Change of Status Sample I-539 Form – Follow these instructions carefully:


2. Fill out the form using ISSS instructions below, not the instructions found on the USCIS website.

3. Print and bring the completed form to your meeting with an ISSS advisor.

**Application to Extend/Change Nonimmigrant Status**

**Part I: Information About You**

1. Alien Registration Number (A-Number)  
2. USCIS ELIS Account Number (if any)
3. a. Family Name (Last Name)
   b. Given Name (First Name)
   c. Middle Name

**Mailing Address**

4. a. In Care Of Name
   b. Street Number and Name  
   c. APT. Ste.  
   d. City of Town  
   e. State  
   f. ZIP Code

You must use the ISSS address as shown here.

Use your U.S. address.

You will usually not fill in 1 or 2 unless instructed by ISSS advisor.

**Other Information**

6. County of Birth
7. Country of Citizenship or Nationality
8. Date of Birth (mm/dd/yyyy)
9. U.S. Social Security Number (if any)
10. Date of Last Arrival into the United States (mm/dd/yyyy)

Provide information about your most recent Form I-94:

11. a. I-94 Arrival-Departure Record Number
   b. Passport Number
   c. Travel Document Number
   d. Country of Issue for Passport or Travel Document
   e. Expiration Date for Passport or Travel Document (mm/dd/yyyy)
12. a. Current Nonimmigrant Status
    b. Expiration Date (mm/dd/yyyy)
    c. [Check this box if you are currently F1, F2, J1, J2]
Part 2. Application Type (See instructions for fee)

I am applying for: (Select one)
1. □ An extension of stay in my current status.
2.a. □ A change of status. The new status and effective date of change. (mm/dd/yyyy) →
2.b. The change of status I am requesting is:

3. □ Reinstatement to student status.
4. □ I am the only applicant.
5.a. □ Members of my family are filing this application with me.
5.b. The total number of people (including me) in the application is: (Complete the supplement for each co-applicant.)

Part 3. Processing Information
1.a. If we request that any/our current or requested status be extended until (mm/dd/yyyy) → Leave blank.
1.b. □ Check this box if you were granted, or are seeking, a change of status.
2.a. Is this application based on an extension or change of status already granted to your spouse, child, or parent?
□ Yes □ No
2.b. If "Yes," provide USCIS Receipt Number.

3.a. Is this application based on a separate petition or application to give your spouse, child, or parent an extension or change of status?
□ Yes, filed with this I-539 □ Yes, filed previously and pending with USCIS.
3.b. If pending with USCIS, provide USCIS Receipt Number.

If the petition or application is pending with USCIS, also give the following data:
5.e. First and last name of petitioner or applicant

Office where petition or application filed:
5.d. City or Town
5.a. State
5.f. Date filed (mm/dd/yyyy) →

Part 4. Additional Information

If you use the Principal Applicant, provide your current Passport information:
1.a. Country of Issuance for Passport
1.b. Expiration Date for Passport (mm/dd/yyyy) →

Foreign Home Address
2.a. Street Number and Name
2.b. Apt □ Sta. □ Fl. □
2.c. City or Town
2.d. Province
2.e. Postal Code
2.f. Country

Answer the following questions. If you answer "Yes" to any question, describe the circumstances in detail and explain on a separate sheet of paper:
3. Are you, or any other person included on the application, an applicant for an immigrant visa? □ Yes □ No
4. Has an immigrant petition EVER been filed by you for or by any other person included in this application? □ Yes □ No
5. Has Form I-485, Application to Register Permanent Residence or Adjust Status, EVER been filed by you or by any other person included in this application? □ Yes □ No
6. Have you, or any other person included in this application, EVER been arrested or convicted of any criminal offense since last entering the United States? □ Yes □ No

Have you, or any other person included on the application, EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:
7. Acts involving torture or genocide? □ Yes □ No
8. Killing anyone? □ Yes □ No
9. Intentionally and severely injuring anyone? □ Yes □ No
10. Engaging in any kind of sexual conduct or relations with anyone who was being forced or threatened? □ Yes □ No
11. Limiting or denying anyone's ability to exercise religious belief? □ Yes □ No

Select this option. Use the start date on your I-20 or DS-2019 for the "effective date."

Select this option unless you will have dependents seeking F-2 or J-2 status.

Speak with an ISSS Advisor if any response is "Yes."

Complete this section.
Part 4. Additional Information (continued)

12. Have you or any other person included on this application, EVER served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, mafia, or insurgent organization? □ Yes □ No

13. Have you, or any other person included in this application, EVER served in any prison, jail, prison camp, detention facility, labor camp, or any other institution that involved detaining persons? □ Yes □ No

14. Have you, or any other person included in this application, EVER been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? □ Yes □ No

15. Have you, or any other person included in this application, EVER assisted or participated in selling, providing, or transporting weapons to any person to whom you knew, used them against another person? □ Yes □ No

16. Have you, or any other person included in this application, EVER received any type of military, paramilitary, or weapons training? □ Yes □ No

17. Have you, or any other person included in this application, done anything that violated the terms of the nonimmigrant status you now hold? □ Yes □ No

18. Are you, or any other person included in this application, now in removal proceedings? □ Yes □ No

If "Yes," provide the following information concerning the removal proceedings in Part 4, Additional Information for Answers to Item Numbers 18, 19, and 20. Include the name of the person in removal proceedings and information on asylum, deportation hearings, and status of proceedings.

19. Have you, or any other person included in this application, been employed in the United States since last admitted or granted an extension or change of status? □ Yes □ No

If "No," fully describe how you are supporting yourself in Part 4, Additional Information for Answers to Item Numbers 18, 19, and 20. Include documentary evidence of the source, amount, and basis for any income.

