

TABLE OF CHANGES – FORM
Form I-914, Application for T Nonimmigrant Status
OMB Number: 1615-0099
07/08/2024

Reason for Revision: TFinalRule

Project Phase: 30Day

Legend for Proposed Text:

- Black font = Current text
- **Red font** = Changes

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Edition Date 04/01/2024

Current Page Number and Section	Current Text	Proposed Text
Page 1,	<p>[Page 1]</p> <p>For USCIS Use Only</p> <p>Returned Date Date</p> <p>Resubmitted Date Date</p> <p>Reloc Sent Date Date</p> <p>Reloc Rec'd Date Date</p> <p>Receipt</p> <p>Validity Dates From: To:</p> <p>Remarks</p> <p>Conditional Approval Stamp # Date</p> <p>Action Block</p> <p>To be fully completed by an attorney or accredited representative, if any.</p>	<p>[Page 1]</p> <p>For USCIS Use Only</p> <p>Returned Date Date</p> <p>Resubmitted Date Date</p> <p>Reloc Sent Date Date</p> <p>Reloc Rec'd Date Date</p> <p>Receipt</p> <p>Validity Dates From: To:</p> <p>Remarks</p> <p>Waitlisted Stamp # Date</p> <p>Action Block</p> <p>To be fully completed by an attorney or accredited representative, if any.</p>

	<p>Select this box if Form G-28 is attached. Attorney State Bar Number Attorney or Accredited Representative USCIS Online Account Number</p> <p>START HERE - Type or print in ink.</p>	<p>Select this box if Form G-28 is attached. Attorney State Bar Number Attorney or Accredited Representative USCIS Online Account Number</p> <p>START HERE - Type or print in ink.</p>
<p>Pages 1-2</p> <p>Part 2. General Information About You (Person filing this application as a victim)</p>	<p>[Page 1]</p> <p>Part 2. General Information About You (Person filing this application as a victim)</p> <p>...</p> <p>8. Gender Male Female. </p> <p>...</p>	<p>[Page 1]</p> <p>Part 2. General Information About You (Person filing this application as a victim)</p> <p>...</p> <p>8. Gender Male Female Another Gender Identity</p> <p>...</p>
<p>Pages 2-3,</p> <p>Part 3. Additional Information About Your Application</p>	<p>[Page 2]</p> <p>Part 3. Additional Information About Your Application</p> <p>Answers to the following questions about your claim require explanation and supporting documentation. You should attach documents in support of your claim that you are a victim of a severe form of trafficking in persons and the specific facts on which you are relying to support your claim. You must attach a personal narrative statement addressing the eligibility requirements for T nonimmigrant status as listed in the regulations, including a description of the trafficking you experienced. If you need extra space to complete this section, use the space provided in Part 9. Additional Information.</p> <p>1. I am or have been a victim of a severe form of trafficking in persons. (Attach evidence to support your claim.) Yes No</p> <p>2.A. I have cooperated with reasonable requests for assistance from law enforcement. Yes No</p> <p>B. Due to my age or the trauma I have suffered, I am exempt from the requirement to cooperate with reasonable requests for assistance from law enforcement. Yes</p>	<p>[Page 2]</p> <p>Part 3. Additional Information About Your Application</p> <p>Answers to the following questions about your claim require explanation and supporting documentation. You should attach documents in support of your claim that you are a victim of a severe form of trafficking in persons and the specific facts on which you are relying to support your claim. If you answer “Yes” to Item Numbers 1. - 4., attach evidence and documents to support your claim. You must attach a signed personal narrative statement addressing the eligibility requirements for T nonimmigrant status as listed in the regulations, including a description of the trafficking you experienced. If you need extra space to complete this section, use the space provided in Part 9. Additional Information.</p> <p>1. I am or have been a victim of a severe form of trafficking in persons. Yes No</p> <p>2.A. I have cooperated with reasonable requests for assistance from law enforcement. Yes No</p> <p>B. Due to my age or the trauma I have suffered, I am exempt from the requirement to cooperate with reasonable requests for assistance from law enforcement. Yes No</p>

