**TABLE OF CHANGES – FORM**

**I-821, Application for Temporary Protected Status**

**OMB Number: 1615-0043**

**06/16/2017**

|  |
| --- |
| **Reason for Revision:** 83C |

|  |  |  |
| --- | --- | --- |
| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1,****Part 1. Type of Application (select one)** | **NOTE:** Select the box for **Item Number 1.a., 1.b., or 2. If applicable, select the box for Item Number 3.a.** or **3.b.** …**3.b.** No, I am not currently requesting an EAD. | [Page 1]**Part 1. Type of Application (select one)****NOTE:** Select the box for **Item Number 1.a., 1.b., or 2. If applicable, select the box for Item Number 3.a.** or **3.b.** For **Item Number 4**., enter the name of the designated TPS country.…**3.b.** No, I am not currently requesting an EAD.**4.** Name of designated TPS country under which you are applying. |
| **Page 2,****Part 2. Information About You,*****Other Dates of Birth Used*** *(if any)* | …**15.** Countries of Residence (Before entering the U.S.) **16.** Country or Countries of Citizenship or Nationality (if any) (List all countries that apply.)… | [Page 2]**Part 2. Information About You,*****Other Dates of Birth Used*** *(if any)*…Countries of Residence (Before entering the U.S.)**15.a.****15.b.****15.c.****15.d.** Country or Countries of Citizenship or Nationality (if any) (List all countries that apply.)**16.a.****16.b.****16.c.****16.d.**… |