**Narrative of Change Table**

*The purpose of the Narrative of Revisions Table is to demonstrate changes to a collection since the previous approval.*

**Collection Title**: Notice to Student or Exchange Visitor

**OMB Control No**.: 1653-0037

**Current Expiration Date**: 11/30/2025

**Collection Instrument(s**): I-515A

|  |  |  |
| --- | --- | --- |
| **Location** | **Current version** | **Proposed Change** |
| Pages - ALL | “Your original Form…” | Delete “original” |
| Page 2 | “in BLUE ink” | Delete text |
| Page 3 “NOTE” section | 500 12th Street SW STOP 5600 | Email: sevis.i-515@ice.dhs.gov |
| Page 3 | A photo copy of your… | A copy of your |
| Pages 1 & 2 | Submit all of the following documents to the address listed on page 2 | Submit all of the following documents electronically to the email address listed on page 2. |
| Page 3 | You should submit their original Form I-94, Arrival Departure Record, and their Form I-20 or DoS Form DS-2019 to the address listed below. | You should submit their original Form I-94, Arrival- Departure Record, and their Form I-20 or DoS Form DS-2019 electronically to the email address listed below. |
| Page 3 | Within the next 30 days, you must submit all of the documents to the address listed below. | Within the next 30 days, you must submit all of the documents electronically to the email address listed below. |