

TABLE OF CHANGES – INSTRUCTIONS
FORM I-914 Supplement B
Declaration of Law Enforcement Officer for Victim of Trafficking in Persons
OMB Number: 1615-0099
Submission Date 06/18/2013

Reason for Revision: Statutory and regulatory changes have necessitated revisions.

Current Section and Page Number	Current Text	Proposed Text
Page 1, 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.	Federal, State, and local law enforcement officials should use Form I-914, Supplement B, Declaration of Law Enforcement Officer for Victim of Trafficking in Persons , to provide evidence to United States Citizenship and Immigration Services (USCIS) that you believe an individual (the applicant) submitting Form I-914, Application for T Nonimmigrant Status, is a victim of a severe form of trafficking in persons and has cooperated with your reasonable requests for assistance in an investigation or prosecution of a crime where trafficking is at least one central reason for the commission of that crime. USCIS (not the Federal, State, or local law enforcement official) will make the decision if the applicant meets the eligibility requirements for T nonimmigrant status. By signing the Form I-914, Supplement B, you are not conferring an immigration benefit. USCIS is the only agency that can approve the applicant's Form I-914. USCIS requires fingerprints and police clearances from the victim and conducts background and security checks. The applicant must submit other evidence in addition to the Form I-914, Supplement B. The certifying Federal, State, or local law enforcement agency will not be subject to any liability.
Page 1, 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.	If you , the certifying Federal, State, or local law enforcement official, believe that this individual is or has been a victim of a severe form of trafficking in persons and has cooperated with your reasonable requests for assistance in your investigation or prosecution, you may complete this supplement form. You should complete all fields of this form yourself. The Supplement B must be signed with an original signature. A photocopy of a signed application or a typewritten name in place

	<p>You must complete the form based upon your knowledge of the case, including evidence developed by other law enforcement officers investigating the case.</p> <p>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.</p>	<p>of a signature is not acceptable. The applicant will then submit Form I-914, Supplement B to USCIS with his or her application for T nonimmigrant status.</p> <p>You must complete the form based upon your knowledge of the case, including evidence developed by other law enforcement officers involved with the case.</p> <p>You do not need to formally launch an investigation or file charges to complete the Form I-914, Supplement B. You may complete the Form I-914, Supplement B if an investigation does not lead to an arrest or a prosecution. Completing the Form I-914, Supplement B is not contingent on the outcome of a prosecution or investigation. Completing the Form I-914, Supplement B is at your discretion. There is no statute of limitations related to completing the Form I-914, Supplement B.</p> <p>Your agency may have its own procedures related to completing the Form I-914, Supplement B.</p> <p>To be eligible for T nonimmigrant status, the applicant must demonstrate to USCIS that he or she:</p> <ol style="list-style-type: none"> 1. Is or was a victim of a severe form of trafficking in persons (see Form, Part C, Statement of Claim, for a definition); 2. Is present in the United States as a result of being a victim of a severe form of trafficking in persons (including physical presence based on having been allowed entry into the United States to participate in investigative or judicial processes associated with an act or perpetrator of trafficking); 3. 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; unless <ol style="list-style-type: none"> a. the applicant is under the age of 18; or b. he or she is unable to cooperate due to physical or psychological trauma; and 4. Would suffer extreme hardship involving unusual and severe harm upon removal from the United States.
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		These qualifying elements may be established without submitting Form I-914, Supplement B, but submission of the Supplement B is one piece of evidence. USCIS (not the certifying Federal, State or, local law enforcement official) makes the determination on whether the evidence is sufficient and whether the applicant meets each eligibility requirement.
Page 1, Instructions	Instructions	General Instructions
Page 1, Part A. Victim Information	<ol style="list-style-type: none"> 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. 	<ol style="list-style-type: none"> 1. Full Name – Give victim’s legal name, as shown on his or her birth certificate or legal name change document. [Combined above] 2. Other Names Used... 3. Date of Birth... 4. Gender... 5. A-Number.... 6. Social Security....
Page 1, Part B. Agency Information	<ol style="list-style-type: none"> 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... 3. Agency Address. Give the agency’s mailing address. 	<ol style="list-style-type: none"> 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... 3. Agency Address. Give the agency’s mailing address. 4. Daytime Phone Number and Fax Number. Give your phone number and fax number with area code.

