Application for Replacement /Initial Nonimmigrant Arrival - Departure Document

Purpose of This Form.

This form is for a nonimmigrant to apply for a new or replacement for the following forms:

- Form I-94, Nonimmigrant Arrival-Departure Record.
- Form I-95, Crewman Landing Permit.
- Form I-20ID copy for nonimmigrant students.

Who May File.

If you are a nonimmigrant in the U.S., file this application to:

- replace your lost or stolen Form I-94 or Form I-95;
- replace your mutilated Form I-94 or Form I-95; or
- receive a Form I-94, if you were not issued one when you entered as a nonimmigrant, and are filing this application with an application for extension of stay or change of status.
- receive a corrected Form I-94 or Form I-95 or Form I-20ID, if you were issued one with incorrect information.

General Filing Instructions.

Please answer all questions by typing or clearly printing in black ink. If an item is not applicable write "N/A." If an answer is "none," write "none." If you need extra space to answer any item, attach a sheet of paper with your name and your alien registration number (A#), if any, and indicate the number of the item to which the answer refers. You must file your application with the required Initial Evidence. Every application must be properly signed and filed with the correct fee. If you are under 14 years of age, your parent or guardian may sign the application.

Initial Evidence.

Lost or Stolen Form. If you are applying to replace a lost or stolen Form I-94 or Form I-95, submit a copy of the original Form I-94 or submit a copy of the biographic page from your passport and a copy of the page indicating admission as claimed, or other evidence of your admission. If you are unable to submit this evidence, provide a full explanation of why you cannot give any of the above evidence, along with a copy of evidence of your identity and copies of any evidence in your possession to substantiate your claim.

Mutilated Form. If you are applying to replace a mutliated Form I-94 or I-95, attach the original form.

First Form I-94. If you were not issued a Form I-94 at admission and have not since been issued a Form I-94, but now require a Form I-94 for another application you are filing, submit a copy of any evidence in your possession to substantiate your claimed admission.

Document With Incorrect Information. If you want INS to correct your document because it contains inaccurate information, attach the document to your Form I-102 application. If you check box "f" of Part 2, Application type, attach also to your application a statement dated and signed by you, citing specifically the information on your Form I-94, Form I-95 or I-20ID copy that requires correction. Explain in your statement why the information on the document is inaccurate and attach evidence establishing the correct information.

Translations. Any foreign language document must be accompanied by a full English translation which the translator has certified as complete and correct, and by the translator's certification that he or she is competent to translate the foreign language into English.

Copies. If these instructions state that a copy of a document may be filed with this application, and you choose to send us the original, we may keep that original for our records.

Where to File.

If you are filing to replace a Form I-95, file this application at the local INS office having jurisdiction over where you are temporarily located.

If you were not issued a Form I-94 at admission, or are filing this application with an application for extension of stay or change of status, file this application where you are filing the accompanying extension of stay or change of status application.

To request INS to correct a Form I-94, Form I-95 or I-20ID copy that contains inaccurate information, submit your application at the local INS office having jurisdiction over where you are temporarily located, according to that office's instructions. You should contact the local INS office concerning these instructions.

In all other instances, file your application as follows:

If you are in Connecticut, Delaware, District of Columbia,
Maine, Maryland, Massachusetts, New Hampshire, New
Jersey, New York, Pennsylvania, Puerto Rico, Rhode Island,
Vermont, the Virgin Islands, Virginia or West Virginia, mail this
application to: USINS Vermont Service Center, 75 Lower
Welden Street, St. Albans, VT 05479-0001.

If you are in Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, New Mexico, North Carolina, Oklahoma, South Carolina, Tennessee or Texas, mail this application to: USINS Texas Service Center, P.O. Box 851182, Mesquite, TX 75185-1182.

If you are in Arizona, California, Guam, Hawaii or Nevada, mail this application to: USINS California Service Center, P.O. Box 10102, Laguna Niguel, CA 92607-0040.

