

# **Application for Travel Document (Carrier Documentation)**

#### USCIS Form I-131A

**Department of Homeland Security** U.S. Citizenship and Immigration Services OMB No. 1615-0135 Expires 02/28/2021

Receipt **Action Block** For **USCIS Document Issued** Use ☐ Transportation Letter □ Boarding Foil Only **Document Hand Delivered** Date: (mm/dd/yyyy) Select this box if Attorney State Bar Number (if **Attorney or Accredited Representative** To be completed by an Form G-28 or USCIS Online Account Number (if any) applicable)

#### START HERE - Type or print in black ink.

attorney or accredited

representative (if any).

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.

Form G-28I is

attached.

### Part 1. Information About You 1.a. Family Name (Last Name) **1.b.** Given Name (First Name) **1.c.** Middle Name Has your name changed since the issuance of your last 2. Permanent Resident Card (Form I-551), Advanced Parole Document, (Form I-512 or I-512L), Employment Authorization Document with Travel Endorsement (I-766)? Yes No

NOTE: If you answered "Yes" to Item Number 2., attach evidence of your legal name change with this application.

Current Mailing Address (USPS ZIP Code Lookup)				
3.a.	In Care Of Nan	ne		
3.b.	Street Number and Name			
3.c.	Apt. S	te. Flr.		
3.d.	City or Town			
3.e.	State	3.f. ZIP Code		
3.g.	Province			
3.h.	Postal Code			
3.i.	Country			
4.	Is your current physical address	mailing address the ss?	same as your U.S.  Yes No	

If you answered "No" to Item Number 4., provide your

U.S. physical address in **Item Numbers 5.a. - 5.e.** 

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Par	t 1. Information About You (continued)	1.h.	My existing Employment Authorization Document with travel endorsement (I-766) has been damaged.					
U.S. Physical Address		1.i.	Other (explain below).					
5.a.	Street Number and Name							
5.b.	Apt. Ste. Flr.	Par	t 3. Processing Information					
5.c.	City or Town	1.	Date Departed the United States (mm/dd/yyyy)					
5.d.	State 5.e. ZIP Code							
Oth	ner Information	2.	Date of Intended Travel to the United States (mm/dd/yyyy)					
6.	Alien Registration Number (A-Number)  ▶ A-	3.	Date of expiration of Permanent Resident Card (mm/dd/yyyy)					
7.	USCIS Online Account Number	4.	Date of expiration of Reentry Permit, if applicable (mm/dd/yyyy)					
8.	U.S. Social Security Number	5.	Date of expiration of Form I-512, I-512L, or I-766, if applicable (mm/dd/yyyy)					
9.	Date of Birth (mm/dd/yyyy)	6.	I-131 Receipt Number associated with the lost, stolen or damaged Form I-512, I-512L, I-766					
10.	Gender Male Female							
11.	Country of Birth	7.	Are you <b>NOW</b> , or were you <b>EVER</b> , in exclusion, deportation, removal, or rescission proceedings?					
12.	Country of Citizenship or Nationality		☐ Yes ☐ No					
			If you answered "Yes" to <b>Item Number 7.</b> , provide details in the space provided in <b>Part 7. Additional Information</b> .					
Part 2. Reason for Application		8.	If you are a lawful permanent resident, have you EVER					
Selec	et only one box.		filed Form I-407, Record of Abandonment of Lawful Permanent Resident Status, or otherwise been judged to					
1.a.	My previous Permanent Resident Card has been lost, stolen, or destroyed.		have abandoned your status? Yes No					
1.b.	My previous Permanent Resident Card was issued but never received.		If you answered "Yes" to <b>Item Number 8.</b> , provide details in the space provided in <b>Part 7. Additional Information</b> .					
1.c.	My existing Permanent Resident Card has been damaged.	9.a.	If you are a lawful permanent resident, have you <b>EVER</b> been issued a Carrier Document? Yes No					
1.d.	My existing Permanent Resident Card has already expired.		If you answered "Yes" to <b>Item Number 9.a.</b> , answer <b>Item Numbers 9.b.</b> and <b>9.c.</b> for the last document issued					
1.e.	My existing Advance Parole Document (Form I-512/ Form I-512L) has been lost, stolen, or destroyed.		to you and provide additional details in the space provided in <b>Part 7. Additional Information</b> .					
1.f.	My existing Advance Parole Document (Form I-512/ Form I-512L) has been damaged.	9.b. 9.c.	Date Issued (mm/dd/yyyy)  Disposition (attached, lost, etc.):					
1.g.	My existing Employment Authorization Document with travel endorsement (I-766) has been lost, stolen, or destroyed.	,	Disposition (utuariou, 10st, etc.).					

