## DRAFT

U. S. Citizenship and Immigration Services

	DO NOT WRITE IN THIS BLO	CK FOR U			USCIS USE ONLY (except G-28 block below)			
Do	Coument Issued	Action Bloc	k		Recei	ipt		
	Refugee Travel Document							
	Single Advance Parole							
	Multiple Advance Parole Valid to:							
If	Reentry Permit or Refugee Travel				D	ocument Han	d Delivered	
Do	ocument, mail to:				0	'n	Ву	
	Address in Part 1 U.S. Embassy/consulate				To be	completed by	Attorney/Representative, if any.	
	at:					mey State Lice		
	Overseas DHS office at:					-	-28 is attached.	
Pa	rt 1. Information About Yo	<b>u</b> (Type or	print in black ink)					
1.	A Number 2.	Date of Birtl	h ( <i>mm/dd/yyyy</i> )	3. Class	of Ad	mission	4. Gender	
							Male Female	
5.	Name (Family name in capital letters)	(First)				(Middle)	-	
6. Address (Number and Street) Apt. Number				nber				
	City	State or P	Province	,	Zip/Pc	ostal Code	Country	
7.	Country of Birth	8. Count	ry of Citizenship		9. Soc	cial Security #	(if any)	
Pa	art 2. Application Type (Ched	ck one)						
a	. I am a permanent resident or co	nditional res	ident of the United S	tates, and I	l am aj	pplying for a r	eentry permit.	
b	• I now hold U.S. refugee or asyl	ee status, and	d I am applying for a	Refugee T	ravel ]	Document.		
c. I am a permanent resident as a direct result of refugee or asylee status, and I am applying for a Refugee Travel Document.								
<b>d.</b> I am applying for an advance parole document to allow me to return to the United States after temporary foreign travel.								
e	. I am outside the United States,	and I am app	lying for an Advance	e Parole Do	ocume	nt.		
f.	I am applying for an Advance F provide the following informati			o is outside	the U	nited States.	lf you checked box "f,"	
1.	Name (Family name in capital letters	) (First	t)			(Middle)		
2.	Date of Birth (mm/dd/yyyy)		<b>3.</b> Country of Birth			4. Countr	y of Citizenship	
5.	Address (Number and Street)			Apt. #		Daytime Tele	phone # (area/country code)	
	City	State or Province Zij			Zip/Pos	p/Postal Code Country		

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Part 3. Processing Information								
<b>1</b> . Date of Intended Departure ( <i>mm/dd/yyyy</i> )	2. Expected Length of Trip							
<b>3</b> . Are you, or any person included in this application, now in								
exclusion, deportation, removal, or rescission proceedings? Yes No (Name of DHS office):								
If you are applying for an Advance Parole Document, skip to	Part 7.							
4. Have you ever before been issued a reentry permit or Refugee								
No Yes (If "Yes," give the following information fo	<sup>•</sup> the last document issued to you):							
	ion (attached, lost, etc.):							
<ul> <li>5. Where do you want this travel document sent? (<i>Check one</i>)</li> <li>a. To the U.S. address shown in <b>Part 1</b> on the first page of this form.</li> </ul>								
<b>b</b> . To a U.S. Embassy or consulate at: City:	Country:							
c. ☐ To a DHS office overseas at: City:	Country:							
<b>d.</b> If you checked "b" or "c," where should the notice to pick up	the travel document be sent?							
To the address shown in <b>Part 2</b> on the first page of this for	m.							
To the address shown below:								
Address (Number and Street)	Apt. # Daytime Telephone # (area/country code)							
City State or Province	Zip/Postal Code Country							
Dout 4 Information About Your Dranged Travel								
Part 4. Information About Your Proposed Travel								
Purpose of trip. (If you need more room, continue on a separate sheet	of paper.) List the countries you intend to visit.							
Part 5. Complete Only If Applying for a Reentry P	ermit							
Since becoming a permanent resident of the United States (or duri	ng the less than six months two to three years							
past five years, whichever is less) how much total time have you s								
outside the United States?	one to two years more than four years							
Since you became a permanent resident of the United States, have								
return as a nonresident or failed to file a Federal income tax return	because you considered yourself to be a Yes No							
nonresident? (If "Yes," give details on a separate sheet of paper.)								
Part 6. Complete Only If Applying for a Refugee Travel Document								
1. Country from which you are a refugee or asylee:								
If you answer "Yes" to any of the following questions, you must	explain on a separate sheet of paper.							
2. Do you plan to travel to the country named above?	Yes No							
3. Since you were accorded refugee/asylee status, have you ever:								
a. Returned to the country named above?	newal, or entry permit of that country?							
<ul> <li>b. Applied for and/or obtained a national passport, passport report of the country of t</li></ul>								
4. Since you were accorded refugee/asylee status, have you, by a								
a. Reacquired the nationality of the country named above? b. Acquired a new nationality?	Yes No							
<b>c.</b> Been granted refugee or asylee status in any other country?	$\Box \operatorname{Yes} \Box \operatorname{No}$							

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role				
ance Parole Document, and what circumstances warrant issuance of dered. (See instructions.)				
One Trip More than one trip				
is outside the United States, provide the location (city and country) hat you want us to notify.				
intry				
where should the notice to pick up the document be sent?:          rm.         Apt. #       Daytime Telephone # (area/country code)				
(dd/yyyy) Daytime Telephone Number (with area code)				
it required documents listed in the instructions, you may not be hay be denied.				
ner Than the Applicant (Sign below)				
cant, and it is based on all information of which I have knowledge.				
Print or Type Your Name				
Daytime Telephone Number ( <i>with area code</i> )				
Date ( <i>mm/dd/yyyy</i> )				