

**I-129S, Nonimmigrant Petition
Based on Blanket L Petition****Purpose of This Form.**

This form is for an employer to classify employees as L-1 nonimmigrant intercompany transferees under a blanket L petition approval.

Who May File.

An employer who has already obtained approval of a blanket L-1 petition may file this form to classify employees outside the United States as executives, managers or specialized knowledge professionals. If the employee is in the United States and you are requesting a change of status or extension of stay for that employee, use Form I-129, Petition for a Nonimmigrant Worker.

General Filing Instructions.

Please answer all questions by typing or clearly printing in black ink. Indicate that an item is not applicable with "N/A." If the answer is "none," write "none." If you need extra space to insert any item, attach a sheet of paper with your name and alien registration number (A#), if any, and indicate the number of the item to which the answer related. You must file your petition with the required **Initial Evidence**. Your petition must be properly signed. Retain a copy of the form and supporting documents for your records.

Translations. Any foreign language document must be accompanied by a full English translation that a translator has certified as complete and correct. The translator must also certify that he or she is competent to translate the foreign language into English.

Copies. If these instructions state that a copy of a document may be filed with this petition, and you choose to send us the original, we may keep that original for our records.

Initial Evidence.

You must file your petition with:

- a copy of the approval notice for the blanket petition;
- a letter from the alien's foreign qualifying employer detailing his or her dates of employment, job duties, qualifications and salary; the letter must also show that the alien worked for the employer for at least one continuous year in the three-year period preceding the filing of the petition in an executive, managerial or specialized knowledge professional capacity; and
- if the alien is a specialized knowledge professional, a copy of a U.S. degree, a foreign degree equivalent to a U.S. degree, or evidence establishing that the combination of the beneficiary's education and experience is the equivalent of a U.S. degree.

Where to File.

If the alien requires a visa, he or she should present the completed petition at a U.S. embassy or consulate abroad.

If the alien is not required to obtain a visa, he or she should file this petition at the Service Center of the Bureau of Citizenship and Immigration Services (BCIS) that approved the blanket petition. The BCIS is comprised of offices of the former Immigration and Naturalization Service.

Fee.

There is no fee for this petition.

Processing Information.

Acceptance. A petition that is not signed will be rejected with a notice that the petition is deficient. You may correct the deficiency and resubmit the petition. However, a petition is not considered properly filed until it is accepted by the BCIS.

Initial processing. Once the petition has been accepted, it will be checked for completeness, including submission of the required initial evidence. If you do not completely fill out the form or file it without required initial evidence, you will not establish a basis for eligibility and we may deny your petition.

Requests for more information or interview. We may request more information or evidence or we may request that you appear at a BCIS office for an interview. We may also request that you submit the original of any copy. We will return these originals when they are not longer required.

Decision. You will be notified in writing of the decision on your petition. If you filed the petition at a BCIS service center and it is approved, the approval notice will be sent to you so you can send it to the beneficiary to present at a port of entry when he or she enters the United States.

Penalties.

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are seeking and may deny any other immigration benefit. In addition, you will face severe penalties provided by law and you may be subject to criminal prosecution.

Privacy Act Notice.

We ask for the information on this form and associated evidence to determine if you have established eligibility for the immigration benefit you are seeking. Our legal right to ask for this information is in 8 USC 1154. We may provide this information to other government agencies. Failure to provide this information and any requested evidence may delay a final decision or result in denial of

Information and BCIS Forms.

For information on immigration laws, regulations and procedures and to order BCIS forms, call our **National Customer Service Center** toll-free at **1-800-375-5283** or visit our internet web site at **www.bcis.gov**.

Paperwork Reduction Act Notice.

A person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood and that impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this application is as follows: (1) 10 minutes to learn about the law and form; (2) 10 minutes to complete the form; and (3) 15 minutes to assemble and file the petition; for a total estimated average of 35 minutes per petition. If you have comments regarding the accuracy of this estimate or suggestions for making this form simpler, you can write to: Bureau of Citizenship and Immigration Services, HQRF5, 425 I Street, N.W., Room 4034, Washington, DC 20536; OMB No. 1615-0010. **DO NOT MAIL YOUR COMPLETED APPLICATION TO THIS ADDRESS.**

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

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START HERE - Please Type or Print

FOR BCIS USE ONLY

Part 1. Information about employer.

Sponsoring Company of Organization's Name

Address - ATTN:

Street Number and Name

Room/Suite #

City or Town

State or Province

Country

Zip/Postal Code

Part 2. Information about employment.

This alien will be a:

a. manager/executive

b. specialized knowledge professional

Blanket petition approval number:

Part 3. Information about employee.

Family Name

Given Name

Middle Name

Foreign Address: Street Number and Name

Apt. #

City or Town

State or Province

Country

Zip/Postal Code

Date of Birth (mm/dd/yyyy)

Country of Birth

Country of Citizenship

Part 4. Additional information about the employment.

Address: Street Number and Name

Room/Suite #

City or Town

State or Province

Country

Zip/Postal Code

Date of intended employment (mm/dd/yyyy):

From:

To:

Weekly Wage

Hours Per Week

\$

\$

Title and detailed description of duties to be performed

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	
<input type="checkbox"/> Petitioner Interviewed on _____	
<input type="checkbox"/> Beneficiary Interviewed on _____	

Approved as:

manager/executive

specialized knowledge

Validity Dates:

From: _____

To: _____

Denied (give reason)

Action Block

To Be Completed By
Attorney or Representative, if any.

Fill in box if G-28 is attached to represent the petition.

ATTY State License #

Part 4. Information about employer. (Continued)

Give the alien's dates of prior periods of stay in the United States in a work authorized capacity and the type of visa.

Give the alien's dates of employment and job duties for the immediate prior three years.

Summarize the alien's education and other work experience.

Part 8. Signature. *Read the information on penalties in the instructions before completing this section.*

I certify, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it are all true and correct. I am filing this on behalf of an organization, and I certify that I am empowered to do so by that organization. If this petition is to extend a prior petition, I certify that the proposed employment is under the same terms and conditions as in the prior approved petition. I authorize the release of any information from my records, or from the petitioning organizations records that the Bureau of Citizenship and Immigration Services needs to determine eligibility for the benefit being sought.

Signature

Date (mm/dd/yyyy)

Daytime Telephone Number (with area code)

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Please Note: *If you do not completely fill out this form or fail to submit required documents listed in the instructions, the person(s) petitioned for may not be found eligible for the requested benefit and this petition may be denied.*

Part 9. Signature of person preparing form if other than above. (Sign below.)

I declare that I prepared this application at the request of the applicant and it is based on all information of which I have knowledge.

Signature

Print or Type Your Name

Fax Number (if any)

Date (mm/dd/yyyy)

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Firm Name and Address

Daytime Telephone Number (with area code)

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