

Petition for U Nonimmigrant Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-918 OMB No. 1615-0104 Expires 02/28/2026

	Remarks		Receipt				Action Block	
For USCI Use Only	S	Volidity Dates (v	om/dd/(ggr)) W /si					
	U.S. Embassy	Validity Dates (r		t Listed				
	Consulate	To:/		mp Number	Date (mr	n/dd/yyyy)		
attor	e completed being or accrecesentative (if	lited For	ct this box if m G-28 is ched.	Attorney (if applica		ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)	
► S	TART HERE	- Type or print	in black or blue	ink.				
		tion About Y	ou (Person fil	ing this	Saf	e Mailing A	Address (if other than Home Address)	
-	on as a victi	m)			4.a.	In Care Of N	Name	
	Family Name (Last Name)							
	Given Name (First Name)				4.b.	Street Numb and Name	er	
1.c.	Middle Name				4.c.	Apt.	Ste. Flr.	
2.a. 2.b. 6	Names Used , if applicable) Family Name (Last Name) Given Name (First Name)	(Include maiden 1	name, nicknames,	, and	4.e. 4.g.	City or Tow State Province Postal Code	4.f. ZIP Code	
2.c.	Middle Name				4.i.	Country		
Hom	e Address		(USPS ZIP Cod	de Lookup)				
	Street Number and Name				Oth	er Informa	tion	
3.b. [Ste. Flr.			5.	Alien Regis	ration Number (A-Number) (if any)	
3.c. (City or Town						► A-	
3.d. S	State	3.e. ZIP Code	2		6.	U.S. Social	Security Number (if any)	
3.f.	Province				7.	USCIS Onli	ne Account Number (if any)	
3.g.]	Postal Code						>	
_	Country				8.	Marital Stat	us	
						Single	☐ Married ☐ Divorced ☐ Widowed	

Par	rt 1. Information About You (continued)		ided in Part 8. Additional Informati	
9.	Sex Male Female		ct "Yes" or "No," as appropriate, for eations.	ach of the following
10.11.	Date of Birth (mm/dd/yyyy) Country of Birth	1.	I am a victim of criminal activity list section 101(a)(15)(U)(iii).	ed in the INA at Yes No
12.	Country of Citizenship or Nationality	2.	I have suffered substantial physical or result of having been a victim of this	
13.	Form I-94 Arrival-Departure Record Number	3.	I possess information concerning the which I was a victim.	criminal activity of Yes No
14. 15.	Passport Number Travel Document Number	4.	I am submitting Form I-918, Suppler Nonimmigrant Status Certification, f official.	
16.	Country of Issuance for Passport or Travel Document	5.	The crime of which I am a victim occ States (including Indian country and or violated the laws of the United Sta	military installations
17.	Date of Issuance for Passport or Travel Document (mm/dd/yyyy)			Yes No
18.	Expiration Date for Passport or Travel Document (mm/dd/yyyy)	6. 7.a.	I am under 16 years of age. I was or am in immigration proceedi	yes No
Auth	e and Date of Last Entry into the United States and Date norized Stay Expired City or Town	were	u answered "Yes," select the type of pro- e in proceedings in the past and are no lo ide the date of action. If you are curren	onger in proceedings, atly in proceedings,
19.b 20.	. State	appl	or print "Current" in the appropriate da icable boxes. Use the space provided i rmation to provide an explanation.	
	(mm/dd/yyyy) Date Authorized Stay Expired (mm/dd/yyyy)	7.b.	Removal Proceedings Removal Date (mm/dd/yyyy)	
22.	Current Immigration Status	7.c.	Exclusion Proceedings Exclusion Date (mm/dd/yyyy)	
		7.d.	Deportation Proceedings Deportation Date (mm/dd/yyyy)	
	rt 2. Additional Information About You	7.e.	Rescission Proceedings Rescission Date (mm/dd/yyyy)	
expla docu crim (INA	wering "Yes" to the following questions below requires anations and supporting documentation. Attach relevant aments in support of your claims that you are a victim of inal activity listed in the Immigration and Nationality Act (A) section 101(a)(15)(U)(iii). You must also attach a onal narrative statement describing the criminal activity of	7.f.	☐ Judicial Proceedings Judicial Date (mm/dd/yyyy)	

