



# Application for Travel Document (Carrier Documentation)

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-131A  
OMB No. 1615-0135  
Expires 02/28/2021

<b>For USCIS Use Only</b>	<b>Receipt</b>	<b>Action Block</b>
	<b>Document Issued</b> <input type="checkbox"/> Transportation Letter <input type="checkbox"/> Boarding Foil	
	<b>Document Hand Delivered</b> By: _____ Date: _____ (mm/dd/yyyy)	

<b>To be completed by an attorney or accredited representative (if any).</b>	<input type="checkbox"/> <b>Select this box if Form G-28 or Form G-28I is attached.</b>	<b>Attorney State Bar Number (if applicable)</b> _____	<b>Attorney or Accredited Representative USCIS Online Account Number (if any)</b> _____
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▶ **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 \_\_\_\_\_

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), **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 Name \_\_\_\_\_

3.b. Street Number and Name \_\_\_\_\_

3.c.  Apt.  Ste.  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 mailing address the same as your U.S. physical address?  Yes  No

If you answered "No" to **Item Number 4.**, provide your U.S. physical address in **Item Numbers 5.a. - 5.e.**

**Part 1. Information About You (continued)**

**U.S. Physical Address**

- 5.a. Street Number and Name
- 5.b.  Apt.  Ste.  Flr.
- 5.c. City or Town
- 5.d. State  5.e. ZIP Code

**Other Information**

- 6. Alien Registration Number (A-Number)
  - ▶ A-
- 7. USCIS Online Account Number
  - ▶
- 8. U.S. Social Security Number
  - ▶
- 9. Date of Birth (mm/dd/yyyy)
- 10. Gender  Male  Female
- 11. Country of Birth
- 12. Country of Citizenship or Nationality

**Part 2. Reason for Application**

Select **only one** box.

- 1.a.  My previous Permanent Resident Card has been lost, stolen, or destroyed.
- 1.b.  My previous Permanent Resident Card was issued but never received.
- 1.c.  My existing Permanent Resident Card has been damaged.
- 1.d.  My existing Permanent Resident Card has already expired.
- 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.i.  Other (explain below).

**Part 3. Processing Information**

- 1. Date Departed the United States (mm/dd/yyyy)
- 2. Date of Intended Travel to the United States (mm/dd/yyyy)
- 3. Date of expiration of Permanent Resident Card (mm/dd/yyyy)
- 4. Date of expiration of Reentry 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
- 7. Are you **NOW**, or were you **EVER**, in exclusion, deportation, removal, or rescission proceedings?  Yes  No

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?  Yes  No

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** been issued a **Carrier Document**?  Yes  No

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.):

**Part 3. Processing Information** (continued)

**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 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

**Part 4. Applicant's Statement, Contact Information, Certification, and Signature**

**NOTE:** Read the **Penalties** section of the Form I-131A Instructions before completing this section.

**Applicant's Statement**

**NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

**1.a.**  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.

**1.b.**  The interpreter named in **Part 5.** read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I understood everything.

**2.**  At my request, the preparer named in **Part 6.**, , prepared this application for me based only upon information I provided or authorized.

**Applicant's Contact Information**

**3.** Applicant's Daytime Telephone Number

**4.** Applicant's Mobile Telephone Number (if any)

**5.** Applicant's Email Address (if any)

**Applicant's Certification**

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later 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.

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.

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.

**Applicant's Signature**

**6.a.** Applicant's Signature

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

**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.

**Part 5. Interpreter's Contact Information, Certification, and Signature**

Provide the following information about the interpreter.

**Interpreter's Full Name**

**1.a.** Interpreter's Family Name (Last Name)

**1.b.** Interpreter's Given Name (First Name)

**2.** Interpreter's Business or Organization Name (if any)

**Part 5. Interpreter's Contact Information, Certification, and Signature (continued)**

**Interpreter's Mailing Address**

- 3.a. Street Number and Name
- 3.b.  Apt.  Ste.  Flr.
- 3.c. City or Town
- 3.d. State  3.e. ZIP Code
- 3.f. Province
- 3.g. Postal Code
- 3.h. Country

**Interpreter's Contact Information**

4. Interpreter's Daytime Telephone Number
5. Interpreter's Mobile Telephone Number (if any)
6. Interpreter's Email Address (if any)

**Interpreter's Certification**

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in **Part 4., Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this 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 the **Applicant's Certification**, and has verified the accuracy of every answer.

**Interpreter's Signature**

- 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**

Provide the following information about the preparer.

**Preparer's Full Name**

- 1.a. Preparer's Family Name (Last Name)
- 1.b. Preparer's Given Name (First Name)
2. Preparer's Business or Organization Name (if any)

**Preparer's Mailing Address**

- 3.a. Street Number and Name
- 3.b.  Apt.  Ste.  Flr.
- 3.c. City or Town
- 3.d. State  3.e. ZIP Code
- 3.f. Province
- 3.g. Postal Code
- 3.h. Country

**Preparer's Contact Information**

4. Preparer's Daytime Telephone Number
5. Preparer's Mobile Telephone Number (if any)
6. Preparer's Email Address (if any)

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

**Preparer's Statement**

- 7.a.  I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- 7.b.  I am an attorney or accredited representative and my representation of the applicant in this case  extends  does not extend beyond the preparation of this application.

**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)

**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 sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number  ▶ A-

3.a. Page Number  3.b. Part Number  3.c. Item Number

3.d. \_\_\_\_\_

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4.a. Page Number  4.b. Part Number  4.c. Item Number

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5.a. Page Number  5.b. Part Number  5.c. Item Number

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6.a. Page Number  6.b. Part Number  6.c. Item Number

6.d. \_\_\_\_\_

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