



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

USCIS
Form G-845
OMB No. 1615-0101
Expires 08/31/2028

► **START HERE - Type or print in black ink.**

Part 1. Information From the Registered Agency

NOTE: Only the Registered Agency should complete this information.

To: U.S. Citizenship and Immigration Services (USCIS)

Attn: USCIS SAVE Program Status Verification Office

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:

Applicant Information

Immigration Document Number

- | | |
|--|---|
| <p>1. Alien Registration Number (A-Number)</p> <p>A- ► <table border="1" style="display: inline-table; width: 150px; height: 15px;"></table></p> <p>3. Other Immigration Number</p> <table border="1" style="width: 150px; height: 15px;"></table> | <p>2. Form I-94 Number (Arrival-Departure Record)</p> <p>► <table border="1" style="display: inline-table; width: 150px; height: 15px;"></table></p> <p>4. Name or Form Number of Document Containing the Other Immigration Number</p> <table border="1" style="width: 150px; height: 15px;"></table> |
|--|---|

Applicant's Full Name as Shown on the Immigration Document

- | | | |
|--|--|---|
| <p>5. Last Name</p> <table border="1" style="width: 150px; height: 15px;"></table> | <p>First Name</p> <table border="1" style="width: 150px; height: 15px;"></table> | <p>Middle Name</p> <table border="1" style="width: 150px; height: 15px;"></table> |
|--|--|---|
6. Case Verification Number
-
- | | |
|---|---|
| <p>7. Date of Birth (mm/dd/yyyy)</p> <table border="1" style="width: 100px; height: 15px;"></table> | <p>8. Social Security Number</p> <p>► <table border="1" style="display: inline-table; width: 100px; height: 15px;"></table></p> |
|---|---|
9. Student and Exchange Visitor Information System (SEVIS) Number
-
10. Citizenship or Nationality
-

Applicant's Last Name

Applicant's First Name

Case Verification Number

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Part 1. Information From the Registered Agency (continued)

Documents Attached (Select all that apply)

11.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.

11.b. ☐ Other Information Attached (Specify Documents)

Benefits Sought

12.a. ☐ Background Check

12.b. ☐ Driver's License/ID

12.c. ☐ Education Grant/Loan/Work Study

12.d. ☐ Employment Authorization

12.e. ☐ Food Stamps

12.f. ☐ Housing Assistance

12.g. ☐ Medicaid/Medical Assistance

12.h. ☐ Social Security Number

12.i. ☐ SSI or RSDI

12.j. ☐ TANF

12.k. ☐ Unemployment Insurance

12.l. ☐ Other (Specify)

Registered Agency Information

13. Registered Agency Case Number

Full Name of Agency Official

14. Last Name

First Name

15. Title of Agency Official

16.a. Daytime Telephone Number (Include Area Code)

16.b. Extension Number (if applicable)

17. Fax Number (if any) (Include Area Code)

18. Date Request Completed (mm/dd/yyyy)

19. Registered Agency Reason for Requesting Additional Verification (required)

☐ Expected a different immigration status:

☐ Date information is needed:

☐ EAD Date

☐ Grant Date

☐ Date admitted To

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[illegible]

Part 1. Information From the Registered Agency (continued)	
1. Name of the registered agency	2. State of registration
3. Date of registration	4. Date of expiration
5. Name of the registered agent	6. Address of the registered agent
7. Name of the registered agent	8. Address of the registered agent
9. Name of the registered agent	10. Address of the registered agent
11. Name of the registered agent	12. Address of the registered agent
13. Name of the registered agent	14. Address of the registered agent
15. Name of the registered agent	16. Address of the registered agent
17. Name of the registered agent	18. Address of the registered agent
19. Name of the registered agent	20. Address of the registered agent
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91. Name of the registered agent	92. Address of the registered agent
93. Name of the registered agent	94. Address of the registered agent
95. Name of the registered agent	96. Address of the registered agent
97. Name of the registered agent	98. Address of the registered agent
99. Name of the registered agent	100. Address of the registered agent

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Part 2. USCIS Responses

NOTE: Only USCIS should complete this information.

Upon review of these documents, information submitted, and our records, we find the following for the applicant:

1. ☐ **Lawful Permanent Resident** of the United States
2. ☐ **Conditional Permanent Resident** of the United States
3. ☐ Applicant is **employment authorized** in the United States as indicated:

☐ No Expiration Date (Indefinite)

☐ Expiration Date (mm/dd/yyyy)

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☐ Previous Employment Authorization Dates

Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)

4. ☐ Applicant is **not employment authorized** in the United States

5. ☐ Applicant has an **application pending** for the following USCIS benefit:

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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

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Expiration Date (mm/dd/yyyy)

10. ☐ U.S. Citizen

- 11. ☐ Cuban/Haitian entrant** of the United States

12. ☐ **American Indian** born in Canada to whom the provisions of INA 289 apply.

Date Status Recognized (mm/dd/yyyy)

Applicant's Last Name

Applicant's First Name

Case Verification Number

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Part 2. USCIS Responses (continued)

13. ☐ **Mexican Born Member** of the Texas or Oklahoma Band of **Kickapoo Indians**

☐ I-872 Issuance Date: (mm/dd/yyyy)

COA (KIC or KIP)

☐ Other foreign born American Indian Date of Entry: COA
(mm/dd/yyyy)

14. ☐ **Deferred Action for Childhood Arrivals (DACA)**

15. ☐ **Temporary Protected Status (TPS)**

16. ☐ **Deferred Action Status**

17. ☐ **VAWA Self-Petitioner**

☐ Pending prima facie VAWA self-petition ☐ Approved VAWA self-petition

18. ☐ **Withholding of Removal**

19. ☐ USCIS is searching indices for further information

20. ☐ This document is **not valid** because it appears to be: (Select all that apply)

☐ Expired ☐ Altered ☐ Counterfeit

Part 3. USCIS Comments

NOTE: Only USCIS should complete this information.

1. ☐ Unable to process request without an original consent of disclosure statement signed by the applicant. Resubmit request.
2. ☐ No determination can be made because insufficient information was submitted. Obtain a copy of the applicant's most recently issued immigration document. Submit a new request.
3. ☐ No determination can be made without seeing both sides of the applicant's immigration document. Attach copies (front and back) of the applicant's most recently issued immigration document and submit a new request.
4. ☐ Copy provided of applicant's immigration document is illegible. Submit a new request with legible documents.
5. ☐ Unable to verify status based on the document provided. If this is the applicant's most recently issued immigration document, refer the applicant to the document issuing authority.
6. ☐ Other

USCIS Stamp