



# Trade Agreement Supplement to Form I-129

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

USCIS  
Form I-129  
OMB No. 1615-0009  
Expires 01/31/2022

1. Name of the Petitioner

2. Name of the Beneficiary

3. Employer is a (select **only one** box):

☐ U.S. Employer ☐ Foreign Employer

4. If Foreign Employer, Name the Foreign Country

## Section 1. Information About Requested Extension or Change (See instructions attached to this form.)

1. This is a request for Free Trade status based on (select **only one** box):

☐ a. Free Trade, Canada (TN1)

☐ b. Free Trade, Mexico (TN2)

☐ c. Free Trade, Chile (H-1B1)

☐ d. Free Trade, Singapore (H-1B1)

☐ e. Free Trade, Other

☐ f. A sixth consecutive request for Free Trade, Chile or Singapore (H-1B1)

## Section 2. Petitioner's Declaration, Signature, and Contact Information (Read the information on penalties in the instructions before completing this section.)

Copies of any documents submitted are exact photocopies of unaltered, original documents, and I understand that, as the petitioner, I may be required to submit original documents to U.S. Citizenship and Immigration Services (USCIS) at a later date.

I authorize the release of any information from my records, or from the petitioning organization's records that USCIS needs to determine eligibility for the immigration benefit sought. I recognize the authority of USCIS to conduct audits of this petition using publicly available open source information. I also recognize that any supporting evidence submitted in support of this petition may be verified by USCIS through any means determined appropriate by USCIS, including but not limited to, on-site compliance reviews.

I certify, under penalty of perjury, that I have reviewed this petition and that all of the information contained on the petition, including all responses to specific questions, and in the supporting documents, is complete, true, and correct.

I am filing this petition on behalf of an organization and I certify that I am authorized to do so by the organization.

1. Name of Petitioner

Family Name (Last Name)

Given Name (First Name)

2. Signature and Date

Signature of Petitioner



Date of Signature

(mm/dd/yyyy)

3. Petitioner's Contact Information

Daytime Telephone Number

Mobile Telephone Number

Email Address (if any)

### Section 3. Declaration, Signature, and Contact Information of Person Preparing Form, If Other Than Petitioner

Provide the following information concerning the preparer:

**1. Name of Preparer**

Family Name (Last Name)

Given Name (First Name)

**2. Preparer's Business or Organization Name (if any)**

(If applicable, provide the name of your accredited organization recognized by the Board of Immigration Appeals (BIA)).

**3. Preparer's Mailing Address**

Street Number and Name

Apt. Ste. Flr.

☐ ☐ ☐

Number

City or Town

State

ZIP Code

Province

Postal Code

Country

**4. Preparer's Contact Information**

Daytime Telephone Number

Fax Number

Email Address (if any)

### *Preparer's Declaration*

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this petition on behalf of, at the request of, and with the express consent of the petitioner or authorized signatory. The petitioner has reviewed this completed petition as prepared by me and informed me that all of the information in the form and in the supporting documents, is complete, true, and correct.

**5. Signature and Date**

Signature of Preparer

Date of Signature

(mm/dd/yyyy)