TABLE OF CHANGES – INSTRUCTIONS

Form I-918, Instructions for Petition for U Nonimmigrant Status and Supplement A, Petition for Qualifying Family Member of U-1 Recipient OMB Number: 1615-0104 05/19/2020

Reason for Revision: Biometrics Rule

Project Phase: NPRM

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 04/30/2021 Edition Date 04/24/2019

Current Page Number	Current Text	Proposed Text
and Section	Current rext	Troposcu Text
Pages 1-2,	[page 1]	[page 1]
Who May File Form I-		
918 and Supplement A?	•••	•••
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	(ab) Trumming	(as) Trainching
Pages 2-3,	[page 3]	[page 3]
General Instructions		
	•••	
	Biometric Services Appointment. USCIS may require that you appear for an interview or provide fingerprints, photograph, and/or signature at any time to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), before making a decision on your application, petition, or request. After USCIS receives your petition and ensures it is complete, we will inform you in writing if you need to attend a biometric services appointment. If an appointment is necessary, the notice will provide you the location of your local or designated USCIS Application Support Center (ASC) and the date and time of your appointment or, if you are currently overseas, instruct you to contact a U.S. Embassy, U.S. Consulate, or USCIS office outside the United States to set up an appointment.	Biometric Services Appointment. Every individual who is an applicant, petitioner, derivative, beneficiary, or sponsor of an immigration benefit request or other request submitted to USCIS is required to submit biometrics unless USCIS waives or exempts the requirement. You will be notified of the time and place of your appointment if you must appear and you will be provided requirements for rescheduling if necessary. If you fail to submit any biometrics as required, USCIS may deny your application, petition, or request. DHS may store the biometrics submitted by an individual and use or reuse biometrics to conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), verify identity, produce documents, determine eligibility

for immigration and naturalization benefits, or to perform any other functions necessary for administering and enforcing immigration and naturalization laws, and any other law within DHS authority. **2.** If you need extra space to complete any item within Form I-918, use the space **2.** If you need extra space to complete any provided in Part 8. Additional item within Form I-918, use the space **Information** or attach a separate sheet of provided in **Part 9. Additional** paper; type or print your name and Alien **Information** or attach a separate sheet of Registration Number (A-Number) (if any) paper; type or print your name and Alien at the top of each sheet; indicate the Page Registration Number (A-Number) (if any) Number, Part Number, and Item at the top of each sheet; indicate the **Page** Number to which your answer refers; and Number, Part Number, and Item sign and date each sheet. **Number** to which your answer refers; and sign and date each sheet. **3.** If you need extra space to complete any item within Supplement A, use the space **3.** If you need extra space to complete any provided in Part 8. Additional item within Supplement A, use the space **Information** or attach a separate sheet of provided in Part 9. Additional paper; type or print your name (Principal's) **Information** or attach a separate sheet of and A-Number (if any) or the paper; type or print your name (Principal's) A-Number of the Qualifying Family and A-Number (if any) or the Member at the top of each sheet; indicate A-Number of the Qualifying Family the Page Number, Part Number, and Member at the top of each sheet; indicate **Item Number** to which your answer refers: the Page Number, Part Number, and and sign and date each sheet. **Item Number** to which your answer refers; and sign and date each sheet. [page 4] [page 4] **Pages 4-6, Specific Instructions for Form I-918** ... This petition is divided into **Parts 1. - 8.** This petition is divided into **Parts 1. - 9.** The following information should help you The following information should help you fill out the petition. fill out the petition. [page 5] [page 5] **Item Numbers 1. - 7.a.** You must answer **Item Numbers 1. - 7.a.** You must answer each question. If you answer "Yes" to any each question. If you answer "Yes" to any of the questions, you must provide an of the questions, you must provide an explanation in the space provided in Part 8. explanation in the space provided in **Part 9**. Additional Information. Additional Information.

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Item Numbers 7.b. - 7.f. If you answer

"Yes," to **Item Number 7.a.**, select the

type of proceedings. If you were in

Item Numbers 7.b. - 7.f. If you answer

"Yes," to **Item Number 7.a.**, select the

type of proceedings. If you were in

proceedings in the past and are no longer in proceedings, provide the date of action. If you are currently in proceedings, type or print "Current" in the appropriate date field. Select all applicable boxes. Use the space provided in **Part 8. Additional Information** to provide an explanation.

[new]

proceedings in the past and are no longer in proceedings, provide the date of action. If you are currently in proceedings, type or print "Current" in the appropriate date field. Select all applicable boxes. Use the space provided in **Part 9. Additional Information** to provide an explanation.

