
Heading	Sub-Heading
H-1B Registration	

Before you start your registration

Eligibility

Duplicates

After you submit your registration

Track the registration status online

Completing your registration online

We will automatically save your responses

How to continue filling out your registration

**DHS Privacy Notice
[language updated
2/13/2019]**

Security reminder



Body Text

U.S. employers or agents who seek to obtain H-1B nonimmigrant classification on behalf of an individual subject to the H-1B numerical allocations will need to submit a registration during a designated registration period, unless the registration requirement is suspended by USCIS.

The annual initial registration period will last a minimum of 14 calendar days and will start at least 14 calendar days before the earliest date on which H-1B cap-subject petitions may be filed for a particular fiscal year.

If a sufficient number of registrations projected as needed to reach the H-1B regular cap have not been received within the 14 days initial registration period, we will notify all petitioners who have properly registered that their registrations have been selected. We will keep the registration open past the initial registration period until we have determined that we have received enough registrations projected as needed to meet the H-1B regular cap.

After the end of the initial registration period, if USCIS has received more registrations than needed to meet the projected number of registrations to reach the regular cap, we will randomly select a sufficient number of registrations. A similar process will apply for those who may be eligible for the numerically limited cap exemption. A Form I-129, Petition for a Nonimmigrant Worker, may then be filed by the employer based on a selected registration to request classification of the beneficiary as an H-1B worker.

General: A U.S. employer or agent may file H-1B cap petitions, and as such, will be required to submit an H-1B Registration to be eligible to file the H-1B cap petition, unless the registration requirement is suspended.

U.S. Employers: Person or entity in U.S. that: 1. engages a person to work in the U.S.; 2. has an employer-employee relationship with the beneficiary; and 3. has an FEIN.

Agents: A U.S. individual or company in business as an agent may file an H1-B Registration for workers who are traditionally self-employed or workers who use agents to arrange short-term employment on their behalf with numerous employers, and in cases where a foreign employer authorizes the agent to act on its behalf.

A petitioner may only submit one registration per beneficiary in any fiscal year. If a petitioner submits more than one registration per beneficiary in the same fiscal year, all registrations filed by that petitioner relating to that beneficiary for that fiscal year will be considered invalid.

After you submit your registration, you can track its status through your USCIS account. Sign in to your account to check the status of a submitted registration and read any important messages from USCIS.

We will automatically save your information when you select "Next" to go to a new page or navigate to another section of the form.

After you start an H-1B Registration, you can sign in to your account to continue where you left off.

AUTHORITIES: The information requested on this form is collected under the Immigration and Nationality Act sections 101(a)(15)(H)(i)(b) and 214(a), (c)(1), (g); 8 U.S. Code 1101(a)(15)(H)(i)(b) and 1184(a), (c)(1), and (g); and the regulatory authority under 8 Code of Federal Regulations 214.2(h).

PURPOSE: The primary purpose for providing the requested information on this form is to register prospective beneficiaries for the annual H-1B cap selection process. DHS uses the provided information to select a projected number of registrations needed to generate a sufficient number of H-1B cap petitions to reach the annual H-1B numerical limitations, including the advanced degree exemption, and associate selected registrations with subsequently filed H-1B cap petitions. Unless the registration requirement is suspended, a petitioner must have a selected registration to be eligible to file an H-1B cap petition for the named beneficiary.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may preclude you from filing an H-1B cap petition on the named beneficiary's behalf.

ROUTINE USES: DHS may share the information you provide on this form and any additional requested evidence with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-007 Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-034(a) H-1B Registration Final Rule] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act Burden Disclosure Notice

An agency may not conduct or sponsor 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, gathering the required information, completing the application, preparing statements, and submitting the application electronically. 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 Ave NW
Washington, DC 20529-2140

OMB Number: 1615-0144

Expires: 1/31/2022

If you still have a draft H-1B Registration in progress when the registration time period closes, we will delete your data in order to prevent storing personal information indefinitely.



H-1B Registration

Step	Section	Question
Petitioner Information	Company Information	What is your business or organization name?
		What is your Doing Business As name? (if any)
		What is your business or organization employer identification number (EIN)?
		What is your primary U.S. office address?
		What is your current legal name?
		What is your position at the company or organization?
		What is your contact information?
		What is the beneficiary's current legal name?
Beneficiary Information	Beneficiary Information	What is the beneficiary's gender?
		What is the beneficiary's date of birth?
		What is the beneficiary's country of birth?
		What is the beneficiary's country of citizenship?
		What is the beneficiary's passport number?

(If initial registration period)
Are you registering for H-1B
employment with a start date for the
first day of the fiscal year?

