



United States Department of State

Washington, D.C. 20520

April 08, 2010

Mr. Daniel Renaud, Director
Vermont Service Center
DHS/USCIS
Attn: Waiver Review Section
Post Office Box 800
St. Albans, VT 05479-0800

Re: DoS# [REDACTED] 749, [REDACTED] DOB: [REDACTED] COB: [REDACTED] COR: [REDACTED]
[REDACTED]

Subject: 212(e) Waiver Recommendation based on a(n) No Objection application

Dear Director:

After a thorough review of the request, the Department recommends to the U.S.C.I.S. that the exchange visitor and members of the immediate family, if applicable, be **GRANTED** a waiver. Please note this does not include any member of the family who is subject to the residence requirement as a result of his or her own J-1 visa status.

Any other existing application(s) submitted to the Department, for the exchange visitor will now be closed. This concludes the Department's involvement in this case. Any further action concerning this waiver falls under the jurisdiction of the U.S.C.I.S.

Sincerely,

Pharas L. Davis

PHARAS DAVIS
Waiver Review Division

cc:

[REDACTED]
[REDACTED]
Law Office of William Jang, PLLC
P-1-00792

Enc: No Objection Statement
DS-3035
G-28



RECEIPT NUMBER [REDACTED] 0263		CASE TYPE I539
RECEIPT DATE April 15, 2010	PRIORITY DATE	APPLICATION TO EXTEND/CHANGE NONIMMIGRANT STATUS
NOTICE DATE April 27, 2010	PAGE 1 of 1	APPLICANT [REDACTED]
WILLIAM I. JANG LAW OFFICE OF WILLIAM JANG PLLC 314 E HIGHLAND MALL BLVD SUITE 406 AUSTIN TX 78752		BENEFICIARY [REDACTED]
		Notice Type: Approval Notice Class: B1 Valid from 04/23/2010 to 10/22/2010

The above application for extension of temporary stay is approved. The temporary stay of the named applicant(s) is authorized to the date indicated above. An updated Form I-94 is attached.

If the applicant has an authorized representative, this notice has also been mailed to the representative.

Please read the back of this form carefully for more information.

THIS FORM IS NOT A VISA NOR MAY IT BE USED IN PLACE OF A VISA.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

U.S. CITIZENSHIP & IMMIGRATION SVCS
VERMONT SERVICE CENTER
75 LOWER WELDEN STREET
SAINT ALBANS VT 05479-0001
Customer Service Telephone: (800) 375-5283

Form I797A (Rev. 09/07/93)N

PLEASE TEAR OFF FORM I-94 PRINTED BELOW, AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

Detach This Half for Personal Records

Receipt # [REDACTED] 263
I-94# [REDACTED]
NAME [REDACTED]
CLASS B1
VALID FROM 04/23/2010 UNTIL 10/22/2010
PETITIONER: [REDACTED]

[REDACTED]

Receipt Number [REDACTED] 0263
Immigration and
Naturalization Service
I-94
Departure Record Petitioner:

14. Family Name [REDACTED]	16. Date of Birth [REDACTED]
15. First (Given) Name [REDACTED]	
17. Country of Citizenship [REDACTED]	

THE UNITED STATES OF AMERICA

RECEIPT NUMBER [REDACTED] 1669		CASE TYPE I539
RECEIPT DATE March 1, 2010	PRIORITY DATE	APPLICATION TO EXTEND/CHANGE NONIMMIGRANT STATUS
NOTICE DATE April 30, 2010	PAGE 1 of 1	APPLICANT [REDACTED]
WILLIAM I. JANG LAW OFFICE OF WILLIAM JANG PLLC 314 E HIGHLAND MALL BLVD #406 AUSTIN TX 78752		BENEFICIARY [REDACTED]
		Notice Type: Approval Notice Class: F1 Valid from 04/29/2010 Valid for Duration of Status

The above application for change of nonimmigrant status is approved. The new status is listed above. The length of authorized temporary stay in this status, for the applicant(s) named, is also listed above.

Form I-20 ID (student copy) has also been endorsed to show the student's new classification. This is an important document that he or she must submit with any future applications to this service as long as he or she remains in student status.

An updated I-94 is included in the lower portion of this notice. Each applicant must surrender his or her Form I-94 when leaving the U.S.

If any person included in this application must depart the U.S., he or she may wish to take this notice with them to facilitate their return to this status. He or she must obtain a new visa in the new classification before returning to the U.S.

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PLEASE TEAR OFF FORM I-94 PRINTED BELOW, AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

Detach This Half for Personal Records

Receipt # [REDACTED] 1669
I-94# [REDACTED]
NAME [REDACTED]
CLASS F1
VALID FROM 04/29/2010
Valid for Duration of Status
PETITIONER: [REDACTED]

[REDACTED]

Receipt Number [REDACTED] 1669
Immigration and Naturalization Service
I-94
Departure Record Petitioner:

14. Family Name [REDACTED]	16. Date of Birth [REDACTED]
15. First (Given) Name [REDACTED]	
17. Country of Citizenship [REDACTED]	