * | | |
| | Middle Initial: | | |
| | <u>Address - In</u> <u>care of</u> : | | |
| | Street Number and Name: * | | |
| | <u>Apt.#</u> : | | |
| | City: * | | |
| | State: * | Select a State | |
| | Zip Code: * | | |
| | Daytime Phone Number: | H | |
| | Country of Birth: | Select a Country | |
| | Country of Citizenship: * | Select a Country | |
| | Date of Birth: * | // | |
| | Social Security | MM DD YYYY | |
| | # (if any): | | |
| | <u>A #</u> : | | |
| | Date of Last Arrival Into the U.S.: | MM DD YYYY | |
| | <u>I-94#</u> : | | |
| | Current nonimmigrant Status: * | Select a Status | |
| | Expires on: | | |
| | | MM DD YYYY | |
| | | | Back to top |
| | | ◄ Back Cancel Continue ► | |
| | | Please read our <u>Secure Site Statement</u> . Please read our <u>Accessibility Statement</u> . | |
| | | | |



Part 2. Application type.

In order to electronically process your application, you must provide information for the items marked * below.

- 1. I am applying for: * (Check one)
 - a. An <u>extension of stay</u> in my current status.
 - o b. A change of status
 - c. Other: (Describe grounds of eligibility.)

Part 2 continued on next page



Please read our <u>Secure Site Statement</u>. Please read our <u>Accessibility Statement</u>.



Part 2. Application type.

In order to electronically process your application, you must provide information for the items marked * below.

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

 b. Members of my family are filing this application with me. The total number of people (including me) in the application is: (Complete the supplement for each co-applicant)

| A Back Cancel Continue > | Back | Cancel | Continue Continue |
|--------------------------|--------------------------|--------|-------------------|
|--------------------------|--------------------------|--------|-------------------|

Please read our <u>Secure Site Statement</u>. Please read our <u>Accessibility Statement</u>.

| U.S. Citizenship and Immigration Services | Securing America's Promise | |
|---|--|-------------|
| My Forms Logout | | |
| I-539 Form: Application | on to Extend/Change Immigration Status | |
| Overview Filing Status | Form Form Checklist Certify Forms Payment Confirmation | |
| Part 3. Processing Inform | nation. | |
| / | uest that my/our current or requested status be extended until: | |
| | oplication based on an extension or change of status already to your spouse, child, or parent? | |
| No | ○Yes, Receipt # | |
| | oplication based on a separate petition or application to give your child or parent an extension or change of status? | |
| No | | |
| | filed with this I-539 Receipt Number: | |
| Yes, f | filed previously and pending with USCIS. | |
| 4. If you ans applicant: | swered "Yes" to question 3, give the name of the <u>petitioner</u> or t: | |
| If the petition | on or application is pending with USCIS, also give the following information: | |
| Office Filed | at: Select a USCIS Location | |
| Filed on: | | |
| | ▲ Back Cancel Continue ► | Back to top |
| | Please read our <u>Secure Site Statement</u> . Please read our <u>Accessibility Statement</u> . | |
| For assistance | nce or questions regarding this form, please call our National Customer Service Center at 1-800-375-5283 [TDD 1-800-767-1833]. | |

| Wy Forms Logout | America's Promise | | |
|---|--|-----|--------------|
| I-539 Form: Application to Extend/C | hange Immigration Sta | tus | |
| | Form Checklist Certify Fo | | Confirmation |
| Part 4. Additional Information. | | | |
| | | | |
| For applicant #1, provide <u>passport</u> inform Country of Issuance: | | | |
| Valid to: | Select a Country | | |
| valid to. | MM DD YYYY | | |
| 2. Foreign Address: | | | |
| Street Number and Name: | | | |
| Apt.#: | | | |
| City or Town: | | | |
| Select a state (U.S. address only) or province (Outside U.S.): | | | |
| State: | Select a State | | |
| Province: | | | |
| Country: | Select a Country | | |
| Zip/Postal Code: | | | |
| | | | |
| Part 4 co | ontinued on next page | | |
| Back | Cancel Continue ► | | |
| | d our <u>Secure Site Statement</u> . d our <u>Accessibility Statement</u> . | | |

