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H-1B Registration Tool

OMB control number 1615-0144

Edits in support of: Modification of Registration Requirement for Petitioners Seeking To File Cap-Subject H-1B Petitions Final Rule (RIN 1615-AC61)

I-1B Registration Tool	: Overview		
eading	Sub-Heading	Body Text	Revised body text
-1B Registration	•	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	U.S. employers or agents who seek to obtain H-1B nonimmigrant classification on behalf of an individual subject to the H-1B numerical allocat will need to submit a registration during a designated registration period, unless the registration requirement is suspended by USCIS.
		You may submit up to 250 beneficiaries for one registrant (employer/agent) per registration.	You may submit up to 250 beneficiaries for one registrant (employer/agent) per submission.
		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-18 cap-subject petitions may be filed for a particular fiscal year.	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 of which H-18 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 registrants 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.	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 registrants 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 neede 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 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.	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, USCIS will first select registrations generally based on the highest Occupational Employment Statistics (wage levels that the proffered wages equal or exceed for the relevant Standard Occupational Classification (SOC) codes and area(s) of intend-employment. A similar process will apply for those who may be eligible for the advanced degree exemption. This ranking process will not affer the order of selection as between the regular cap and the advanced degree exemption, the wage level ranking will occur first regular selection and then for the advanced degree exemption. A Form 1-129, Petition for a Nonimmigrant Worker, may then be filed by the petition during the applicable filing period, based on a selected registration to request classification of the beneficiary as an H-18 worker.
efore you start your registration	Eligibility	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.	
		U.S. Employers: Person or entity in U.S. that: Engages a person to work in the U.S.; Has an employer-employee relationship with the beneficiary, and Has an EIN.	
		Agents: A U.S. individual or company in business as an agent may file an H1-8 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.	
	Duplicates	A registrant (employer or agent) may only submit one registration per beneficiary in any fiscal year. If a registrant submits more than one registration per beneficiary in the same fiscal year, all registrations filed by that registrant related to the beneficiary for the fiscal year will be considered invalid.	
	Fee	Fee: \$10 per registration	
		We will send you to Pay.gov, our safe, secure payment website, to make your payment and submit your registration online. If your current document is incorrect due to a typographical or clerical error caused by USCIS, there is no fee.	
		Refund Policy USCIS does not refund fees, regardless of any action we take on your application, petition, or request. By continuing this transaction, you acknowledge that you must submit fees in the exact amount and that you are paying the fees for a government service. You further agree that the filing fee, biometric fee, and any other paid costs related to this financial transaction are final and not refundable. Please refer to the instructions for the form(s) you are filing for additional information or you may call the USCIS Contact Center at 800-375-5283. For TTY (deaf or hard of hearing 800-767-1833) 800-767-1833.	
ompleting your registration online	We will automatically save your responses	Had up inearing nour-ro-roads. We will automatically save your information when you select next to go to a new page or navigate to another section of the registration. We will save your draft information until the registration period closes.	
	How to continue filling out your registration	After you start your registration, you can exit and sign in to your account again to continue where you left off.	
	DHS Privacy Notice	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-18 cap selection process. DHS uses the provided information to select a projected number of registrations needed to generate a sufficient number of H-18 cap petitions to reach the annual H-18 numerical limitations, including the advanced degree exemption, and associate selected registrations with subsequently flied H-18 cap petitions. Unless the registration requirement is suspended, a registrant must have a selected registration to be eligible to file an H-18 cap petitions. Unless the registration requirement is suspended, a registrant must have a selected registration to be eligible to file an H-18 cap petitions. Unless the registration to the eligible to file an H-18 cap petitions for the named beneficiary.	

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may preclude you from filing an

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-0407 Benefits Information System) and the published privacy impact assessments (DHS/USCIS/PIA-034(a) H-18 Registration Final Rule) which you can find at www.dhs.geo/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

H-1B cap petition on the named beneficiary's behalf.

H-1B Selection P	Process Notice of Proposed Rulem	aking: edits made				
H-1B Registration Tool: Overview						
Heading	Sub-Heading	Body Text	ed body text			
	Paperwork Reduction Act	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:	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 50 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 2D Massachusetts Ave NW Washington, DC 20529-2140	U.S. Citizenship and Immigration Services Office of Policy and Strategy, Regulatory Coordination Division S900 Capital Cateway Orive, Mail Stop #2140 Camp Springs, MD 20588-0009			
		Do not mail your completed H-1B registration to this address.	Do not mail your completed H-1B registration to this address.			
		OMB No. 1615-0144 Expires: 1/31/2022	OMB No. 1615-0144 Expires: 1/31/2022			

