**TABLE OF CHANGES – FORM**

**Form I-918, Petition for U Nonimmigrant Status**

**OMB Number: 1615-0104**

**02/18/2025**

|  |
| --- |
| **Reason for Revision: Biological Sex**  **Project Phase: 83C**  Legend for Proposed Text:   * Black font = Current text * Red font = Changes   Expires 12/31/2027  Baseline Edition Date 12/12/2024  New Edition Date 01/20/2025 |

|  |  |  |
| --- | --- | --- |
| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Pages 1-2, Part 1. Information About You** (Person filing this petition as a victim) | **[Page 1]**  **START HERE – Type or print in black ink.**  **Part 1. Information About You** (Person filing this petition as a victim)  **…**  **9.** Gender  Male  Female  Another Gender Identity  **10.** Date of Birth (mm/dd/yyyy)  **…** | **[Page 1]**  **START HERE – Type or print in black ink.**  **Part 1. Information About You** (Person filing this petition as a victim)  **…**  **9.** Sex  Male  Female  [delete]  **10.** Date of Birth (mm/dd/yyyy)  **…** |