	<p>4. Agency Type. Mark the appropriate box.</p> <p>5. Case Information. Provide the case status information and case identification number, if applicable.</p>	<p>5. Agency Type. Mark the appropriate box.</p> <p>6. Case Information. Provide the case status information and case identification number, if applicable.</p>
<p>Page 2, Part C. Statement of the Claim</p>	<p>Part C. Statement of the Claim</p> <p>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.</p> <ol style="list-style-type: none"> 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. Recruiting, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud, or coercion for 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. <p>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. Explain if the individual has expressed any fear of retaliation or revenge if removed from the United States. Attach additional sheets if necessary.</p> <p>Indicate the dates on 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.</p>	<p>Part C. Statement of Claim</p> <p>1. 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.</p> <ol style="list-style-type: none"> A. Sex trafficking in which a commercial sex act was induced by force, fraud, or coercion. B. Sex trafficking and the victim is under the age of 18. C. Recruiting, harboring, transporting, providing, or obtaining of a person for labor or services through the use of force, fraud, or coercion for subjection to involuntary servitude, peonage, debt bondage, or slavery. D. Not applicable. You do not believe this individual is a victim of trafficking. E. Other. Attach additional sheets to explain. <p>2. Describe the victimization on which the applicant's claim is based and identify 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. Attach additional sheets if necessary.</p> <p>3. Explain if the individual has expressed any fear of retaliation or revenge if they are removed from the United States.</p> <p>4. Provide the dates on which the acts of trafficking occurred.</p> <p>5. List the statutory citations that are or were being investigated or prosecuted.</p> <p>6. Provide the date on which the investigation or prosecution was initiated.</p> <p>7. Provide the date on which the investigation or prosecution was completed, if any.</p>
<p>Page 2, Part D. Cooperation of the</p>	<p>Part D. Cooperation of the Victim</p>	<p>Part D. Cooperation of Victim</p>

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.	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 he or she is under the age of 18 or he or she is unable to cooperate with the request due to physical or psychological trauma).
Page 2, Part F. Attestation	<p>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:</p> <p style="text-align: center;">USCIS Vermont Service Center 75 Lower Welden Street St. Albans, VT 05479-0001</p> <p>Include the victim’s name, date of birth, and A-Number (if available) on all correspondence.</p>	<p>The law enforcement officer filling out this form (identified in Part B of the form), and their supervisor, must sign and date the form in this section.</p> <p>The Form I-914, Supplement B must have an original signature. A photocopy of a signed certification or a type written name in place of a signature is not acceptable.</p>
New		<p>How Can I Provide Further Information at a Later Date? [New Section]</p> <p>An agency can provide further information to USCIS or formally revoke the Form I-914, Supplement B at a later date, even after this form is submitted to USCIS, if there is new information or if the victim is no longer cooperating with a reasonable request for assistance in an investigation or prosecution. You should notify USCIS by sending a written statement to:</p> <p style="text-align: center;">USCIS Vermont Service Center 75 Lower Welden Street St. Albans, VT 05479-0001</p> <p>An agency should send a letter on official agency letterhead to USCIS at the address above describing the reasons for providing further information or the reasons for revoking the certification. Include the victim’s name, date of birth, and A-Number (if available) on all correspondence. USCIS will allow the victim to rebut this information.</p>
Page 2, Privacy Act Notice	<p>Privacy Act Notice</p> <p>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</p>	<p>USCIS Privacy Act Statement</p> <p>Authorities: The information requested on this form, and associated evidence, is collected under the Immigration and Nationality Act, section 101, et seq.</p>

	<p>information can be found in the Immigration and Nationality Act, as amended. We may provide this information to other government agencies.</p>	<p>PURPOSE: The primary purpose for providing the requested information is to provide the applicant (the victim) with evidence for the immigration benefit for which he or she is filing.</p> <p>DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of the applicant's form.</p> <p>ROUTINE USES: The information you provide on this form may be shared with other Federal, State, local, and foreign government agencies and authorized organizations following approved routine uses described in the associated published system of records notices [DHS-USCIS-007 - Benefits Information System and DHS-USCIS-001 - Alien File, Index, and National File Tracking System of Records, which can be found at www.dhs.gov/privacy]. The information may also be made available, as appropriate, for law enforcement purposes or in the interest of national security.</p>
<p>Page 2, Paperwork Reduction Act</p>	<p>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 Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue, N.W., Washington, DC 20529-2210. OMB No. 1615-0099. Do not mail your application to this address.</p>	<p>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 law enforcement agencies for this collection of information is estimated at 3 hours and 30 minutes per response, including the time for reviewing instructions and completing and submitting the form. The public burden for the Form I-914 respondents who will take the action of contacting a law enforcement agency to request that Form I-914, Supplement B be completed is estimated to require 15 minutes to make such a request to the agency. 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 Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue NW, Washington, DC 20529-2140. OMB No. 1615-0099. Do not mail your completed Form I-914, Supplement B to this address.</p>