**TABLE OF CHANGES – FORM**

**Form I-824, Application for Action on an Approval Application or Petition**

**OMB Number: 1615-0044**

**06/09/2020**

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| **Reason for Revision: Fee Rule**  **Project Phase: Post G-1056**   * Please note – all instances of “if any” and “if applicable” have been removed from Form I-824.   Legend for Proposed Text:   * Black font = Current text * Red font = Changes   Expires 11/30/2021  Edition Date 11/08/2019 |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1** | **[Page 1]**  **To be completed by an attorney or BIA-accredited**  **representative** (if any)**.**  **Select this box if Form G-28 or G-28I is attached.**  **Attorney State Bar Number** (if applicable)  **Attorney or Accredited Representative**  **USCIS Online Account Number (if any)** | **[Page 1]**  **To be completed by an attorney or BIA-accredited**  **representative.**  **Select this box if Form G-28 or G-28I is attached.**  **Attorney State Bar Number**  **Attorney or Accredited Representative**  **USCIS Online Account Number** |
| **Page 1-2,**  **Part 1. Information About You** (Person filing this Application) | **[Page 1]**  **…**  **3.** Company or Organization Name (if any)  **…**  **5.** Certificate of Naturalization or Citizenship Number (if any)  **6.** Alien Registration Number (A-Number) (if any)  **…**  **10.** IRS Tax Number (if any)  **11.** U.S. Social Security Number (if any)  **12.** USCIS Online Account Number (if any)  **…** | **[Page 1]**  **…**  **3.** Company or Organization Name  **…**  **5.** Certificate of Naturalization or Citizenship Number  **6.** Alien Registration Number (A-Number)  **…**  **10.** IRS Tax Number  **11.** U.S. Social Security Number  **12.** USCIS Online Account Number  **…** |
| **Page 2-4,**  **Other Information** | **[Page 2]**  **…**  **2.f.** Alien Registration Number (A-Number) (if any)    **…**  **10.** Dependent's Email Address (if any)  **…**  **17.** Dependent's Email Address (if any)  **…**  **24.** Dependent's Email Address (if any)  **…**  **[Page 4]**  **31.** Dependent's Email Address (if any)  **…** | **[Page 2]**  **…**  **2.f.** Alien Registration Number (A-Number)    **…**  **10.** Dependent's Email Address  **…**  **17.** Dependent's Email Address  **…**  **24.** Dependent's Email Address  **…**  **[Page 4]**  **31.** Dependent's Email Address  **…** |
| **Page 7,**  **Part 7. Additional Information** | **[Page 7]**  **…**  If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number, Part Number,** and **Item Number** to which your answer refers; and sign and date each sheet.  **…**  **2.** A-Number (if any)  **…** | **[Page 7]**  **…**  If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number at the top of each sheet; indicate the **Page Number, Part Number,** and **Item Number** to which your answer refers; and sign and date each sheet.  **…**  **2.** A-Number  **…** |