	<p>No</p> <p>[Page 3]</p> <p>3. I am physically present in the United States, American Samoa, or the Commonwealth of the Northern Mariana Islands, or at a port of entry, on account of trafficking, or have been allowed entry into the United States to participate in investigative or judicial processes associated with an act or perpetrator of trafficking. (If you selected “Yes,” explain in detail and attach evidence and documents supporting this claim.) Yes No</p> <p>4. I fear that I will suffer extreme hardship involving unusual and severe harm upon removal. (If you selected “Yes,” explain in detail and attach evidence and documents supporting this claim.) Yes No</p> <p>5. I have reported the trafficking crime of which I am claiming to be a victim. (If you selected “Yes,” indicate to which law enforcement agency and office you have made the report, the address and phone number of that office, and the case number assigned, if any. If you selected “No,” explain the circumstances.) Yes No</p> <p>Law Enforcement Agency and Office Street Number and Name Apt./Ste./Flr. [Number] City or Town State ZIP Code Daytime Telephone Number Case Number Circumstances</p> <p>6. I am under 18 years of age. (If you selected “Yes,” skip to Item Number 8.) Yes No</p> <p>7. I have complied with reasonable requests from Federal, state, local, or tribal law enforcement authorities for assistance in the investigation or prosecution of acts of trafficking, or am unable to cooperate with such requests due to physical or psychological trauma. (If you selected “No,” explain the circumstances.) Yes No</p>	<p>[Page 3]</p> <p>3. I am physically present in the United States, American Samoa, or the Commonwealth of the Northern Mariana Islands, or at a port of entry, on account of trafficking, or have been allowed entry into the United States to participate in investigative or judicial processes associated with an act or perpetrator of trafficking. Yes No</p> <p>4. I fear that I will suffer extreme hardship involving unusual and severe harm upon removal. Yes No</p> <p>5. I have reported the trafficking crime of which I am claiming to be a victim. (If you selected “Yes,” indicate to which law enforcement agency and office you have made the report, the address and phone number of that office, and the case number assigned, if any. If you selected “No,” explain the circumstances below.) Yes No</p> <p>Law Enforcement Agency and Office Street Number and Name Apt./Ste./Flr. [Number] City or Town State ZIP Code Daytime Telephone Number Case Number Circumstances</p> <p>6. I was under 18 years of age at the time at least one of the acts of trafficking occurred. Yes No</p> <p>7. I have complied with reasonable requests from Federal, State, Tribal, or local law enforcement authorities for assistance in the investigation or prosecution of acts of trafficking, or am unable to cooperate with such requests due to physical or psychological trauma. (If you selected “No,” and were over 18 years of age at the time one of the acts of trafficking occurred, explain the circumstances.) Yes No</p>
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	<p>8. This is the first time I have entered the United States. (If you selected “No,” list each date, place of entry, and under which status you entered the United States for the past five years, and explain the circumstances of your most recent arrival.) If you need extra space, use the space provided in Part 9. Additional Information. Yes No</p> <p>(1) Date of Entry (mm/dd/yyyy)</p> <p>(2) Place of Entry City or Town State</p> <p>(3) Status</p> <p>9. My most recent entry was on account of the trafficking that forms the basis for my claim. (Explain the circumstances of your most recent arrival.) Yes No</p> <p>10. I am requesting an Employment Authorization Document (EAD). Yes No</p> <p>11. I am now applying for one or more eligible family members. (If you selected “Yes,” complete and include a Form I-914, Supplement A, Application for Immediate Family Member of T-1 Recipient, for each family member for whom you are now applying. You may also apply to bring eligible family members to the United States at a later date.) Yes No</p>	<p>8. This is the first time I have entered the United States. (If you selected “No,” list each date, place of entry, and under which status you entered the United States for the past five years, and explain the circumstances of your most recent arrival.) If you need extra space, use the space provided in Part 9. Additional Information. Yes No</p> <p>(1) Date of Entry (mm/dd/yyyy)</p> <p>(2) Place of Entry City or Town State</p> <p>(3) Status</p> <p>9. My most recent entry was on account of the trafficking that forms the basis for my claim. (Explain the circumstances of your most recent arrival.) Yes No</p> <p>10. I am requesting an Employment Authorization Document (EAD) when I am granted T nonimmigrant status. Yes No</p> <p>11. I am now applying for one or more eligible family members. (If you selected “Yes,” complete and include a Form I-914, Supplement A, Application for Derivative T Nonimmigrant Status, for each family member for whom you are now applying. You may also apply to bring eligible family members to the United States at a later date.) Yes No</p>
<p>Pages 4-7</p> <p>Part 4. Processing Information</p>	<p>[Page 4]</p> <p>Part 4. Processing Information</p> <p>...</p> <p>D. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? Yes No</p> <p>...</p>	<p>[Page 4]</p> <p>Part 4. Processing Information</p> <p>...</p> <p>D. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No</p> <p>...</p>

