

TABLE OF CHANGES – FORM
Form I-131, Application for Travel Document
OMB Number: 1615-0013
05/13/2020

Reason for Revision: Biometrics Rule

Project Phase: NPRM

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
New		<p>[page 5]</p> <p>Part 8. Biographic Information for the Person Who Will Receive the Document</p> <p>1. Ethnicity (Select only one box)</p> <p>Hispanic or Latino Not Hispanic or Latino</p> <p>2. Race (Select all applicable boxes)</p> <p>American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White</p> <p>3. Height</p> <p>Feet Inches</p> <p>4. Weight</p> <p>Pounds</p> <p>5. Eye Color (Select only one box)</p> <p>Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other</p> <p>6. Hair Color (Select only one box)</p>

		<p>Bald (No hair) Black Blond Brown Gray Red Sandy White Unknown/Other</p>
<p>Page 5, Part 8. Signature of Applicant</p>	<p>[page 5]</p> <p>Part 8. Signature of Applicant <i>(Read the information on penalties in the Form instructions before completing this Part.)</i> If you are filing for a Re-entry Permit or Refugee Travel Document, you must be in the United States to file this application.</p> <p>[new]</p> <p>1.a. I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it is all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit that I am seeking.</p> <p>Signature of Applicant</p> <p>1.b. Date of Signature (mm/dd/yyyy)</p> <p>2. Daytime Phone Number</p> <p>NOTE: If you do not completely fill out this</p>	<p>[page 5]</p> <p>Part 9. Signature of Applicant <i>(Read the information on penalties in the Form instructions before completing this Part.)</i> If you are filing for a Re-entry Permit or Refugee Travel Document, you must be in the United States to file this application.</p> <p>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 I seek.</p> <p>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 laws.</p> <p>I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.</p> <p>[deleted]</p> <p>Signature of Applicant</p> <p>1. Date of Signature (mm/dd/yyyy)</p> <p>2. Daytime Phone Number</p>

	form or fail to submit required documents listed in the instructions, you application may be denied.	NOTE: If you do not completely fill out this form or fail to submit required documents listed in the instructions, you application may be denied.
Page 5, Part 9. Information About Person Who Prepared This Application, If Other Than the Applicant	[page 5] Part 9. Information About Person Who Prepared This Application, If Other Than the Applicant ...	[page 5] Part 10. Information About Person Who Prepared This Application, If Other Than the Applicant ...