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
Page 1,	[Page 1]	[Page 1]
For USCIS Use Only	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: / / /	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: / / /
	Document Issued Re-entry Permit (Update "Mail To" Section) Refugee Travel Document (Update "Mail To" Section) Single Advance Parole Multiple Advance Parole Valid Until: / / /	Document Issued Re-entry Permit (Update "Mail To" Section) Refugee Travel Document (Update "Mail To" Section) Single Advance Parole Multiple Advance Parole Valid Until: / / /
	Mail To (Re-entry & Refugee Only) Address in Part 1 US Consulate at: Intl DHS Ofc at:	Mail To (Re-entry & Refugee Only) Address in Part 1 US Consulate at: Intl DHS Ofc at:
	Attorney State License Number:	Attorney State License Number:
	Start Here. Type or Print in Black Ink	Start Here. Type or Print in Black Ink
Page 1,	[Page 1]	[Page 1]
Part 1. Information About You	[New]	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

Physical Address

- **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

Other Information

- **3.** Alien Registration Number (A-Number)
- 4. Country of Birth
- **5.** Country of Citizenship
- 6. Class of Admission
- 7. Gender

Male

Female

- **8.** Date of Birth (mm/dd/yyyy)
- **9.** U.S. Social Security Number (if any)

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