H-1B Registration Tool: no edits

H-1B Registration Tool: About Registrant

tep	Section	Question	Sub-Question	Field Type	Instructional Text	Help Text	Required, Optional
bout Registrant	Employer/Agent	What is the legal name of the prospective petitioning company or organization?		Text	If filing as an individual registrant, provide the individual's legal name.		Required
		What is the Doing Business As name of the prospective petitioning company or organization?		Text	Doing Business As (DBA) name is the operating name of a company, as opposed to the legal name of the company.		Optional
			The prospective petitioning company or organization does not have a Doing Business As name.	Checkbox			
		What is the employer identification number (EIN) of the prospective petitioning company or organization?		Text	If filing as an individual registrant, provide the registrant's Individual IRS Tax Number (SSN or ITIN).		Required
		What is the primary U.S. office address of the prospective petitioning company or organization?	Address line 1	Text	USCIS notices will not be mailed to this address.	Street number and name	Required
			Address line 2	Text		Apartment, suite, unit, or floor	Optional
			City or town	Text			Required
			State	Dropdown			Required
			ZIP code	Text			Required
	Authorized Signatory	What is the authorized signatory's legal name?	Given name (first name)	Text			Required
			Middle name (if applicable)	Text			Required
			Family name (last name)	Text			Required
				Text			Required
		What is the authorized signatory's title?					
		What is the authorized signatory's contact information?	Daytime phone number	Text			Required
			Email address	Text			Required

Section		Question	Revised Question	Sub-Question		Field Type		Instructional text	Revised instructional Text	Help Text	Required, Optional
Beneficiary Information	Section				question		riciu type	You may submit up to 250 beneficiaries for one registrant (employer/agent) per registration.	You may submit up to 250 beneficiaries for one registrant (employer/agent) per submission.		Ормони
		What is the beneficiary's legal name?		Given Name (first name) Beneficiary does not have a first name. Middle Name		Text Checkbox Text					Required Required
				middle name.							Required
		What is the beneficiary's gender?		Male/Female		Radio					Required
		What is the beneficiary's date of birth?		MM/DD/YYYY		Date					Required
		the beneficiary has earned, or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education?		Yes/No		Radio					Required
		What is the beneficiary's country of birth? What is the beneficiary's country of citizenship?		Country Country		Dropdown Dropdown					Required Required
		What is the beneficiary's passport number?				Text					Required
				Beneficiary does not have a passport number.		Checkbox					
			Employment Statistics (OES) wage level that the beneficiary's proffered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment or other applicable corresponding wage level? (Select one).		[] Wage Level II [] Wage Level I and below						
									SOC code and area(s) of intended employmer will be indicated on the LCA filed with the petition. If using a private wage survey, select the highest OES wage level that the proffered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment, the proffered wage is less than the Level I OES wage, select the box for "Wage Level I and below."	ıt	
									locations, or in multiple positions if the registrant is an agent, select the box for the lowest corresponding OES wage level that the proffered wage will equal or exceed.	t	
S	istratio ection eneficiary	istration Tool: Alection Revised Section eneficiary	istration Tool: About Beneficiary ection Revised Question eneficiary formation What is the beneficiary's legal name? What is the beneficiary's gender? What is the beneficiary's date of birth? Are you requesting consideration under the INA 214(g)S)(C) advanced degree exemption because the beneficiary has earned, or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? What is the beneficiary's country of birth? What is the beneficiary's country of citizenship? What is the beneficiary's passport number?	istration Tool: About Beneficiary ection Revised Question Revised Question eneficiary eneficiary information What is the beneficiary's legal name? What is the beneficiary's gender? What is the beneficiary's date of birth? Are you requesting consideration under the INA 214(g)(S)(C) advanced degree exemption because the beneficiary has earned, or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? What is the beneficiary's country of birth? What is the beneficiary's country of citizenship? What is the beneficiary's passport number? As of the date of submission of this registration, what is the highest Occupational Employment Statistics (OES) wage level that the beneficiary's proffered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment or other applicable corresponding wage level? (Select	Revised Question Section Revised Question Revised Question What is the beneficiary's legal name? What is the beneficiary's gender? What is the beneficiary's gender? What is the beneficiary's gender? What is the beneficiary's date of birth? Are you requesting consideration under the INA 214(g)(S)(C) advanced degree exemption because the beneficiary has earned, or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? What is the beneficiary's country of birth? What is the beneficiary's country of citizenship? What is the beneficiary's passport number? Additional Information As of the date of submission of this registration, what is the highest Occupational Employment Statistics (OES) wage level that the beneficiary's profered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment or other applicable corresponding wage level? (Select	Section Tool: About Beneficiary ection Revised Question Revised Question Sub-Question Revised Sub- Section What is the beneficiary's legal name? What is the beneficiary's legal name? What is the beneficiary's gender? What is the beneficiary's deep on the value of birth? Are you requesting consideration under the INA 214(g)(5)(C) advanced degree exemption because the beneficiary has earned, or will earn prior to the filing of the petition, a master's or higher degree from a U.S. institution of higher education? What is the beneficiary's country of birth? What is the beneficiary's passport number? As of the date of submission of this registration, what is the highest Occupational Employment Statiscis (OSI) wage level that the beneficiary's proffered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment or other applicable corresponding wage levely (Seelect)	Section Tool: About Beneficiary ection Revised Question Revised Question Sub-Question Revised Sub-Question Revised Section Revised Sub-Question Revised Sub-Question Revised Sub-Question Revised Sub-Question Field Type Question Text Beneficiary does not have a first name) Beneficiary does not have a first name. Middle Name Beneficiary does not have a middle name. Fext Ramily Name (last name) What is the beneficiary's gender? What is the beneficiary's date of birth? Are you requesting consideration under the INA 2.14(g/S)(C) advanced degree exemption because the beneficiary has earned, or will earn prior to the filling of the petition, a master's or higher degree from a U.S. institution of higher education? What is the beneficiary's passport number? What is the beneficiary's passport number? As of the date of submission of this registration, what is the highest Occupational Employment Statistics (CSD) wage level that the beneficiary has called the beneficiary profered wage equals or exceeds for the relevant Standard Occupational Classification (SOC) code in the area(s) of intended employment or other applicable corresponding wage level? (Select	istration Tool: About Beneficiary action Revised Section Revised Question Revised Question Revised Question Revised Question Revised Sub-Question Revised Sub-Revised S	Revised Question Revised Question Revised Question Revised Sub-Question Revis	State Post Post	Secure S