(If registration period remains open)
If you are not filing in the initial
registration period, are you registering
for H-1B employment not more than six
month before the requested start date?

Does the beneficiary have a master's or
higher degree from a U.S. institution of
higher education such that the
beneficiary is eligible for the advanced
degree exemption under INA 214(g)(5)
(C)?

Review and Submit

Review your application

Check your registration before you
submit

Alerts and warnings

Your registration summary

Your signature

Petitioner statement

I can read and understand English,
and have read and understand every
question and instruction on this
registration, as well as my answer to
every question.

Petitioner's certification and
signature

I authorize release of information contained in this registration to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

By my signature, I further certify that the contents of this registration are true and accurate and that I, or the entity on whose behalf this registration is being submitted, intend to file an H-1B petition on behalf of the beneficiary named in this registration if the registration is selected.

I have read and agree to the
petitioner's statement

Employer's or Employer's Agent
certification and signature

Employer/Agent Certification:
If submitting or authorizing this
registration on behalf of an
organization, by my signature, I
certify that I am authorized to do so
by the organization.

I authorize release of information
contained in this registration to
other entities and persons where
necessary for the administration and
enforcement of U.S. immigration
laws.

I further certify, under penalty of
perjury, that I have reviewed this
registration and that all of the
information contained in the
registration is complete, true and
correct and that I, or the
organization on whose behalf this
registration is being submitted,
intend to file an H-1B petition on
behalf of the beneficiary named in
this registration if the registration is
selected.

I have read and agree to the
employer's statement

Attorney's or Accredited
Representative's Certification and
signature

Attorney certification:
I certify, under penalty of perjury,
that I prepared this registration on
behalf of, at the request of, and with
the express consent of the
registrant. The registrant has
reviewed this completed registration
as prepared by me and informed me
that all of the information in the
registration is complete, true and
correct.

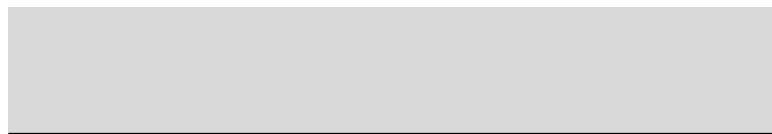
I have read and agree to the
representative statement

Your signature

[Date of signature]

Submit

Submit your registration



Sub-Question	Field Type
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	Text
	Text
	Text
Country	Text
Address line 1	Text
Address line 2	Text
City or town	Text
State	Dropdown
ZIP code/Postal code	Text
Given name (first name)	Text
Middle name (if applicable)	Text
Family name (last name)	Text
	text
Daytime phone number	Text
Email address	Text
Given name (first name)	Text

Middle name (if applicable)	Text
Family name (last name)	Text
Male/Female	Radio
Month/Day/Year	Date

Country	Dropdown
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Country	Dropdown
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Text

Radio

Yes/No

Radio

Yes/No

Radio

Yes/No

Checkbox

Checkbox

Checkbox

Checkbox



Instructional Text

You may only submit one registration per beneficiary in any fiscal year. If you submit more than one registration per beneficiary in the same fiscal year, all registrations filed by that petitioner relating to that beneficiary for that fiscal year will be considered invalid.

We will review your registration to check for completeness before you submit it.

You can return to this page to review your registration as many times as you want before you submit it.

You have one or more alerts based on the information you provided in your registration.

A red alert means you have incomplete or invalid responses to certain questions. You cannot submit your registration with any alerts.

Here is a summary of all the information you provided in your registration.

Make sure you have provided responses for everything that applies to you before you submit your registration. You can edit your responses by going to each registration section using the site navigation.

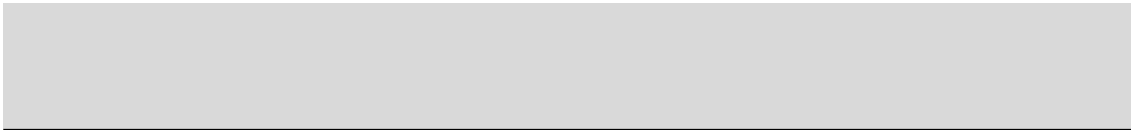
You must read and agree to the statement below.

You must read and agree to the certification below.



You must provide your electronic signature below by typing your full legal name. We may consider your registration to be invalid if you do not completely fill out and electronically sign this registration. We will record the date of your signature with your registration.

Once you submit the registration, it may not be edited. If you made an error you may, however, delete the registration and resubmit it prior to the close of the registration period.



Help Text	Primary CTA	Secondary CTA
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Street number and name
Apartment, suite, unit, or floor



Review my application

Next

Submit
