

Receipt Confirmation

Date: _____

To whom it may concern,

This is to confirm the receipt of your application for the I-539 Extension/Change of Nonimmigrant Status Request.

Applicant Name	<input type="text"/>
Receipt Number	<input type="text"/>
Date Received	<input type="text"/>
Form Type	I-539 Extension/Change Request

Your application is currently under review. You will be notified once a decision has been made or if additional information is required.

If you have any questions regarding your receipt, please contact our office.

Sincerely,

(Authorized Representative)