



H Classification Supplement to Form I-129

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-129
OMB No. 1615-0009
Expires 12/31/2027

1. Name of the Petitioner

Name of the beneficiary or if this petition includes multiple beneficiaries, the total number of beneficiaries

- 2.a. Name of the Beneficiary

OR

- 2.b. Provide the total number of beneficiaries

3. List each beneficiary's prior periods of stay in H or L classification in the United States for the last six years (beneficiaries requesting H-2A or H-2B classification need only list the last three years). Be sure to only list those periods in which each beneficiary was actually in the United States in an H or L classification. Do not include periods in which the beneficiary was in a dependent status, for example, H-4 or L-2 status.

NOTE: Submit photocopies of Forms I-94, I-797, and/or other USCIS issued documents noting these periods of stay in the H or L classification. (If more space is needed, attach an additional sheet.)

Subject's Name	Period of Stay (mm/dd/yyyy)	
	From	To

4. Classification sought (select **only one** box):

- ☐ a. H-1B Specialty Occupation
- ☐ b. H-1B1 Chile and Singapore
- ☐ c. H-1B2 Exceptional services relating to a cooperative research and development project administered by the U.S. Department of Defense (DOD)
- ☐ d. H-1B3 Fashion model of distinguished merit and ability
- ☐ e. H-2A Agricultural worker
- ☐ f. H-2B Non-agricultural worker
- ☐ g. H-3 Trainee
- ☐ h. H-3 Special education exchange visitor program

5. If you selected **a.** or **d.** in **Item Number 4.**, and are filing an H-1B cap petition (including a petition under the U.S. advanced degree exemption):

- a. Provide the beneficiary Confirmation Number from the H-1B Registration Selection Notice for the beneficiary named in this petition (if applicable).

Confirmation Number