

Part 1. Petitioner Information (continued)

- 7.** Individual IRS Tax Number **8.** U.S. Social Security Number (if any)

Part 2. Information About This Petition

1. Requested Nonimmigrant Classification (Write classification symbol):

2. **Basis for Classification** (select **only one** box):

☐ a. New employment.

☐ b. Continuation of previously approved employment without change with the same employer.

☐ c. Change in previously approved employment.

☐ d. New concurrent employment.

☐ e. Change of employer.

☐ f. Amended petition.

3. **Provide the most recent petition/application receipt number for the beneficiary. If none exists, indicate "None."** ▶

4. **Requested Action** (select **only one** box):

☐ a. Notify the office in **Part 4.** so each beneficiary can obtain a visa or be admitted. (**NOTE:** A petition is not required for E-1, E-2, E-3, H-1B1 Chile/Singapore, or TN visa beneficiaries.)

☐ b. Change the status and extend the stay of each beneficiary because the beneficiary(ies) is/are now in the United States in another status (see instructions for limitations). This is available only when you check "New Employment" in **Item Number 2.**, above.

☐ c. Extend the stay of each beneficiary because the beneficiary(ies) now hold(s) this status.

☐ d. Amend the stay of each beneficiary because the beneficiary(ies) now hold(s) this status and is/are not seeking additional time from their current authorized period of stay.

☐ e. Extend the status of a nonimmigrant classification based on a free trade agreement. (See Trade Agreement Supplement to Form I-129 for TN and H-1B1.)

☐ f. Change status to a nonimmigrant classification based on a free trade agreement. (See Trade Agreement Supplement to Form I-129 for TN and H-1B1.)

5. **Total number of workers included in this petition.** (See instructions relating to when more than one worker can be included.) ▶

Part 3. Beneficiary Information (Information about the beneficiary/beneficiaries you are filing for. Complete the blocks below. Use the Attachment-1 sheet to name each beneficiary included in this petition.)

- 1. Type of Beneficiaries Requested (select **only one** box)** ☐ Named ☐ Unnamed (for H-2A or H-2B petitions only)

2. **If an Entertainment Group, Provide the Group Name**

- 3. Provide Name of Beneficiary**

| Family Name (Last Name) | Given Name (First Name) | Middle Name |
|-------------------------|-------------------------|-------------|
| | | |