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Part 3. Biographic Information

Provide the biographic information requested in **Part 3.**, **Item Numbers 1. - 6.** Providing this information as part of your application may reduce the time you spend at your USCIS ASC appointment as described in the **Biometric Services Appointment** section of these Instructions.

Item Numbers 1. -2. Ethnicity and Race. Select the boxes that describe your ethnicity and race.

Categories and Definitions for Ethnicity and Race

- **1. Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. (**NOTE:** This category is only included under Ethnicity in **Part 3.**, **Item Number 1.**)
- **2. White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **3. Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **4. Black or African American.** A person having origins in any of the black racial groups of Africa.
- **5. American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community

attachment. 6. Native Hawaiian or Other Pacific **Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. Item Number 3. Height. Select the values that best match your height in feet and inches. For example, if you are five feet and nine inches, select "5" for feet and "09" for inches. Do not enter your height in meters or centimeters. Item Number 4. Weight. Enter your weight in pounds. If you do not know your weight, or need to enter a weight under 30 pounds or over 699 pounds, enter "000." Do not enter your weight in kilograms. **Item Number 5. Eye Color.** Select the box that best describes the color of your eyes. **Item Number 6. Hair Color.** Select the box that best describes the color of your **Part 4. Processing Information Item Numbers 1.a. - 29.c.** You must **Part 3. Processing Information** answer each question. If you answer "Yes" to any of the questions, you must provide Item Numbers 1.a. - 29.c. You must an explanation in the space provided in answer each question. If you answer "Yes" Part 9. Additional Information. to any of the questions, you must provide an explanation in the space provided in Part 5. Information About Your Spouse Part 8. Additional Information. and/or Children Part 4. Information About Your Spouse and/or Children [page 6] Part 6. Petitioner's Statement, Contact [page 6] Information, Declaration, and Signature Part 5. Petitioner's Statement, Contact Information, Declaration, and Signature Part 7. Interpreter's Contact Information, Certification, and Signature Part 6. Interpreter's Contact Information, Certification, and **Signature** Part 8. Contact Information,

Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner

Item Numbers 1.a. - 8.b. This section must contain the signature of the person who completed your petition, if other than you, the petitioner. If the same individual acted as your interpreter and your preparer, that person should complete both **Part 6.** and **Part 7.** If the person who completed this petition is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this petition MUST sign and date the petition. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your petition is an attorney or accredited representative whose representation extends beyond preparation of this petition, he or she may be obliged to also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your petition.

Part 8. Additional Information

Item Number 1.a. - 7.d. If you need extra space to provide any additional information within this petition, use the space provided in **Part 8. Additional Information**. If you need more space than what is provided in **Part 8.**, you may make copies of **Part 8.** to complete and file with your petition or attach a separate sheet of paper. Include 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.

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Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner

Item Numbers 1.a. - 8.b. This section must contain the signature of the person who completed your petition, if other than you, the petitioner. If the same individual acted as your interpreter and your preparer, that person should complete both **Part 7.** and **Part 8.** If the person who completed this petition is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this petition **MUST** sign and date the petition. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your petition is an attorney or accredited representative whose representation extends beyond preparation of this petition, he or she may be obliged to also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your petition.

Part 9. Additional Information

Item Number 1.a. - 7.d. If you need extra space to provide any additional information within this petition, use the space provided in Part 9. Additional Information. If you need more space than what is provided in Part 9., you may make copies of Part 9. to complete and file with your petition or attach a separate sheet of paper. Include 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.

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Pages 7-10, Specific Instructions for Supplement A, Petition for Qualifying Family Member of U-1 Recipient [page 7]

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Item Numbers 2.a. - 2.c. Other Names Used. Provide all the names he or she has used, including his or her maiden name, nicknames, and aliases, if applicable. If you

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Item Numbers 2.a. - 2.c. Other Names Used. Provide all the names he or she has used, including his or her maiden name, nicknames, and aliases, if applicable. If you

need extra space to complete this section, use the space provided in **Part 11**. **Additional Information**.

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Item Numbers 7.a. - 7.f. Indicate whether your family member was or is in immigration proceedings. If you answer "Yes," select the type of proceedings. If your family member was in proceedings in the past and is no longer in proceedings, provide the date of action. If your family member is currently in proceedings, type or print "Current" in the appropriate date field. Select all applicable boxes. Use the space provided in Part 11. Additional Information.

. . .

[new]

Part 5. Processing Information

Item Numbers 1.a. - 29.c. You must answer each question on behalf of your family member. If you answer "Yes" to any of the questions, you must provide an explanation in the space provided in **Part 11. Additional Information**.

