

Verification Request

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form G-845

OMB No. 1615-0101 Expires 05/31/2021

► START HERE - Type or print in black ink.

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Part 1. Information From the Registered Agency	3. Case Verification Number
NOTE: Only the Registered Agency should complete this information.	4. Date of Birth (mm/dd/yyyy)
To: U.S. Citizenship and Immigration Services (USCIS)	5. Social Security Number
Attn: USCIS SAVE Program Status Verification Office	5. Social Security Number
	6. Student and Exchange Visitor Information System (SEVIS) Number
	7. Citizenship or Nationality
Stamp, type, or print the name, address, and ZIP Code of the Registered Agency. (Print clearly since USCIS may use agency address below with a No. 10 window envelope.) From:	Documents Attached (Select all that apply) 8.a. Photocopy of most recently issued immigration document attached. Ensure copies are legible and made from an original document. If the immigration document is printed on both sides, attach a copy of the front and back.
	8.b. Other Information Attached (Specify Documents)
Applicant Information	Benefits Sought
Immigration Document Number	9.a. Background Check
1.a. Alien Registration Number (A-Number)	9.b. Driver's License/ID
A- ►	9.c. Education Grant/Loan/Work Study
1.b. Form I-94 Number (Arrival-Departure Record)	9.d. Employment Authorization
	9.e. Food Stamps
1.c. Other Immigration Number	9.f. Housing Assistance
	9.g. Medicaid/Medical Assistance
1.d. Name or Form Number of Document Containing the	9.h. Social Security Number
Other Immigration Number	9.i. SSI or RSDI
	9.j. TANF
Applicant's Full Name as Shown on the Immigration	9.k. Unemployment Insurance
Document	9.l. Other (Specify)
2.a. Last Name	
2.b. First Name	
2.c. Middle Name	

Applicant's Last Name Applicant's Firs	st Name Case Verification Number
Part 1. Information From the Registered Agenc	Part 2. USCIS Responses
continued)	NOTE: Only USCIS should complete this information.
Registered Agency Information	Upon review of these documents, information submitted, and
0. Registered Agency Case Number	our records, we find the following for the applicant:
	 Lawful Permanent Resident of the United States Conditional Permanent Resident of the United
ull Name of Agency Official	States
1.a. Last Name	3. Applicant is employment authorized in the United States as indicated:
1.b. First Name	No Expiration Date (Indefinite)
2. Title of Agency Official	Expiration Date
3 3, 4	(mm/dd/yyyy)
3.a. Daytime Telephone Number (Include Area Code)	Previous Employment Authorization Dates
	Start Date (mm/dd/yyyy) End Date (mm/dd/yyyy)
3.b. Extension Number (if applicable)	
4. Fax Number (if any) (Include Area Code)	
5. Date Request Completed	4. Applicant is not employment authorized in the United States
(mm/dd/yyyy)	5. Applicant has an application pending for the following USCIS benefit:
Registered Agency Comments (if any)	
	6. Applicant was granted asylum or refugee status in the United States
	7. Applicant was paroled into the United States under section 212 of the Immigration and Nationality Act (INA).
	No Expiration Date (Indefinite)
	Parole Granted Date
	(mm/dd/yyyy)
	Parole Expiration Date
	(mm/dd/yyyy)
	8. Conditional entrant of the United States
	9. Nonimmigrant (Specify type or class and expiration date)
	Type or Class
	Expiration Date (mm/dd/yyyy)
	10. U.S. Citizen

Applicant's Last Name Applicant's First N		Applicant's First Name	Case Verification Number	
Pai	rt 2. USCIS Responses (continu	ed) 3.		
11.	Cuban/Haitian entrant of the Un	nited States	sides of the applicant's immigration document. Attach copies (front and back) of the applicant's most	
12.	American Indian born in Canada provisions of INA 289 apply.	to whom the	recently issued immigration document and submit a new request.	
	Date Status Recognized (mm/dd/yyyy)	4.	Copy provided of applicant's immigration document is illegible. Submit a new request with legible documents.	
13.	Mexican Born Member of the To Band of Kickapoo Indians	exas or Oklahoma 5.	provided. If this is the applicant's most recently	
	a. I-872 Issuance Date: (mm/dd/yyyy)		issued immigration document, refer the applicant to the document issuing authority.	
	COA (KIC or KIP)	6.	• Other	
	b. Other foreign born Amer of Entry:	rican Indian Date		
	(mm/dd/yyyy)			
	COA			
14.	Deferred Action for Childhood	Arrivals (DACA)		
15.	Temporary Protected Status (T			
16.	☐ Deferred Action Status	,		
17.	☐ VAWA Self-Petitioner			
	a. Pending prima facie VA	WA self-petition		
	b. Approved VAWA self-p			
18.	Withholding of Removal			
19.	USCIS is searching indices for fu	rther information		
20.	This document is not valid becau (Select all that apply)			
	a. Expired	L		
	b. Altered		USCIS Stamp	
	c. Counterfeit			
	c counterfeit			
Pai	rt 3. USCIS Comments			
	ΓΕ: Only USCIS should complete this	s information.		
1.	Unable to process request without			
1.	of disclosure statement signed by Resubmit request.			
2.	No determination can be made be information was submitted. Obta applicant's most recently issued in document. Submit a new request.	in a copy of the nmigration		

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