Form I-918.

which you are a victim. If you are only petitioning for U derivative status for qualifying family members subsequent to your (the principal petitioner) initial filing, you are not required to submit evidence supporting the original petition with the new

Part 2. Additional Information About You (continued)	Safe Foreign Address Where You Want Notification Sent (if other than U.S. Consulate, Pre-Flight Inspection, or Port-of-Entry)
Provide the date of entry, place of entry, and status under which you entered the United States for each entry during the five years preceding the filing of this petition.	12.a. Street Number and Name
8.a. Date of Entry (mm/dd/yyyy)	12.b. Apt. Ste. Flr.
Place of Entry into the United States	12.c. City or Town
8.b. City or Town	12.d. Province
8.c. State	12.e. Postal Code
8.d. Status at the Time of Entry (for example, F-1 student, B-2 tourist, entered without inspection)	12.f. Country
	Part 3. Processing Information
9.a. Date of Entry (mm/dd/yyyy) Place of Entry into the United States	Answer the following questions about yourself. For the purposes of this petition, you must answer "Yes" to the following questions, if applicable, even if your records were
9.b. City or Town	sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer
9.c. State	have a record.
9.d. Status at the Time of Entry (for example, F-1 student, B-2 tourist, entered without inspection)	NOTE: If you answer "Yes" to ANY question in Part 3., provide an explanation in the space provided in Part 8. Additional Information.
10.a. Date of Entry (mm/dd/yyyy)	NOTE: Answering "Yes" does not necessarily mean that U.S. Citizenship and Immigration Services (USCIS) will deny your Petition for U Nonimmigrant Status.
Place of Entry into the United States	Have you EVER:
10.b. City or Town 10.c. State	1.a. Committed a crime or offense for which you have not been arrested? Yes No
10.d. Status at the Time of Entry (for example, F-1 student, B-2 tourist, entered without inspection)	1.b. Been arrested, cited, or detained by any law enforcement officer (including Department of Homeland Security (DHS), former Immigration and Naturalization Service (INS), and military officers) for any reason? Yes No
If you are outside of the United States, provide the U.S. Consulate or inspection facility or a safe foreign mailing address you want notified if this petition is approved.	1.c. Been charged with committing any crime or offense? Yes No
11.a. Type of Office (Select only one box): U.S. Consulate Pre-Flight Inspection	1.d. Been convicted of a crime or offense (even if the violation was subsequently expunged or pardoned)?
Port-of-Entry 11.b. City or Town	1.e. Been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)?
11.c. State	Yes No
11.d. Country	

Par	et 3. Processing Information (continued)	паче	e you EVER.	
1.f.	Received a suspended sentence, been placed on probation, or been paroled? Yes No	4.a.	Engaged in, or do you intend to engage in, proprocurement of prostitution?	
1.g.	Been in jail or prison?	4.b.	Engaged in any unlawful commercialized vice but not limited to, illegal gambling? Yes	_
1.h.	Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action? Yes No	4.c.	Knowingly encouraged, induced, assisted, abe aided any alien to try to enter the United State	etted, or es illegally?
1.i.	Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? Yes No	4.d.	Illicitly trafficked in any controlled substance assisted, abetted, or colluded in the illicit trafficontrolled substance?	cking of any
	rmation About Arrests, Citations, Detentions, or Charges			
the q	u answered "Yes" to any of the above questions, respond to uestions below to provide additional details. If you need space, use the space provided in Part 8. Additional rmation.	in, th	e you EVER committed, planned or prepared, pareatened to, attempted to, conspired to commit, mation for, or solicited funds for any of the following the f	, gathered
2.a	Why were you arrested, cited, detained, or charged?	5.a.	Hijacking or sabotage of any conveyance (inclaircraft, vessel, or vehicle)?	
	Date of arrest, citation, detention, or charge (mm/dd/yyyy) re were you arrested, cited, detained, or charged? City or Town	5.b.	Seizing or detaining, and threatening to kill, in continue to detain, another individual in order third person (including a governmental organi do or abstain from doing any act as an explicit condition for the release of the individual seizidetained?	to compel a ization) to t or implicit and or
	State 🔽	5.c.	Assassination? Yes	s 🗌 No
2.d. 2.e.	Country	5.d.	The use of any firearm with intent to endanger indirectly, the safety of one or more individua cause substantial damage to property? Yes	als or to
2.f.	Outcome or disposition (for example, no charges filed, charges dismissed, jail, probation)	5.e.	The use of any biological agent, chemical agent weapon or device, explosive, or other weapon dangerous device, with intent to endanger, directly, the safety of one or more individual cause substantial damage to property?	or rectly or alls or to
3.a	Why were you arrested, cited, detained, or charged?	Have	e you EVER been a member of, solicited money	_
3.b.	Date of arrest, citation, detention, or charge (mm/dd/yyyy)	section beha	provided support for, attended military training (a on 2339D(c)(1) of Title 18, United States Code) If of, or been associated with any other group of a individuals, whether organized or not, which he	by or on two or
	re were you arrested, cited, detained, or charged?	desig	gnated as, or has engaged in or has a subgroup videsignated as, or has engaged in:	
3.c.	City or Town	6.a.	A terrorist organization under section 219 of t	the INA?
3.d.	State		Yes	
3.e.	Country	6.b.	Hijacking or sabotage of any conveyance (inclaircraft, vessel, or vehicle)?	_
3.f.	Outcome or disposition (for example, no charges filed, charges dismissed, jail, probation)			