If you are elsewhere in the U.S., mail this application to: USINS Nebraska Service Center, P.O. Box 87102, Lincoln, NE 68501-7102.

Fee.

The fee for this application is \$100.00. The fee must be submitted in the exact amount. It cannot be refunded. **DO NOT MAIL CASH.**

You do not need to pay a fee to request INS to correct your Form I-94, Form I-95 or I-20ID copy if the error(s) on your document was made by INS, through no fault of your own. If, however, the error(s) was made because of information you provided, or failed to provide, to INS or the U.S. Department of State, you must file to replace or extend your document, according to the instructions on this form, with the \$85.00 fee.

All checks and money orders must be drawn on a bank or other institution located in the United States and must be payable in United States currency. The check or money order should be made payable to the Immigration and Naturalization Service, except that:

- If you are in Guam and are filing this application in Guam, make your check or money order payable to the "Treasurer, Guam."
- If you are in the Virgin Islands and are filing this application in the Virgin Islands, make your check or money order payable to the "Commissioner of Finance of the Virgin Islands."

Checks are accepted subject to collection. An uncollected check will render the application and any document issued invalid. A charge of \$30.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

Processing Information.

Acceptance. Any application that is not signed or is not accompanied by the proper fee will be rejected with a notice that the application is deficient. You may correct the deficiency and resubmit the application. However, an application is not considered properly filed until it is accepted by INS.

Initial processing. Once the application has been accepted, it will be checked for completeness, including submission of the required initial evidence. If you do not completely fill out the form, or file it without required initial evidence, you will not establish a basis for eligibility and we may deny your application.

Decision. You will be notified in writing of the decision on your application. If the application is approved, a new Form I-94, Form I-95 or Form I-20ID will be issued to you.

Penalties.

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are seeking, and may deny any other immigration benefit. In addition, you will face severe penalties provided by law. You may be subject to criminal prosecution and removal from the United States.

Privacy Act Notice.

We ask for the information on this form and associated evidence to determine if you have established eligibility for the immigration benefit you are seeking. We may provide this information to other government agencies. Failure to provide this information, and any requested evidence, may delay a final decision or result in denial of your request.

Paperwork Reduction Act Notice.

We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this applications is as follows: (1) 5 minutes to learn about the law and form; (2) 5 minutes to complete the form; and (3) 15 minutes to assemble and file the application; for a total estimated average of 25 minutes per application. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to both the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington, DC 20536; OMB No. 1115-0079. DO NOT MAIL YOUR COMPLETED APPLICATION TO THIS ADDRESS.

to determine eligibility for the benefit I am seeking.

Signature

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START HERE - Please Type or Prin	FOR IN	IS USE ONLY			
Part 1. Information about you.	Returned	Receipt			
- ,	iiven Middle Initial			Date	
Address - In care of				Date	
Street Number Apt.#				Resubmitted	
City	State	Zip Code		Date	
Date of Birth Country (Month/Day/Year) G Birth				Date Reloc Sent	
Social A# Security #				Date	
Date of Last Admission into U.S. (Month/Day/Year)	I-94 #			Doto	
Current Nonimmigrant Status	Expires on (Month/Day/Year)			Date Reloc Rec'd	
Part 2. Application type. (chec	k one)			Date	
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No Yes (Attach an explanation) If you are unable to provide your original or a copy of your I-94, give the following information:				To Be Completed by Attorney or Representative, if any Fill in box if G-28 is attached	
Your name exactly as it appears on the I-94:				-	t the applicant
Class of Admission:				VOLAG# ATTY State Lic	ense #
Place of Admission:				71111 01010 210	
Part 4. Signature. Read the inform before completing this section. the United States.					
I certify, under penalty of perjury under the law is all true and correct. I authorize the release of					

Date

Dout E	Ciamatura of narrows	aranarina farm	if ather them above	(sign below)
Part 5.	Signature of person p	Jiepailily lulli,	ii oliiei liiali above.	(2)dii pelowi

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature	Print Your Name	Date
Firm Name and Address		