TABLE OF CHANGES – FORM

Form I-539, Application to Extend/Change Nonimmigrant Status OMB Number: 1615-0003 05/18/2020

Reason for Revision: Biometrics Rule

Project Phase: NPRM

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 10/31/2021 Edition Date 10/15/2019

Current Page Number and Section	Current Text	Proposed Text
New		[Page 2]
	[new]	Part 4. Principal Applicant's Biographic Information
		1. Ethnicity (Select only one box) Hispanic or Latino Not Hispanic or Latino
		2. Race (Select all applicable boxes) White Asian Black or African American American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
		3. Height Feet Inches
		4. Weight Pounds
		5. Eye Color (Select only one box) Black Blue Brown Gray Green Hazel
		Maroon Pink Unknown/Other
		6. Hair Color (Select only one box) Bald (No hair) Black

		Blond
		Brown
		Gray
		Red
		Sandy
		White
		Unknown/Other
Page 2, Part 4.	[Page 2]	[Page 2]
Additional Information About the Principal Applicant	Part 4. Additional Information About the Principal Applicant	Part 5. Additional Information About the Principal Applicant
	Provide Your Current Passport Information (if different from Part 1.)	Provide Your Current Passport Information (if different from Part 1.)
	1.a. Passport Number	1.a. Passport Number
	1.b. Country of Passport Issuance	1.b. Country of Passport Issuance
	1.c. Passport Expiration Date (mm/dd/yyyy)	1.c. Passport Expiration Date (mm/dd/yyyy)
	Physical Address Abroad	Physical Address Abroad
	2.a. Street Number and Name	2.a . Street Number and Name
	2.b. Apt. Ste. Flr.	2.b. Apt. Ste. Flr.
	2.c. City or Town	2.c. City or Town
	2.d. Province	2.d. Province
	2.e. Postal Code	2.e. Postal Code
	2.f. Country	2.f. Country
	Answer the following questions. If you answer "Yes" to any of the questions in Item Numbers 3 15., use the space provided in Part 9. Additional Information to provide an explanation.	Answer the following questions. If you answer "Yes" to any of the questions in Item Numbers 3 15., use the space provided in Part 10. Additional Information to provide an explanation.
	13. Are you, or any other individual included in this application, now in removal proceedings? Yes	13. Are you, or any other individual included in this application, now in removal proceedings? Yes
	If you answered "Yes" to Item Number 13. , provide the following information concerning the removal proceedings in the space provided in Part 9. Additional Information . Include the name of the individual in removal proceedings and information on jurisdiction, date proceedings began, and status of proceedings.	If you answered "Yes" to Item Number 13. , provide the following information concerning the removal proceedings in the space provided in Part 10 . Additional Information . Include the name of the individual in removal proceedings and information on jurisdiction, date proceedings began, and status of proceedings.
	14. Have you, or any other individual included in this application, been employed in the United States since last admitted or granted an extension or change of status? Yes No	14. Have you, or any other individual included in this application, been employed in the United States since last admitted or granted an extension or change of status? Yes No
	If you answered "No" to Item Number 14. , fully describe how you are supporting yourself in Part 9. Additional Information. Include	If you answered "No" to Item Number 14. , fully describe how you are supporting yourself in Part 10 . Additional Information. Include

documentary evidence of the source, amount, and basis for any income.

If you answered "Yes" **to Item Number 14.**, fully describe the employment in **Part 9. Additional Information**. Include the name of the individual employed, name and address of the employer, weekly income, and whether the employment was specifically authorized by USCIS.

15. Are you, or any other individual included in this application, currently or have you ever been a J-1 exchange visitor or a J-2 dependent of a J-1 exchange visitor?

Yes No

If you answered "Yes" **to Item Number 15.**, you must provide the dates you maintained status as a J-1 exchange visitor or J-2 dependent in **Part 9. Additional Information**.

documentary evidence of the source, amount, and basis for any income.

If you answered "Yes" **to Item Number 14.**, fully describe the employment in **Part 10. Additional Information**. Include the name of the individual employed, name and address of the employer, weekly income, and whether the employment was specifically authorized by USCIS.

15. Are you, or any other individual included in this application, currently or have you ever been a J-1 exchange visitor or a J-2 dependent of a J-1 exchange visitor? Yes

Yes No

If you answered "Yes" **to Item Number 15.**, you must provide the dates you maintained status as a J-1 exchange visitor or J-2 dependent in **Part 10. Additional Information**.