Par	et 3. Processing Information (continued)	Have you EVER ordered, incited, called for, committed, assisted helped with, or otherwise participated in any of the following:
6.c.	Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to	10.a. Acts involving torture or genocide? Yes No
	do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or	10.b. Killing any person?
	detained?	10.c. Intentionally and severely injuring any person?
6.d.	Assassination? Yes No	Yes No 10.d. Engaging in any kind of sexual conduct or relations with
6.e.	The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause	any person who was being forced or threatened? Yes No
6.f.	substantial damage to property? Yes No The use of any biological agent, chemical agent, nuclear	10.e. Limiting or denying any person's ability to exercise religious beliefs?
•	weapon or device, explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? Yes No	10.f. The persecution of any person because of race, religion, national origin, membership in a particular social group, or political opinion?
6.g.	Soliciting money or members or otherwise providing material support to a terrorist organization?	10.g. Displacing or moving any person from their residence by force, threat of force, compulsion, or duress?
	Yes No	Yes No
Do y 7.a.	ou intend to engage in the United States in: Espionage?	NOTE: If you answered "Yes" to any question in Item Numbers 10.a 10.g., please describe the circumstances in Part 8. Additional Information.
7.b.		11. Have you EVER advocated that another person commit any of the acts described in the preceding question, urged, or encouraged another person, to commit such acts? Yes No
7.c.	Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information? Yes No	Have you EVER been present or nearby when any person was: 12.a. Intentionally killed, tortured, beaten, or injured?
8.	Have you EVER been or do you continue to be a member of the Communist or other totalitarian party, except when membership was involuntary? Yes No	Yes No 12.b. Displaced or moved from his or her residence by force, compulsion, or duress? Yes No
9.	Have you EVER , during the period of March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or	12.c. In any way compelled or forced to engage in any kind of sexual contact or relations? Yes No
	government associated or allied with the Nazi	Have you EVER:
	Government of Germany, ordered, incited, assisted or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group, or political opinion?	13.a. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, or other insurgent organization?
	Yes No	Yes No