	<p>(4) The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? Yes No</p> <p>...</p> <p>8. Have you EVER been present or nearby when any person was:</p> <p>A. Intentionally killed, tortured, beaten, or injured? Yes No</p> <p>B. Displaced or moved from his or her residence by force, compulsion, or duress? Yes No</p> <p>...</p>	<p>(4) The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No</p> <p>...</p> <p>8. Have you EVER been present or nearby when any person was:</p> <p>A. Intentionally killed, tortured, beaten, or injured? Yes No</p> <p>B. Displaced or moved from their residence by force, compulsion, or duress? Yes No</p> <p>...</p>
<p>Pages 7-8</p> <p>Part 5. Information About Your Family Members</p>	<p>[Page 7]</p> <p>Part 5. Information About Your Family Members</p> <p>Provide the following information about your spouse and all of your children, if applicable. If you need extra space to complete this section, use the space provided in Part 9. Additional Information.</p> <p>1. Your Spouse’s Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>2. Date of Birth (mm/dd/yyyy)</p> <p>3. Country of Birth</p> <p>4. Current Location City or Town of Residence Country of Residence</p> <p>5. Information About Your Children</p> <p>A. Child 1 Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>Date of Birth (mm/dd/yyyy)</p> <p>Country of Birth</p>	<p>[Page 7]</p> <p>Part 5. Information About Your Family Members</p> <p>Provide the following information about your spouse and all of your children, if applicable. If you need extra space to complete this section, use the space provided in Part 9. Additional Information.</p> <p>1. Information About your Spouse</p> <p>A. Your Spouse’s Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>B. Date of Birth (mm/dd/yyyy)</p> <p>C. Country of Birth</p> <p>D. Current Location City or Town of Residence Country of Residence</p> <p>2. Information About Your Children</p> <p>A. Child 1 Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>Date of Birth (mm/dd/yyyy)</p> <p>Country of Birth</p>

	<p>Relationship</p> <p>Current Location City or Town State Country</p> <p>B. Child 2 Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>Date of Birth (mm/dd/yyyy)</p> <p>Country of Birth</p> <p>Relationship</p> <p>Current Location City or Town State Country</p> <p>[Page 8]</p> <p>C. Child 3 Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>Date of Birth (mm/dd/yyyy)</p> <p>Country of Birth</p> <p>Relationship</p> <p>Current Location City or Town State Country</p> <p>Complete Form I-914, Supplement A, Application for Family Member of T-1 Recipient, for each family member listed above for whom you are now applying for derivative T nonimmigrant status, and attach it to this application.</p>	<p>[deleted]</p> <p>Current Location City or Town State Country</p> <p>B. Child 2 Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>Date of Birth (mm/dd/yyyy)</p> <p>Country of Birth</p> <p>[deleted]</p> <p>Current Location City or Town State Country</p> <p>[Page 8]</p> <p>C. Child 3 Family Name (Last Name) Given Name (First Name) Middle Name (if any)</p> <p>Date of Birth (mm/dd/yyyy)</p> <p>Country of Birth</p> <p>[deleted]</p> <p>Current Location City or Town State Country</p> <p>[deleted]</p>
<p>Pages 8-9</p> <p>Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature</p>	<p>[Page 8]</p> <p>Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature</p> <p>NOTE: Read the Penalties section of the Form I-914 Instructions before completing this section.</p>	<p>[Page 8]</p> <p>Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature</p> <p>NOTE: Read the Penalties section of the Form I-914 Instructions before completing this section.</p>