New

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Part 5. Public Benefits

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2. If you have received or are currently certified to receive any of the above public benefits provide information about the public benefits below. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**. Submit documentation as outlined in the Instructions.

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- **3.** If you answered "Yes" to **Item Number 1.**, do any of the following apply to you? (select the applicable box). Provide the evidence listed in the Instructions if any of the following apply to you.
- [] I am enlisted in the Armed Forces, or am serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.
- [] I am the spouse or the child of an individual who is enlisted in the Armed Forces, or who is serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.

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- [] At the time I received the public benefits, I (or my spouse or parent) was enlisted in the Armed Forces, or was serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.
- [] At the time I received the public benefits, I

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Part 6. Public Benefits

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2. If you have received or are currently certified to receive any of the above public benefits provide information about the public benefits below. If you need extra space to complete this section, use the space provided in Part 10. Additional Information. Submit documentation as outlined in the Instructions.

•••

- **3.** If you answered "Yes" to **Item Number 1.**, do any of the following apply to you? (select the applicable box). Provide the evidence listed in the Instructions if any of the following apply to you.
- [] I am enlisted in the Armed Forces, or am serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.
 [] I am the spouse or the child of an individual
- [] I am the spouse or the child of an individual who is enlisted in the Armed Forces, or who is serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.

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- [] At the time I received the public benefits, I (or my spouse or parent) was enlisted in the Armed Forces, or was serving in active duty or in the Ready Reserve Component of the U.S. Armed Forces.
- [] At the time I received the public benefits, I

	was present in the United States in a status exempt from the public charge ground of inadmissibility. [] At the time I received the public benefits, I was present in the United States after being granted a waiver off the public charge ground of inadmissibility. [] I am a child currently residing abroad who entered the United States with a nonimmigrant visa to attend an N-600K, Application for Citizenship and Issuance of Certificate Under INA Section 322 interview. [] None of the above statements apply to me.	was present in the United States in a status exempt from the public charge ground of inadmissibility. [] At the time I received the public benefits, I was present in the United States after being granted a waiver of the public charge ground of inadmissibility. [] I am a child currently residing abroad who entered the United States with a nonimmigrant visa to attend an N-600K, Application for Citizenship and Issuance of Certificate Under INA Section 322 interview. [] None of the above statements apply to me.
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Part 5. Applicant's Statement, Contact Information, Declaration,	Part 6. Applicant's Statement, Contact Information, Declaration, Certification and Signature	Part 7. Applicant's Statement, Contact Information, Declaration, Certification and Signature
Certification and		
Signature	1.b. The interpreter named in Part 7. read to me every question and instruction on this application and my answer to every question in [Fillable Field], a language in which I am fluent, and I understood everything.	1.b. The interpreter named in Part 8. read to me every question and instruction on this application and my answer to every question in [Fillable Field], a language in which I am fluent, and I understood everything.
	2. At my request, the preparer named in Part 8., [Fillable field], prepared this application for me based only upon information I provided or authorized.	2. At my request, the preparer named in Part 9. , [Fillable field], prepared this application for me based only upon information I provided or authorized.
	I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.	I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.
	I understand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:	[deleted]
	 I reviewed and understood all of the information contained in, and submitted with, my application; and All of this information was complete, true, and correct at the time of filing. 	
	I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or	I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or

	authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.	authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.
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Part 7. Interpreter's		
Contact Information, Statement, Certification,	Part 7. Interpreter's Contact Information, Statement, Certification, and Signature	Part 8. Interpreter's Contact Information, Statement, Certification, and Signature
and Signature		
	[Page 5]	[Page 5]
	I am fluent in English and [Fillable Field], which is the same language specified in Part 6. , Item Number 1.b. , and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification , and has verified the accuracy of every answer.	I am fluent in English and [Fillable Field], which is the same language specified in Part 7. , Item Number 1.b. , and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification , and has verified the accuracy of every answer.
Pages 5-6,	[Page 5]	[Page 5]
Part 8. Contact Information, Declaration, and Signature of the Person	Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant	Part 9. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant
Preparing this	•••	•••
Application, if Other Than the Applicant		
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Part 9. Additional Information	Part 9. Additional Information	Part 10. Additional Information