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Par	t 3. Processing Information (continued)	Applicant's Certification				
10.	If you received an Advanced Parole Document or Employment Authorization Document with travel endorsement, was it ever revoked? Yes No  If you answered "Yes" to Item Number 10., answer Item Numbers 10.a. and 10.b. for the last document issued to	Copies of any documents I have submitted are exact photocopie of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a late date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.				
10.a.	you and provide additional details in the space provided in <b>Part 7. Additional Information</b> .  Date of revocation (mm/dd/yyyy)	I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.				
10.b.	Reason for revocation	I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.				
	t 4. Applicant's Statement, Contact					
Info	ormation, Certification, and Signature	Applicant's Signature				
	<b>E:</b> Read the <b>Penalties</b> section of the Form 1-131A actions before completing this section.	6.a. Applicant's Signature				
App	licant's Statement	<b>6.b.</b> Date of Signature (mm/dd/yyyy)				
	E: Select the box for either Item Number 1.a. or 1.b. If cable, select the box for Item Number 2.  I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.	NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.				
1.b.	The interpreter named in <b>Part 5.</b> read to me every question and instruction on this application and my answer to every question in	Part 5. Interpreter's Contact Information, Certification, and Signature				
	answer to every question in	Provide the following information about the interpreter.				
	a language in which I am fluent, and I understood everything.	Interpreter's Full Name				
2.	At my request, the preparer named in <b>Part 6.</b> ,	1.a. Interpreter's Family Name (Last Name)				
	,					
	prepared this application for me based only upon information I provided or authorized.	1.b. Interpreter's Given Name (First Name)				
App	licant's Contact Information	2. Interpreter's Business or Organization Name (if any)				
3.	Applicant's Daytime Telephone Number					
4.	Applicant's Mobile Telephone Number (if any)					
5.	Applicant's Email Address (if any)					

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#### Part 6. Contact Information, Declaration, and Part 5. Interpreter's Contact Information, Signature of the Person Preparing this Certification, and Signature (continued) **Application, if Other Than the Applicant** Interpreter's Mailing Address Provide the following information about the preparer. Street Number and Name Preparer's Full Name 3.b. Apt. Ste. **1.a.** Preparer's Family Name (Last Name) City or Town **1.b.** Preparer's Given Name (First Name) 3.e. ZIP Code 3.d. State 3.f. Province 2. Preparer's Business or Organization Name (if any) Postal Code 3.g. **3.h.** Country Preparer's Mailing Address **3.a.** Street Number and Name Interpreter's Contact Information **3.b.** Apt. Ste. Flr. 4. Interpreter's Daytime Telephone Number **3.c.** City or Town Interpreter's Mobile Telephone Number (if any) 5. 3.d. State ZIP Code 3.f. Province Interpreter's Email Address (if any) 6. 3.g. Postal Code **3.h.** Country Interpreter's Certification I certify, under penalty of perjury, that: Preparer's Contact Information I am fluent in English and 4. which is the same language specified in Part 4., Item Preparer's Daytime Telephone Number Number 1.b., and I have read to this applicant in the identified language every question and instruction on this 5. Preparer's Mobile Telephone Number (if any) application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including 6. Preparer's Email Address (if any) the Applicant's Certification, and has verified the accuracy of every answer. Interpreter's Signature

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7.a. Interpreter's Signature

**7.b.** Date of Signature (mm/dd/yyyy)

Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)

Preparer's Statement

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NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this application.

## Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature			
8.a.	Preparer's Signature		
8.b.	Date of Signature (mm/dd/yyyy)		

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Par	t 7. Additional Information	n	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
within space to consheet top or and I	n need extra space to provide any and this application, use the space be than what is provided, you may manage and file with this application of paper. Type or print your name of each sheet; indicate the <b>Page Number</b> to which your answers each sheet.	clow. If you need more make copies of this page on or attach a separate e and A-Number at the mber, Part Number,	5.d.					
1.a.	Family Name (Last Name)							
1.b.	Given Name (First Name)							
1.c.	Middle Name							
2. 3.a.	A-Number ► A-  Page Number 3.b. Part Number	er 3.c. Item Number	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
			6.d.					
3.d.		<b>rod 6/0</b>	7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
4.a. 4.d.	Page Number 4.b. Part Number	er <b>4.c.</b> Item Number	7.d.					
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