	<p>Applicant's Statement</p> <p>NOTE: Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item Number 2.</p> <p>1. Applicant's Statement Regarding the Interpreter</p> <p>A. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.</p> <p>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.</p> <p>2. Applicant's Statement Regarding the Preparer</p> <p>At my request, the preparer named in Part 8., [Fillable Field], prepared this application for me based only upon information I provided or authorized.</p> <p>Applicant's Contact Information</p> <p>3. Applicant's Daytime Telephone Number 4. Applicant's Safe Daytime Telephone Number 5. Applicant's Email Address (if any)</p> <p>[Page 9]</p> <p>Applicant's Declaration and Certification Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.</p> <p>I authorize the release of any information from my record that USCIS needs to determine eligibility for the benefit I am seeking to investigate my claim, and to investigate fraudulent claims. I further authorize USCIS to release information to law enforcement agencies and prosecutors investigating crimes of trafficking or related crimes. I further authorize USCIS to release information to Federal, State, and local public and private agencies providing benefits, to be used solely in</p>	<p>Applicant's Statement</p> <p>NOTE: Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item Number 2.</p> <p>1. Applicant's Statement Regarding the Interpreter</p> <p>A. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.</p> <p>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.</p> <p>2. Applicant's Statement Regarding the Preparer</p> <p>At my request, the preparer named in Part 8., [Fillable Field], prepared this application for me based only upon information I provided or authorized.</p> <p>Applicant's Contact Information</p> <p>3. Applicant's Daytime Telephone Number 4. Applicant's Safe Daytime Telephone Number 5. Applicant's Email Address (if any)</p> <p>[Page 9]</p> <p>Applicant's Declaration and Certification Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.</p> <p>I authorize the release of any information from my record that USCIS needs to determine eligibility for the benefit I am seeking to investigate my claim, and to investigate fraudulent claims. I further authorize USCIS to release information to law enforcement agencies and prosecutors investigating crimes of trafficking or related crimes. I further authorize USCIS to release information to Federal, State, and local public and private agencies providing benefits, to be used solely in</p>
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	<p>making determinations of eligibility for benefits pursuant to 8 USC 1641(c).</p> <p>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.</p> <p>I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:</p> <p>1) I reviewed and understood all of the information contained in, and submitted with, my application; and</p> <p>2) All of this information was complete, true, and correct at the time of filing.</p> <p>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.</p> <p><i>Applicant's Signature</i> 6. Applicant's Signature Date of Signature (mm/dd/yyyy)</p> <p>NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.</p>	<p>making determinations of eligibility for benefits pursuant to 8 U.S.C. 1641(c).</p> <p>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. Any disclosure will be in accordance with the confidentiality provisions at 8 U.S.C. section 1367 and 8 CFR 214.216.</p> <p>I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:</p> <p>1) I reviewed and understood all the information contained in, and submitted with, my application; and</p> <p>2) All of this information was complete, true, and correct at the time of filing.</p> <p>I certify, under penalty of perjury, that all the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all the information contained in, and submitted with, my application and that all this information is complete, true, and correct.</p> <p><i>Applicant's Signature</i> 6. Applicant's Signature Date of Signature (mm/dd/yyyy)</p> <p>NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.</p>
<p>Pages 9-10</p> <p>Part 7. Interpreter's Contact Information, Certification, and Signature (if any)</p>	<p>[Page 9]</p> <p>Part 7. Interpreter's Contact Information, Certification, and Signature (if any)</p> <p>...</p> <p><i>Interpreter's Certification</i></p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in Part 6., Item B. in Item Number 1., and I have read to this applicant in the identified language every question and instruction on this application and</p>	<p>[Page 9]</p> <p>Part 7. Interpreter's Contact Information, Certification, and Signature (if any)</p> <p>...</p> <p><i>Interpreter's Certification</i></p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in Part 6., Item B. in Item Number 1., and I have read to this applicant in the identified language every question and instruction on this application and</p>

	<p>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.</p> <p><i>Interpreter's Signature</i> 7. Interpreter's Signature Date of Signature (mm/dd/yyyy)</p>	<p>their answer to every question. The applicant informed me that they understand every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.</p> <p><i>Interpreter's Signature</i> 7. Interpreter's Signature Date of Signature (mm/dd/yyyy)</p>
<p>Pages 10-11</p> <p>Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant</p>	<p>[Page 10]</p> <p>Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant</p> <p>...</p> <p><i>Preparer's Certification</i></p> <p>By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the Applicant's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.</p> <p><i>Preparer's Signature</i> 8. Preparer's Signature Date of Signature (mm/dd/yyyy)</p>	<p>[Page 10]</p> <p>Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant</p> <p>...</p> <p><i>Preparer's Certification</i></p> <p>By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that they understand all the information contained in, and submitted with, their application, including the Applicant's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.</p> <p><i>Preparer's Signature</i> 8. Preparer's Signature Date of Signature (mm/dd/yyyy)</p>
<p>Page 12,</p> <p>Part 9. Additional Information</p>	<p>[Page 12]</p> <p>Part 9. Additional Information</p> <p>If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers.</p> <p>...</p>	<p>[Page 12]</p> <p>Part 9. Additional Information</p> <p>If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print 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.</p> <p>...</p>