Par	t 3. Processing Information (continued)	19.	or deported from the United States? Ves No
13.b.	Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No	20.	Have you EVER been denied a visa or denied admission to the United States? Yes No No
13.c.	Served in, been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons transported, possessed, or used any type of weapon? Yes No	21.	Have you EVER been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time? Yes No
Num	E: If you answered "Yes" to any question in Item bers 13.a 13.c., please describe the circumstances in 8. Additional Information.	22.	Are you NOW under a final order or civil penalty for violating section 274C of the INA (producing and/or using false documentation to unlawfully satisfy a requirement of the INA)? Yes No
Have	you EVER:	23.	Have you EVER , by fraud or willful misrepresentation of
	Received any type of military, paramilitary, or weapons training? Yes No	20.	a material fact, sought to procure or procured a visa or other documentation, for entry into the United States or any immigration benefit? Yes No
14.b.	Been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? Yes No	24.	Have you EVER left the United States to avoid being drafted into the U.S. Armed Forces or U.S. Coast Guard? Yes No
14.c.	Assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person? Yes No	25.	Have you EVER been a J nonimmigrant exchange visitor who was subject to the 2-year foreign residence requirement and not yet complied with that requirement or obtained a waiver of such? Yes No
Num	E: If you answered "Yes" to any question in Item bers 14.a 14.c., please describe the circumstances in 8. Additional Information.	26.	Have you EVER detained, retained, or withheld the custody of a child, having a lawful claim to United States citizenship, outside the United States from a United States citizen granted custody? Yes No
Have	you EVER:	27.	Do you plan to practice polygamy in the United States?
15.a.	Recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group?	27.	Yes No
15 L	Yes No	28.	Have you EVER entered the United States as a stowaway? Yes No
15.0.	Used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat? Yes No	29.a.	Do you NOW have a communicable disease of public health significance?
16.	Are you NOW in removal, exclusion, rescission, or deportation proceedings?	29.b.	Do you NOW have or have you EVER had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or
17.	Have you EVER had removal, exclusion, rescission, or deportation proceedings initiated against you?		welfare of yourself or others? Yes No
	☐ Yes ☐ No	29.c.	Are you NOW or have you EVER been a drug abuser or
18.	Have you EVER been removed, excluded, or deported from the United States?		drug addict? Yes No

	t 4. Information About Your Spous ldren	se and/or	Family Name (Last Name)
If you	need extra space to complete Part 4., use th		Given Name (First Name)
provi	ded in Part 8. Additional Information.	16.c.	Middle Name
1.a.	Family Name (Last Name)	17.	Date of Birth (mm/dd/yyyy)
1.b.	Given Name (First Name)	18.	Country of Birth
1.c.	Middle Name		
2.	Date of Birth (mm/dd/yyyy)	19.	Relationship
	Country of Birth		
		20.	Current Location
4.	Relationship		
		21.a.	Family Name (Last Name)
5.	Current Location	21.b.	Given Name (First Name)
		21.c.	Middle Name
6.a.	Family Name (Last Name)	22.	Date of Birth (mm/dd/yyyy)
6.b.	Given Name (First Name)	23.	Country of Birth
6.c.	Middle Name		
7.	Date of Birth (mm/dd/yyyy)	24.	Relationship
8.	Country of Birth	25.	Current Location
		23.	Current Eocation
9.	Relationship		
		Fili	ng On Behalf of Family Members
10.	Current Location		I am petitioning for one or more qualifying family members.
	Family Name		NOTE: If you answered "Yes" to 26., you must
	(Last Name) Given Name		complete and include Supplement A for each family member for whom you are petitioning.
	(First Name)		
11.c.	Middle Name		
12.	Date of Birth (mm/dd/yyyy)		
13.	Country of Birth		
14.	Relationship		
15.	Current Location		

Part 5. Petitioner's Statement, Contact Information, Declaration, and Signature

NOTE: Read the Penalties section of the Form I-918 Instructions before completing this part.

Th	•			
Petitioner	111	tor	1101	n #
<i>i</i> eiiiionei	Du	ıen	uei	u

Select the box for either 1.a. or 1.b. If applicable, e box for 2.
I can read and understand English, and I have read and understand every question and instruction on this petition and my answer to every question.
The interpreter named in Part 6. read to me every question and instruction on this petition and my answer to every question in
a language in which I am fluent, and I understood everything. At my request, the preparer named in Part 7., prepared this petition for me based only upon information I provided or authorized.
ner's Contact Information
etitioner's Daytime Telephone Number
etitioner's Mobile Telephone Number (if any)

Petitioner's Declaration and Certification

Petitioner's Email Address (if any)

5.

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I further authorize release of information contained in this petition, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I provided or authorized all of the information contained in, and submitted with, my petition;
- 2) I reviewed and understood all of the information in, and submitted with, my petition; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my petition and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my petition, and that all of this information is complete, true, and correct.