Part 6. Information About Your Qualifying Family Member's Spouse and/or Children

Item Numbers 1.a. - 12. Provide the requested information about your family member's spouse and/or children. If you need extra space to complete this section, use the space provided in **Part 11. Additional Information**.

Part 7. Petitioner's Statement, Contact Information, Declaration, and Signature

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Part 8. Qualifying Family Member's Statement, Contact Information, Declaration, and Signature

need extra space to complete this section, use the space provided in **Part 12**. **Additional Information**.

...

Item Numbers 7.a. - 7.f. Indicate whether your family member was or is in immigration proceedings. If you answer "Yes," select the type of proceedings. If your family member was in proceedings in the past and is no longer in proceedings, provide the date of action. If your family member is currently in proceedings, type or print "Current" in the appropriate date field. Select all applicable boxes. Use the space provided in Part 12. Additional Information.

. . .

Part 5. Your Alien Relative's Biographic Information

Provide the biographic information requested. Follow the specific instructions for each Item included in the section

Part 6. Processing Information

Item Numbers 1.a. - 29.c. You must answer each question on behalf of your family member. If you answer "Yes" to any of the questions, you must provide an explanation in the space provided in **Part 12. Additional Information**.

Part 7. Information About Your Qualifying Family Member's Spouse and/or Children

Item Numbers 1.a. - 12. Provide the requested information about your family member's spouse and/or children. If you need extra space to complete this section, use the space provided in Part 12. Additional Information.

Part 8. Petitioner's Statement, Contact Information, Declaration, and Signature

. . .

Part 9. Qualifying Family Member's Statement, Contact Information, Declaration, and Signature

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Part 9. Interpreter's Contact Information, Certification, and Signature

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Part 10. Contact Information, Declaration, and Signature of the Person Preparing this Supplement, if Other Than the Petitioner or Qualifying Family Member

Item Numbers 1.a. - 8.b. This section must contain the signature of the person who completed your supplement, if other than you, the petitioner or your family member. If the same individual acted as your interpreter and your preparer, that person should complete both Part 9. and **Part 10.** If the person who completed this supplement is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this supplement MUST sign and date the supplement. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your supplement is an attorney or accredited representative whose representation extends beyond preparation of this supplement, he or she may be obliged to also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your supplement.

Part 11. Additional Information

Item Numbers 1.a. - 7.d. If you need extra space to provide any additional information within this supplement, use the space provided in Part 11. Additional Information. If you need more space than what is provided in Part 11., you may make copies of Part 11. to complete and file with your supplement or attach a separate sheet of paper. Include your name (Principal) 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.

...

Part 10. Interpreter's Contact Information, Certification, and Signature

...

Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Supplement, if Other Than the Petitioner or Qualifying Family Member

Item Numbers 1.a. - 8.b. This section must contain the signature of the person who completed your supplement, if other than you, the petitioner or your family member. If the same individual acted as your interpreter and your preparer, that person should complete both Part 10. and **Part 11.** If the person who completed this supplement is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this supplement **MUST** sign and date the supplement. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your supplement is an attorney or accredited representative whose representation extends beyond preparation of this supplement, he or she may be obliged to also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your supplement.

Part 12. Additional Information

Item Numbers 1.a. - 7.d. If you need extra space to provide any additional information within this supplement, use the space provided in Part 12. Additional Information. If you need more space than what is provided in Part 12., you may make copies of Part 12. to complete and file with your supplement or attach a separate sheet of paper. Include your name (Principal) 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.