| | izenship migration Securing | America's Promise | X | 1 | / |
|----------------------------|---|---------------------------|----------------|------------------|---|
| / Forms Logout | | e star - chair - chairean | | | |
| | Application to Extend/Change Im | | | 1 2-5-1 | |
| Overview Part 4. Additi | Filing Status Form Form Checkli onal Information. | st Certify Forn | ns Payme | nt Confirma | |
| | Answer the following questions. If you sheet of paper. | answer "Yes" to an | y question, ex | plain on separat | e |
| | a. Are you, or any other person included an applicant for an immigrant visa? | on the application, | No | ⊖ Yes | |
| | b. Has an immigrant petition ever been fil any other person included in this applic | | No | O Yes | |
| | c. Has a Form I-485, Application to Regis Residence or Adjust Status, ever been any other person included in this applic | filed by you or by | No | Yes | |
| | Have you, or any other person included application, ever been arrested or conv criminal offense since last entering the | victed of any | No | O Yes | |
| | e. Have you, or any other person included application, done anything that violated nonimmigrant status you now hold? | | No | ⊖ Yes | |
| | f. Are you, or any other person included in now in <u>removal proceedings</u> ? | n this application, | No | Yes | |
| | If you answered "Yes" to Question 3f, pro proceedings and information on jurisdiction proceedings, in the space below: | | | | |
| | g. Have you, or any other person included application, been employed in the U.S. admitted or granted an extension or ch | since last | No | _ Yes | |

If you answered "No" to Question 3g, fully describe how you are supporting yourself, include the source, amount and basis for any income, in the space below:

If you answered "Yes" to Question 3g, fully describe the employment, include the name of the person employed, name and address of the employer, weekly income and whether the employment was specifically authorized by USCIS, in the space below:

Back to top



Please read our <u>Secure Site Statement</u>. Please read our <u>Accessibility Statement</u>.



End of Primary I-539 Form

You have reached the end of the I-539 form.

To continue with the application process, select **Continue** which takes you to the next step of the process.

If you would like to review information entered in this form, select **Back** to navigate through the form.

To cancel and exit this e-filing process, select Cancel.



Please read our <u>Secure Site Statement</u>. Please read our <u>Accessibility Statement</u>.

| U.S. Citizenship and Immigration Services Securing America's | Promise | 2 | |
|--|-----------------------------------|----------------------|--------------|
| Forms Logout | | | |
| I-539 Form: Application to Extend/Change Immigratio | n Status | | |
| Overview Filing Status Form <u>Form Checklist</u> Ce | atify Forms | Payment | Confirmation |
| Certify | | | |
| Please review the information below. If you wish to edit any form inf Checklist link or the Back button. If the information is correct, yo certified and selected the "I agree" button, you cannot edit the | u must certify | | |
| In order to electronically process your application, you must provide *. | e information f | or the items n | narked |
| Your Certification Read the information on penalties in the instructions before complet helped you prepare this petition, he or she must complete Part 9. | ting this sectio | n. If someone | 9 |
| Certification: * | | | |
| that this petition and the evidence submitted with it are a authorize the U.S. Citizenship and Immigration Services government agencies any information from my USCIS (o the USCIS determines that such action is necessary to o the benefit sought. | to release to o or former INS) | other records, if | |
| Print Name: | | | |
| Title: | | | |
| Date (mm/dd/yyyy): | 06/08/2012 | 2 | |
| Daytime Phone Number (Area/Country Code): | - | - | |
| E-Mail Address: | | |] |
| Please note: If you do not fully complete this form or fail to submit to the instructions, a final decision on your petition may be delayed | | | |
| I declare that I prepared this petition at the request of the based on all information of which I have knowledge. | e above perso | n and it is | |
| Attorney or Representative: In the event of a Request for Evidence (RFE) may the USCIS contact you by Fax or E-mail? | ○ Yes | No | |
| Print Name: | | | |
| Date (mm/dd/yyyy): | 06/08/2012 | 2 | |
| Firm Name: | | | |
| Firm Address: | | | |
| Daytime Phone Number (Area/Country Code): | - | - | |
| Fax Number (Area/Country Code): | H | - | I |
| E-mail Address: | 11 | | |
| By selecting I Agree , your application and payment (if a Please select I Agree only once. | oplicable) will b | be sent to the | USCIS. |

I intend to mail supporting documentation for this application.





Please read our <u>Secure Site Statement</u>. Please read our <u>Accessibility Statement</u>.

