TABLE OF CHANGES – INSTRUCTIONS

Instructions for 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
Pages 11-14,	[page 12]	[page 14]
General Instructions	Biometric Services Appointment. After USCIS receives your application and ensures it is complete, the agency will inform you in writing when to go to your local USCIS Application Support Center (ASC) for your biometric services appointment. Failure to attend the biometrics services appointment may result in denial of your application.	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. USCIS will notify you of the time and place of your appointment if you must appear and will provide 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.
		[page 14]
		If you are required to provide biometrics, at your appointment you must sign an oath

Copies. You may submit legible photocopy of documents requested, unless the instructions specifically state that you must submit an original document. Original documents submitted when not required may remain a part of the record, and will not be automatically returned to you.

Translations: Any document you submit to USCIS with information in a foreign language must be accompanied by a full English translation. The translator must certify that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English.

Online Submission. When authorized by USCIS, you may submit this form online. Please check the USCIS website for the latest information on whether electronic submission of this form is possible.

How to Fill Out Form I-539

- **1.** Type or print legibly in black ink.
- 2. If you need extra space to complete any item within this application, attach a sheet of paper, and type or print your name and Alien Registration Number (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.
- **3.** Answer all questions fully and accurately. If an item is not applicable or the answer is "none," type or print "N/A," unless otherwise directed.

reaffirming that:

- **1.** You provided or authorized all information in the application;
- **2.** You reviewed and understood all of the information contained in, and submitted with, your application; and
- **3.** All of this information was complete, true, and correct at the time of filing.

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- **3.** Answer all questions fully and accurately. If an item is not applicable or the answer is "none," type or print "N/A," unless otherwise directed.
- 4. USCIS Online Account Number

4. USCIS Online Account Number (if any). If you have previously filed an application or petition using the USCIS online filing system (previously called USCIS Electronic Immigration System (USCIS ELIS)), provide the USCIS Online Account Number you were issued by the system. You can find your USCIS Online Account Number by logging in to your account and going to the profile page. If you previously filed certain applications or petitions on a paper form through a USCIS Lockbox facility, you may have received a USCIS Online Account Access Notice issuing you a USCIS Online Account Number. You may find your USCIS Online Account Number at the top of the notice. The USCIS Online Account Number is not the same as an A-Number. If you were issued a USCIS Online Account Number, enter it in the space provided.

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5. Part 4. Biographic Information.

Provide the biographic information requested. 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.

A. Ethnicity and Race. Select the boxes that best describe your ethnicity and race.

B. 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 4., Item Number 1.)
- **(2) 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.
- **(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) Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **(6) White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **C. 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.
- **D. 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.
- **E. Eye Color.** Select the box that best describes the color of your eyes.
- **F. Hair Color.** Select the box that best describes the color of your hair.
- **6. Duration of Status.** If you are currently in A, G, I, F, or J status and granted Duration of Status (D/S), select the box in **Part 1.**, **Item Number 16.** of the application.
- 7. Change of Status. Part 2., Item Number 3.b. of the application, select the date you want your change of status to occur on. If approved, your change of status will occur on the date your current nonimmigrant status ends, the date of approval, or the requested date, whichever occurs later.
- **8. F or J Nonimmigrant.** If you were granted D/S as an F or J nonimmigrant and are seeking reinstatement as an F or J

- **5.** If you are currently in A, G, I, F, or J status and granted Duration of Status (D/S), select the box in **Part 1.**, **Item Number 16.** of the application.
- **6. Part 2., Item Number 3.b.** of the application, select the date you want your change of status to occur on. If approved, your change of status will occur on the date your current nonimmigrant status ends, the date of approval, or the requested date, whichever occurs later.
- 7. If you were granted D/S as an F or J

nonimmigrant and are seeking reinstatement as an F or J nonimmigrant then you should select the box in **Part 1.**, **Item Number 16.** of the application to indicate a duration of D/S.

NOTE: An F-1 nonimmigrant student who is admitted to attend a public high school is restricted to an aggregate of 12 months of study at any public high schools and is not eligible for D/S. Please indicate a specific date for the duration of your requested status.

8. Part 6. Statement, Contact Information, Declaration, **Certification, and Signature.** Select the appropriate box to indicate whether you read this application yourself or whether you had an interpreter assist you. If someone assisted you in completing the application, select the box indicating that you used a preparer. Further, you must sign and date your application and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every application **MUST** contain the signature of the applicant (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.

9. Part 7. Contact Information,
Certification, and Signature. If you used anyone as an interpreter to read the
Instructions and questions on this application to you in a language in which you are fluent, the interpreter must fill out this section; provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the application.

10. Part 8. Contact Information,
Declaration, and Signature of the
Person Preparing this Application, if
Other Than the Applicant. This
section must contain the signature of

nonimmigrant then you should select the box in **Part 1.**, **Item Number 16.** of the application to indicate a duration of D/S.

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10. Part 8. Interpreter's Contact Information, Certification, and Signature. If you used anyone as an interpreter to read the Instructions and questions on this application to you in a language in which you are fluent, the interpreter must fill out this section; provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the application.

11. Part 9. Contact Information,
Declaration, and Signature of the
Person Preparing this Application, if
Other Than the Applicant. This
section must contain the signature of
the person who completed your
application, if other than you, the

the person who completed your application, if other than you, the applicant. 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 application 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 application **MUST** sign and date the application. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your application is an attorney or accredited representative, he or she may also need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your application.

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Page 20, DHS Privacy Notice

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DHS Privacy Notice

AUTHORITIES: The information requested on this application, and the associated evidence, is collected pursuant to the Immigration and Nationality Act sections 1103 and 1184, and Title 8 of the Code of Federal Regulations (CFR) parts 103, 214 and 248.

PURPOSE: The primary purpose for providing the requested information on this application is to apply for an extension of stay or a change from one nonimmigrant category to another nonimmigrant category. DHS will use 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, and any requested evidence, may delay a final decision or result in denial of your application.

ROUTINE USES: DHS may share the

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information you provide on this application 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 and DHS/USCIS-007 - Benefits Information System] and the published privacy impact assessment [DHS/USCIS/PIA-016(a) Computer Linked Application Information Management System and Associated Systems], which can be found at www.dhs.gov/privacy. DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.

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Page 21, Paperwork Reduction Act

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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 Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 2.00 hours per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application, preparing statements, attaching necessary documentation, and submitting the application. 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. 1615-0003. Do not mail your completed Form I-539 to this address.

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