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Pages 10-14,	[page 13]	[page 13]
General Requirements		•••
	8. Waiver of Grounds of	8. Waiver of Grounds of
	Inadmissibility. To be eligible for U nonimmigrant status, you must be	Inadmissibility. To be eligible for U nonimmigrant status, you must be
	admissible to the United States. If you or	admissible to the United States. If you or
	your qualifying family members answered	your qualifying family members answered
	"Yes" to any of the questions in Part 3. of	"Yes" to any of the questions in Part 3. of
	Form I-918 or Part 5. of Supplement A,	Form I-918 or Part 6. of Supplement A,
	USCIS may deem you or your qualifying family members as inadmissible.	USCIS may deem you or your qualifying family members as inadmissible.
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	[page 14]	[page 14]
	NOTE: USCIS may require a statement	NOTE: USCIS may require a statement
	from the appropriate civil authority certifying that the necessary document is	from the appropriate civil authority certifying that the necessary document is
	unavailable.	unavailable.
	[new]	For parent-child and sibling
		relationships: USCIS may require that the petitioner submit other evidence of the
		claimed biological relationship, such as
		deoxyribonucleic acid (DNA) testing.
		USCIS will only accept DNA test results
		from laboratories accredited by the AABB (formerly the American Association of
		Blood Banks). A list of laboratories can be
		viewed at
		www.aabb.org/sa/facilities/Pages/RTestAcc
		rFac.aspx.
Page 15, What Is the Filing Fee?	[page 15]	[page 15]
	What Is the Filing Fee?	What Is the Filing Fee?
	There is no filing fee for Form I-918 or	There is no filing fee for Form I-918 or
	Supplement A. You are required to provide	Supplement A. You are not required to pay
	biometrics information, but are not required	the biometrics services fee.
	to pay the biometrics services fee. After you submit Form I-918 and Supplement A	
	(if applicable), USCIS will notify you and	
	your family member (if applicable) of when	
	and where to go for biometrics services.	
Pages 15-16,	[page 15]	[page 15]
Processing Information		
	Requests for Interview. We may request	Requests for Interview. We may request

that you and/or your family member appear at a USCIS office for an interview based on your petition or supplement. At the time of any interview or other appearance at a USCIS office, we may require that you and/or your family member provide your fingerprints, photographs, and/or signatures to verify your identity and/ or update background and security checks.

that you and/or your family member appear at a USCIS office for an interview based on your petition or supplement. At the time of any interview or other appearance at a USCIS office, we may require that you and/or your family member provide your biometrics to verify your identity and/ or update background and security checks.

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Pages 16-17, USCIS Privacy Act Statement

[page 16]

USCIS Privacy Act Statement

AUTHORITIES: The information requested on Form I-918 and Supplement A, and the associated evidence, is collected under the Immigration and Nationality Act, sections 101(a)(15)(U), 214(p), 212(d)(14), 8 CFR 212.17 and 214.14.

PURPOSE: The primary purpose for providing the requested information on Form I-918 and Supplement A is to request temporary immigration benefits if you or a qualifying family member are a victim of certain qualifying criminal activity. DHS uses the information you provide to grant or deny the immigration benefit you are seeking.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result in denial of your Form I-918 and/or Supplement A..

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ROUTINE USES: DHS may, where allowable under relevant confidentiality provisions, share the information you provide on Form I-918 and Supplement A as well as 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-001 - Alien File, Index, and National File Tracking System, DHS/USCIS-007 - Benefits Information System, and DHS/USCIS-018 Immigration Biometric and Background Check] and the published privacy impact assessment [DHS/USCIS/PIA-016a Computer Linked Application Information Management

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DHS Privacy Notice

AUTHORITIES: The information requested on this petition, and the associated evidence, is collected under the Immigration and Nationality Act, sections 101(a)(15)(U), 212(d)(14), and 214(p); and 8 CFR 212.17 and 214.14.

PURPOSE: The primary purpose for providing the requested information on this petition is to request temporary immigration benefits if you are a victim of certain qualifying criminal activity or for a qualifying family member of a victim of certain qualifying criminal activity. DHS uses the information you provide to grant or deny the immigration benefit you are seeking.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result in denial of your petition.

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ROUTINE USES: DHS may, where allowable under relevant confidentiality statutes and regulations, share the information you provide on this petition 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-001 Alien File, Index, and National File Tracking System, DHS/USCIS-007 Benefits Information System, and DHS/USCIS-018 Immigration Biometric and Background Check] and the published privacy impact assessment DHS/USCIS/PIA-016a Computer Linked **Application Information Management**

	System and Associated Systems] which you can find at www.dhs.gov/privacy . DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.	
Page 17,	[page 17]	
Paperwork Reduction Act	Paperwork Reduction Act	
	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 Form I-918 is estimated at 5 hours per response, and the public reporting burden for Supplement A is estimated at 1 hour and 30 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the petition, preparing statements, attaching necessary documentation, and submitting the petition. The collection of biometrics is estimated to require 1 hour and 10 minutes. 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 No. 1615-0104. Do not mail your completed Form I-918 or Supplement A to this address.

System and Associated Systems] which you can find at www.dhs.gov/privacy. DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.

[page 17]

Paperwork Reduction Act

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 Form I-918 is estimated at 5 hours per response, and the public reporting burden for Supplement A is estimated at 1 hour and 30 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the petition, preparing statements, attaching necessary documentation, and submitting the petition. The collection of biometrics is estimated to require 3 hours and 40 minutes. 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 No. 1615-0104. Do not mail your completed Form I-918 or Supplement A to this address.