

## Supplement B, U Nonimmigrant Status Certification

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

Remarks				
For USCIS				
Use Only				
<ul> <li>START HERE - Type or print in black or blue ink.</li> </ul>				
Part 1. Victim Information	Name of Head of Certifying Agency			
1. Alien Registration Number (A-Number) (if any)	<b>4.a.</b> Family Name (Last Name)			
► A-	4.b. Given Name (First Name)			
2.a. Family Name (Last Name)	4.c. Middle Name			
2.b. Given Name (First Name)	A a an an A d durage			
2.c. Middle Name	Agency Address			
Other Names Used (Include maiden names, nicknames, and	5.a. Street Number and Name			
aliases, if applicable.)	<b>5.b.</b> Apt. Ste. Flr.			
If you need extra space to provide additional names, use the space provided in <b>Part 7. Additional Information</b> .	5.c. City or Town			
3.a. Family Name (Last Name)	5.d. State 5.f. ZIP Code			
<b>3.b.</b> Given Name (First Name)	5.g. Province			
3.c. Middle Name	5.h. Postal Code			
4. Date of Birth (mm/dd/yyyy)	5.i. Country			
5. Gender Male Female				
	Other Agency Information			
Part 2. Agency Information	6. Agency Type			
1. Name of Certifying Agency	Federal State Local			
	7. Case Status			
Name of Certifying Official	On-going Completed			
2.a. Family Name (Last Name)	Other			
<b>2.b.</b> Given Name	<ul> <li>8. Certifying Agency Category</li> <li>Judge Law Enforcement Prosecutor</li> </ul>			
(First Name) 2.c. Middle Name	Judge Law Enforcement Prosecutor			
3. Title and Division/Office of Certifying Official	9. Case Number			
	<b>10.</b> FBI Number or SID Number (if applicable)			

### Part 3. Criminal Acts

If you need extra space to complete this section, use the space provided in Part 7. Additional Information.

1. The petitioner is a victim of criminal activity involving a violation of one of the following Federal, state, or local criminal offenses (or any similar activity). (Select all **applicable** boxes)

Abduction	Manslaughter
Abusive Sexual Contact	Murder
Attempt to Commit Any of the Named	<ul><li>Obstruction of Justice</li><li>Peonage</li></ul>
Crimes Being Held Hostage Blackmail Conspiracy to Commit Any of the Named Crimes Domestic Violence	<ul> <li>Perjury</li> <li>Prostitution</li> <li>Rape</li> <li>Sexual Assault</li> <li>Sexual Exploitation</li> <li>Slave Trade</li> </ul>
<ul> <li>Extortion</li> <li>False Imprisonment</li> <li>Felonious Assault</li> </ul>	Solicitation to Commit Any of the Named Crimes
<ul> <li>Female Genital Mutilation</li> <li>Fraud in Foreign Labor Contracting</li> <li>Incest</li> </ul>	<ul> <li>Stalking</li> <li>Torture</li> <li>Trafficking</li> <li>Unlawful Criminal Restraint</li> </ul>
<ul><li>Involuntary Servitude</li><li>Kidnapping</li></ul>	Witness Tampering

Provide the dates on which the criminal activity occurred.

- **2.a.** Date (mm/dd/yyyy) **2.b.** Date (mm/dd/yyyy) **2.c.** Date (mm/dd/yyyy) **2.d.** Date (mm/dd/yyyy)
- List the statutory citations for the criminal activity being 3. investigated or prosecuted, or that was investigated or prosecuted.

<b>4.a.</b>	Did the criminal activity occur in the United States (including Indian country and military installations) or the territories or possessions of the United States?				
	Yes No				
4.b.	If you answered "Yes," where did the criminal activity occur?				
5.a.	Did the criminal activity violate a Federal extraterritorial				
	jurisdiction statute?				
5.b.	If you answered "Yes," provide the statutory citation providing the authority for extraterritorial jurisdiction.				
6.	Briefly describe the criminal activity being investigated and/or prosecuted and the involvement of the petitioner named in <b>Part 1.</b> Attach copies of all relevant reports and findings.				
7.	Provide a description of any known or documented injury to the victim. Attach copies of all relevant reports and findings.				

Part 4.	Helpfulness	Of The	Victim
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For the following questions, if the victim is under 16 years of age, incompetent or incapacitated, then a parent, guardian, or next friend may act on behalf of the victim.

- 1. Does the victim possess information concerning the criminal activity listed in **Part 3**.? Yes No
- **2.** Has the victim been helpful, is the victim being helpful, or is the victim likely to be helpful in the investigation or prosecution of the criminal activity detailed above?

3. Since the initiation of cooperation, has the victim refused or failed to provide assistance reasonably requested in the investigation or prosecution of the criminal activity detailed above?

If you answer "Yes" to **Item Numbers 1. - 3.**, provide an explanation in the space below. If you need extra space to complete this section, use the space provided in **Part 7. Additional Information**.

**4.** Other. Include any additional information you would like to provide.

# Part 5. Family Members Culpable In Criminal Activity

 Are any of the victim's family members culpable or believed to be culpable in the criminal activity of which the petitioner is a victim? Yes No

If you answered "Yes," list the family members and their criminal involvement. (If you need extra space to complete this section, use the space provided in **Part 7.** Additional Information.)

2.a.	Family Name (Last Name)	
2.b.	Given Name (First Name)	
2.c.	Middle Name	
2.d.	Relationship	
2.e.	Involvement	
<b>3.a.</b>	Family Name (Last Name)	
3.b.	Given Name	
_	(First Name)	
3.c.	Middle Name	
<b>3.d.</b>	Relationship	
3.e.	Involvement	
<b>4.</b> a.	Family Name [ (Last Name)	
4.b.	Given Name	
	(First Name)	
<b>4.c.</b>	Middle Name	
<b>4.d.</b>	Relationship	
<b>4.e.</b>	Involvement	

#### Part 6. Certification

I am the head of the agency listed in **Part 2.** or I am the person in the agency who was specifically designated by the head of the agency to issue a U Nonimmigrant Status Certification on behalf of the agency. Based upon investigation of the facts, I certify, under penalty of perjury, that the individual identified in **Part 1.** is or was a victim of one or more of the crimes listed in **Part 3.** I certify that the above information is complete, true, and correct to the best of my knowledge, and that I have made and will make no promises regarding the above victim's ability to obtain a visa from U.S. Citizenship and Immigration Services (USCIS), based upon this certification. I further certify that if the victim unreasonably refuses to assist in the investigation or prosecution of the qualifying criminal activity of which he or she is a victim, I will notify USCIS.

1. Signature of Certifying Official (sign in ink)

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2.	Date of Signature (mm/dd/yyyy)	
3.	Daytime Telephone Number	

4. Fax Number

Pa	rt 7. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
supp pape the A of ea <b>Item</b> each may	bu need extra space to complete any item within this belement, use the space below or attach a separate sheet of er; type or print the agency's name, petitioner's name, and Alien Registration Number (A-Number) (if any) at the top ach sheet; indicate the <b>Page Number, Part Number</b> , and <b>n Number</b> to which your answer refers; and sign and date a sheet. If you need more space than what is provided, you also make copies of this page to complete and file with this belement. Agency Name	5.d.					
Pet	itioner's Name						
2.a.	Family Name (Last Name)						
2.b.	· · · · · · · · · · · · · · · · · · ·						
2.c.	Middle Name						
3.	A-Number (if any)						
	► A-	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
<b>4.a.</b>	Page Number   4.b.   Part Number   4.c.   Item Number	6.d.					
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