	Sistingtion room it	eview and Submit						
Step	Section	Question	Revised question	Field Type	Instructional Text	Help Text	Required/ Optional	Prima CTA
Review	Check your registration before you submit	Check your registration before you submit						Next
	actore you subtime	We will review your registration to check for completeness before you submit it.						
		We encourage you to provide as many responses as you can throughout the registration, to the best of your knowledge. Missing information can slow down the review process after you submit your registration.						
		You can return to this page to review your registration as many times as you want before you submit it.						
	Your fee	Your form filing fee is: \$XX.XX						
		Refund Policy: USCIS does not refund fees, regardless of any action we take on your application, petition, or request. By continuing this transaction, you acknowledge th you must submit fees in the exact amount and that you are paying the fees for a government service.						
	Alerts and warnings	You have one or more alerts based on the information you provided in your registration.						
		A green alert means you have completed all required fields and responses.						
		We found no alerts or warnings in your registration.						
ummary	H-1B Registration	Here is a summary of all the information you provided in your registration.						Next
	Summary	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.	u					
Authorized	Authorized Signatory's	I can read and understand English, and have read and understand every question an	d	Checkbox	You must read and agree to the		Required	Next

H-1B Regis	stration Tool: Re	eview and Submit						
Step	Section	Question	Revised question	Field Type	Instructional Text	Help Text	Required/ Optional	Primary CTA
	Authorized Signatory's Certification and Signature	If submitting or authorizing this registration on behalf of an organization, by my signaure, 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 beneficiary is selected.	If submitting or authorizing this registration on behalf of an organization, by my signaure, 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 beneficiary is selected. I further certify that each registration represents a legitimate job offer and that the proferred wage on the petition will equal or exceed the wage level on the applicable registration.		You must read and agree to the certification below.		Optional	CIA
Payment		I have read and agree to the authorized signatory's statement. Authorized Signatory's Signature The final step to submit your H-1B Registration is to pay the required fee.		Checkbox			Required Required	Next
		Your registration fee is: \$XX.XX Refund Policy: USCIS does not refund fees, regardless of any action we take on your application, petition, or request. By continuing this transaction, you acknowledge that you must submit fees in the exact amount and that you are paying the fees for a government service.	•					
	Pay for and submit your registration	We will send you to Pay.gov — our safe, secure payment website — to make your payment and submit your registration online. Here are the steps in the payment and submission process: 1. Provide your billing information on Pay.gov 2. Provide your credit card or U.S. bank account information 3. Submit your payment When you have paid your fee, your registration will be submitted. Pay.gov will redirect you to a uscis.gov confirmation screen. You can track the status of your registration through your USCIS online account.					Required	Pay and submit
You have successfully submitted your H 1B Registration.	Ŀ	You have successfully submitted your H-1B Registration. We will notify you when the selection process has ended. You can track the status of your registration through your USCIS account. Each beneficiary has been assigned a confirmation number. This number is only associated with the submitted registration and cannot be used to track case status using Case Status Online.						Go to account