TABLE OF CHANGES – Form Form I-131A, Application for Travel Document (Carrier Documentation) OMB Number: 1615-0135 Date 06/02/2020

Reason for Revision: Fee Rule Project Phase: OMB Review

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 02/28/2021 Edition Date 2/13/2019

Current Page Number and Section	Current Text	Proposed Text
Page 1	[Page 1]	[Page 1]
To be completed by an attorney or accredited representative	To be completed by an attorney or accredited representative (if any). Select this box if Form G-28 or G-28I is attached. Attorney State Bar Number (if applicable) Attorney or Accredited Representative USCIS Online Account Number (if any)	To be completed by an attorney or accredited representative (if any). Select this box if Form G-28 or G-28I is attached. Attorney State Bar Number (if applicable) Attorney or Accredited Representative USCIS Online Account Number (if any)
Pages 1-2,	[Page 1]	[Page 1]
Part 1. Information About You	START HERE – Type or print in black ink. [New]	START HERE – Type or print in black ink. 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 "How many times have you departed the United States?"), type or print "None" unless otherwise directed.
	Part 1. Information About You 1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name	Part 1. Information About You 1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name
	2. Has your name changed since the issuance of your last Permanent Resident Card (Form I-551)? Y/N	2. Has your name changed since the issuance of your last Permanent Resident Card (Form I-551), Advanced Parole Document, (Form I-512 or I-512L), or Employment Authorization

		Document with Travel Endorsement (I-766)? Y/N
	7. USCIS Online Account Number (if any)	7. USCIS Online Account Number
	8. U.S. Social Security Number (if any)	8. U.S. Social Security Number
	10. Sex M/F	10. Gender M/F
Page 2,	[Page 2]	[Page 2]
Part 2. Reason for		
Application	1.c. My existing Permanent Resident Card has been mutilated	1.c. My existing Permanent Resident Card has been damaged.
	1.d. My existing Permanent Resident Card has already expired	1.d. My existing Permanent Resident Card has already expired.
	[new]	1.e. My existing Advance Parole Document (Form I-512/Form I-512L) has been lost, stolen, or destroyed.
		1.f. My existing Advance Parole Document (Form I-512/Form I-512L) has been damaged.
		1.g. My existing Employment Authorization Document with travel endorsement (I-766) has been lost, stolen, or destroyed.
		1.h. My existing Employment Authorization Document with travel endorsement (I-766) has been damaged.
	1.e. Other (explain below):	1.i. Other (explain below):
Page 2,	[Page 2]	[Page 2]
Part 3. Processing		
Information	[new]	3. Date of expiration of Permanent Resident Card (mm/dd/yyyy)
		4. Date of expiration of Rentry Permit, if applicable (mm/dd/yyyy)
		5. Date of expiration of Form I-512, I-512L, or I-766, if applicable (mm/dd/yyyy)
		6. I-131 Receipt Number associated with the lost, stolen or damaged Form I-512, I-512L, I-766

3. Are you **NOW**, or were you **EVER**, in exclusion, deportation, removal, or rescission proceedings? Y/N

If you answered "Yes" to **Item Number 3.**, provide details in the space provided in **Part 7. Additional Information**.

4. Since you were granted permanent residence, have you **EVER** filed Form I-407, Abandonment of Lawful Permanent Resident Status, or otherwise been judged to have abandoned your status? Y/N

If you answered "Yes" to **Item Number 4.**, provide details in the space provided in **Part 7. Additional Information**.

5.a. Have you **EVER** been issued a Travel Document? Y/N

If you answered "Yes" to **Item Number 5.a.**, answer **Item Numbers 5.b.** and **5.c.** for the last document issued to you and provide additional details in the space provided in **Part 7. Additional Information**.

- **5.b.** Date Issued (mm/dd/yyyy)
- **5.c.** Disposition (attached, lost, etc.):

7. Are you **NOW**, or were you **EVER**, in exclusion, deportation, removal, or rescission proceedings? Y/N

If you answered "Yes" to **Item Number 7.**, provide details in the space provided in **Part 7. Additional Information**.

8. If you are a lawful permanent resident, have you **EVER** filed Form I-407, Record of Abandonment of Lawful Permanent Resident Status, or otherwise been judged to have abandoned your status? Y/N

If you answered "Yes" to **Item Number 8.**, provide details in the space provided in **Part 7. Additional Information**.

9.a. If you are a lawful permanent resident, have you **EVER** issued a Carrier Document? Y/N

If you answered "Yes" to **Item Number 9.a.**, answer **Item Numbers 9.b.** and **9.c.** for the last document issued to you and provide additional details in the space provided in **Part 7. Additional Information**.

- **9.b.** Date Issued (mm/dd/yyyy)
- **9.c.** Disposition (attached, lost, etc.):
- **10.** If you received an Advanced Parole Document or Employment Authorization Document with travel endorsement, was it ever revoked? Y/N

If you answered "Yes" to **Item Number 10.**, answer **Item Numbers 10.a.** and **10.b.** for the last document issued to you and provide additional details in the space provided in **Part 7. Additional Information**.

10.a. Date of revocation (mm/dd/yyyy)

10.b. Reason For revocation

Page 6, Part 7. Additional Information

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Part 7. Additional information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which

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Part 7. Additional information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which

your answer refers; and sign and date each	your answer refers; and sign and date each
sheet.	sheet.
1.a. Family Name (Last Name)	1.a. Family Name (Last Name)
1.b. Given Name (First Name)	1.b. Given Name (First Name)
1.c. Middle Name	1.c. Middle Name
2. A-Number (if any)	2. A-Number
3.a. Page Number	3.a. Page Number
3.b. Part Number	3.b. Part Number
3.c. Item Number	3.c. Item Number
3.d. [Fillable field]	3.d. [Fillable field]
4.a. Page Number	4.a. Page Number
4.b. Part Number	4.b. Part Number
4.c. Item Number	4.c. Item Number
4.d. [Fillable field]	4.d. [Fillable field]
5.a. Page Number	5.a. Page Number
5.b. Part Number	5.b. Part Number
5.c. Item Number	5.c. Item Number