

TABLE OF CHANGES – FORM
Form I-131, Application for Travel Document
OMB Number: 1615-0013
07/21/2020

Reason for Revision: Fee Rule

Legend for Proposed Text:

- Black font = Current text
- **Red font** = Changes

Expires 04/30/2022

Edition Date 04/24/2019

Current Page Number and Section	Current Text	Proposed Text
<p>Page 1, For USCIS Use Only</p>	<p>[Page 1]</p> <p>For USCIS Use Only Action Block To Be Completed by an Attorney/ Representative, if any. Receipt Fill in box if G-28 is attached to represent the applicant. Document Hand Delivered By: Date: / / /</p> <p>Document Issued Re-entry Permit (Update "Mail To" Section) Refugee Travel Document (Update "Mail To" Section) Single Advance Parole Multiple Advance Parole Valid Until: / / /</p> <p>Mail To (Re-entry & Refugee Only) Address in Part 1 US Consulate at: Intl DHS Ofc at:</p> <p>Attorney State License Number:</p> <p>Start Here. Type or Print in Black Ink</p>	<p>[Page 1]</p> <p>For USCIS Use Only Action Block To Be Completed by an Attorney/ Representative. Receipt Fill in box if G-28 is attached to represent the applicant. Document Hand Delivered By: Date: / / /</p> <p>Document Issued Re-entry Permit (Update "Mail To" Section) Refugee Travel Document (Update "Mail To" Section) Single Advance Parole Multiple Advance Parole Valid Until: / / /</p> <p>Mail To (Re-entry & Refugee Only) Address in Part 1 US Consulate at: Intl DHS Ofc at:</p> <p>Attorney State License Number:</p> <p>Start Here. Type or Print in Black Ink</p>
<p>Page 1, Part 1. Information About You</p>	<p>[Page 1]</p> <p>[New]</p>	<p>[Page 1]</p> <p>Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks, "Provide the name of your current spouse"), type or print "N/A" unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, "How many children do you have?" or</p>

	<p>Part 1. Information About You</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p><i>Physical Address</i></p> <p>2.a. In Care of Name 2.b. Street Number and Name 2.c. Apt./Ste./Flr. 2.d. City or Town 2.e. State 2.f. ZIP Code 2.g. Postal Code 2.h. Province 2.i. Country</p> <p><i>Other Information</i></p> <p>3. Alien Registration Number (A-Number) 4. Country of Birth 5. Country of Citizenship 6. Class of Admission</p> <p>7. Gender Male Female</p> <p>8. Date of Birth (mm/dd/yyyy) 9. U.S. Social Security Number (if any)</p>	<p style="color: red;">“How many times have you departed the United States?”), type or print “None” unless otherwise directed.</p> <p>Part 1. Information About You</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p><i>Physical Address</i></p> <p>2.a. In Care of Name 2.b. Street Number and Name 2.c. Apt./Ste./Flr. 2.d. City or Town 2.e. State 2.f. ZIP Code 2.g. Postal Code 2.h. Province 2.i. Country</p> <p><i>Other Information</i></p> <p>3. Alien Registration Number (A-Number) 4. Country of Birth 5. Country of Citizenship 6. Class of Admission</p> <p>7. Gender Male Female</p> <p>8. Date of Birth (mm/dd/yyyy) 9. U.S. Social Security Number</p>
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