TABLE OF CHANGES - INSTRUCTIONS

Form I-102, Application for Replacement/Initial Nonimmigrant Arrival-Departure Document

OMB Number: 1615-0079 02/24/2023

Reason for Revision: LimitedREV

Project Phase: 30Day

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 12/31/2023 Edition Date 12/02/2021

Current Page Number and Section	Current Text	Proposed Text
Page 2-6,	[Page 2]	[Page 2]
Specific Instructions	Specific Instructions	Specific Instructions
	Part 4. Applicant's Statement, Contact Information, Certification, and Signature	Part 4. Applicant's Contact Information, Certification, and Signature
	Item Numbers 1.a 6.b. Select the appropriate box to indicate whether you read this application yourself or whether you had an interpreter assist you. If someone assisted you in completing the application, select the box indicating that you used a preparer. Further, you must sign and date your application and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). Every application MUST contain the signature of the applicant (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.	Item Numbers 1 4. You must sign and date your application and, if applicable, provide your daytime telephone number, mobile telephone number, and email address. The signature of a parent or legal guardian, if applicable, is acceptable. A stamped or typewritten name in place of a signature is not acceptable.
	Part 5. Interpreter's Contact Information, Certification, and Signature	Part 5. Interpreter's Contact Information, Certification, and Signature
	Item Numbers 1.a 7.b. If you used anyone as an interpreter to read the Instructions and questions on this	Item Numbers 1 6. If you used anyone as an interpreter to read the Instructions and questions on this application to you in a

application to you in a language in which you are fluent, the interpreter must fill out this section; provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the application.

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

Item Numbers 1.a. - 8.b. This section must contain the signature of the person who completed your application, if other than you, the applicant. If the same individual acted as your interpreter and your preparer, that person should complete both **Part 5.** and **Part 6.** If the person who completed this application is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this application **MUST** sign and date the application. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your application is an attorney or accredited representative, he or she may also need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your application.

Part 7. Additional Information

language in which you are fluent, the interpreter must fill out this section; provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the application.

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

Item Numbers 1. - 6. The person who completed your application, if other than the applicant, must sign this section. If the same individual acted as your interpreter and your preparer, then that person should complete both **Part 5.** and **Part 6.** A stamped or typewritten name in place of a signature is not acceptable.

[no change]

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DHS Privacy Notice

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DHS Privacy Notice

AUTHORITIES: The information requested on this application, and the associated evidence, is collected under the Immigration and Nationality Act section 264, and 8 CFR 264.6.

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DHS Privacy Notice

AUTHORITIES: The information requested on this application, and the associated evidence, is collected under the Immigration and Nationality Act section 264, and 8 Code of Federal Regulations 264.6.

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Paperwork Reduction	Paperwork Reduction Act	Paperwork Reduction Act
Act	An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 45 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application. Send comments regarding	An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 37 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the application. Send comments regarding

the application. Send comments regarding this burden estimate or any other aspect of

this collection of information, including

suggestions for reducing this burden, to:

U.S. Citizenship and Immigration Services,

Office of Policy and Strategy, Regulatory

Gateway Drive, Mail Stop #2140, Camp

Springs, MD 20588-0009; OMB No. 1615-

0079. Do not mail your completed Form

Coordination Division, 5900 Capital

I-102 application to this address.

this burden estimate or any other aspect of

U.S. Citizenship and Immigration Services,

Office of Policy and Strategy, Regulatory

Gateway Drive, Mail Stop #2140, Camp

Springs, MD 20588-0009; OMB No. 1615-

0079. **Do not mail your completed Form**

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