If "Yes," fully describe the employment in Part 4, Additional Information for Answers to Item Numbers 18, 19, and 20. Include the name of the person employed, name and address of the employer, weekly income, and whether the employment was specifically authorized by USCIS.

20. Are you, or any other person included in this application, currently or have you ever been a J-1 exchange visitor or J-2 dependent of a J-1 exchange visitor? □ Yes □ No

If "Yes," you must provide the dates you maintained status as a J-1 exchange visitor or J-2 dependent in Part 4. Additional Information for Answers to Item Numbers 18, 19, and 20.

Part 5. Applicant's Statement, Contact Information, Certification and Signature

NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.

1.a. □ I can read and understand English, and have read and understood each and every question and instruction on this form, as well as my answer to every question, in a language in which I am fluent. I understand every question and instruction on this form translated to me by my interpreter, and have provided true and correct responses in the language indicated above.

1.b. □ The interpreter named in Part 6, has also read and used every question and instruction on this form, as well as my answer to every question, in a language in which I am fluent. I understand every question and instruction on this form translated to me by my interpreter, and have provided true and correct responses in the language indicated above.

2. □ I have requested the services of and consented to

who is □ is not □ an attorney or accredited representative, preparing this form for me.

Applicant's Certification

I certify, under penalty of perjury, that the information in my form and any document submitted with my form is true and correct. 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 swords that USCIS may need to determine my eligibility for the benefit that I seek.

I furthermore authorize release of information contained in this form, in supporting documents, and in any USCIS records, to other entities and persons whose necessary for the administration and enforcement of U.S. immigration laws.

3.a. Applicant's Signature

3.b. Date of Signature (mm/dd/yyyy)

Speak with an ISSS Advisor if any response is "Yes."

Follow the instructions on page 6 depending on whether you answer "Yes" or "No."

You should not need interpreter or attorney assistance for this form. If you need assistance please see an ISSS advisor.

If you indicate "Yes," you may not be eligible for a Change of Status within the U.S. Please speak with an ISSS advisor.
The sections on interpreter and attorney should not need to be filled out. If you require any assistance with this form please consult an ISSS advisor.
Part 7. Contact Information, Certification, and Signature of the Person Preparing this Application, If Other than the Applicant

(continued)

<table>
<thead>
<tr>
<th>Preparer's Contact Information</th>
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<tbody>
<tr>
<td>4. Preparer's Daytime Telephone Number</td>
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<tr>
<td>5. Preparer's Fax Number</td>
</tr>
<tr>
<td>6. Preparer's E-mail Address</td>
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</tbody>
</table>

7.a. [ ] I am not an attorney or accredited representative but have prepared this form on behalf of the applicant and with the applicant's consent.

7.b. [ ] I am an attorney or accredited representative and my representation of the applicant in this case (choose one) extends [ ] does not extend [ ] beyond the preparation of this form.

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<tr>
<th>Preparer's Certification</th>
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By my signature, I certify, swear or affirm, under penalty of perjury, that I prepared this form on behalf of, at the request of, and with the express consent of the applicant. I completed this form based on responses from the applicant provided to me. After completing the form, I reviewed it and all of the applicant's responses with the applicant, who agreed with every answer on the form. If the applicant supplied additional information concerning a question on the form, I recorded it on the form.

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy) ➤
Part 4. (continued) Additional Information for Answers to Item Numbers 18, 19, and 20.

If you answered "Yes!" to Item Number 18 in Part 4 of this form, give the following information concerning the removal proceedings. Include the name of the person in removal proceedings and information on jurisdiction, date proceedings began, and status of proceedings.

1. 

If you answered "Yes!" to Item Number 19, in Part 4, of this form, fully describe the employment. Include the name of the person employed, name and address of the employer, weekly income, and whether the employment was specifically authorized by USCIS.

3. Include information on any graduate assistantships, on-campus employment, CPT, OPT, etc.

4. If you answered "Yes!" to Item Number 20, in Part 4 of this form, list the name and dates of the person or persons who maintained status as a J-1 exchange visitor or J-2 dependent.
This section is needed only if you are including a spouse and/or children applying for F-2 or J-2 status.

### Person One

1. a. Family Name (Last Name)
1. b. Given Name (First Name)
1. c. Middle Name
1. d. Date of Birth (mm/dd/yyyy)
1. e. Country of Birth
1. f. Country of Citizenship or Nationality
1. g. U.S. Social Security Number (if any)
1. h. Alien Registration Number (A-Number)
1. i. Date of Arrival (mm/dd/yyyy)
1. j. I-94 Arrival/Departure Record Number
1. k. Passport Number
1. l. Travel Document Number
1. m. Country of Issuance for Passport or Travel Document
1. n. Expiration Date for Passport or Travel Document (mm/dd/yyyy)
1. o. Current Nonimmigrant Status
1. p. Expiration Date (mm/dd/yyyy)

### Person Two

2. a. Family Name (Last Name)
2. b. Given Name (First Name)
2. c. Middle Name
2. d. Date of Birth (mm/dd/yyyy)
2. e. Country of Birth
2. f. Country of Citizenship or Nationality
2. g. U.S. Social Security Number (if any)
2. h. Alien Registration Number (A-Number)
2. i. Date of Arrival (mm/dd/yyyy)
2. j. I-94 Arrival/Departure Record Number
2. k. Passport Number
2. l. Travel Document Number
2. m. Country of Issuance for Passport or Travel Document
2. n. Expiration Date for Passport or Travel Document (mm/dd/yyyy)
2. o. Current Nonimmigrant Status
2. p. Expiration Date (mm/dd/yyyy)