Peti	Petitioner's Signature				
6.a.	6.a. Petitioner's Signature				
\Rightarrow					
6.b.	Date of Signature (mm/dd/yyyy)				
fill o	TE TO ALL PETITIONERS: If you do not completely ut this petition or fail to submit required documents listed to Instructions, USCIS may deny your petition.				
is les	E : A parent or legal guardian may sign for a person who s than 14 years of age. A legal guardian may sign for a ally incompetent person.				
	t 6. Interpreter's Contact Information, tification, and Signature				
Prov	Provide the following information about the interpreter.				
Inte	erpreter's Full Name				
1.a.	Interpreter's Family Name (Last Name)				
1.b.	Interpreter's Given Name (First Name)				
2.	Interpreter's Business or Organization Name (if any)				

Part 6. Interpreter's Contact Information, Certification, and Signature (continued)

	tineation, and Signature (continued)				
Inte	Interpreter's Mailing Address				
3.a.	Street Number and Name				
3.b.	Apt. Ste. Flr.				
3.c.	City or Town				
3.d.	State 3.e. ZIP Code				
3.f.	Province				
3.g.	Postal Code				
3.h.	Country				
Inte	rpreter's Contact Information				
4.	Interpreter's Daytime Telephone Number				
5.	Interpreter's Mobile Telephone Number (if any)				
6.	Interpreter's Email Address (if any)				
Inte	erpreter's Certification				
I cert	ify, under penalty of perjury, that:				
I am	fluent in English and				
which is the same language specified in Part 5. , 1.b. , and I have read to this petitioner in the identified language every question and instruction on this petition and his or her answer to every question. The petitioner informed me that he or she understands every instruction, question, and answer on the petition, including the Petitioner's Declaration and Certification , and has verified the accuracy of every answer.					
Inte	rpreter's Signature				
7.a.	Interpreter's Signature (sign in ink)				
7.b.	Date of Signature (mm/dd/yyyy)				

Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner

Provide the following information about the preparer.

Pre	parer's Full Name		
1.a.	Preparer's Family Name (Last Name)		
1.b.	Preparer's Given Name (First Name)		
2.	Preparer's Business or Organization Name (if any)		
Pre	parer's Mailing Address		
3.a.	Street Number and Name		
3.b.	Apt. Ste. Flr.		
3.c.	City or Town		
3.d.	State 3.e. ZIP Code		
3.f.	Province		
3.g.	Postal Code		
3.h.	Country		
Pre	parer's Contact Information		
4.	Preparer's Daytime Telephone Number		
5.	Preparer's Mobile Telephone Number (if any)		
6.	Preparer's Email Address (if any)		

Prep	parer's Statement						
7.a. [I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent.						
7.b. [I am an attorney or accredited representative and my representation of the petitioner in this case ☐ extends ☐ does not extend beyond the preparation of this petition.						
	NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this petition, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this petition.						
Preparer's Certification							
prepare petition me the in, an Petiti information petition petit	by signature, I certify, under penalty of perjury, that I ared this petition at the request of the petitioner. The coner then reviewed this completed petition and informed that he or she understands all of the information contained at submitted with, his or her petition, including the sioner's Declaration and Certification, and that all of this mation is complete, true, and correct. I completed this on based only on information that the petitioner provided to or authorized me to obtain or use.						
Prep	varer's Signature						
8.a.	Preparer's Signature (sign in ink)						
8.b.	Date of Signature (mm/dd/yyyy)						

Part 8. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
If you need extra space to provide any additional information within this petition, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this petition or attach a separate sheet of paper. Include your name and A-Number (if any) at the top of each sheet; indicate the Page Number , Part Number , and attem Number to which your answer refers; and sign and date each sheet.	5.d.					
La. Family Name (Last Name)						
(First Name)						
I.c. Middle Name						
2. A-Number (if any) ► A-						
3.a. Page Number 3.b. Part Number 3.c. Item Number	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
3.d.	6.d.					
1.a. Page Number 4.b. Part Number 4.c. Item Number	7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
1.d.	7.d.					