	Form Field Name	Data Length (Max)	Field Type	Barcode Mapping Form Rev 03/11/13 Form Rev 12/17/12		Comment	
				Page	Position		
	Page 1						
	Form Type	4	Alphanumeric	1	1	Format: I-90	
	Form Revision	8	Date	1	2	Format: 03/11/13 or 12/17/12. Must be an exact match to the value printed on the Form I-90 footer.	
	Page Number	1	Numeric	1	3	Format: 1	
Part 1 li	nformation About You						
1	Alien Registration Number (A-Number)	9	Numeric	1	4		
	Your Full Name						
2.a.	Family Name (Last Name)	30	Alpha,Hyphen,Space	1	5		
2.b.	Given Name (First Name)	18	Alpha,Hyphen,Space	1	6		
2.c.	Middle Name	18	Alpha, Space	1	7		
3	Has your name legally changed since the issuance of your Permanent Resident Card? Yes	1	Y/Blank	1	8	The checkboxes in this group are mutually exclusive - the user cannot check multiple boxes in the group.	
	Has your name legally changed since the issuance of your Permanent Resident Card? No	1	Y/Blank	1	9	The barcode value is 'Y' if the checkbox is marked. If the	
	Has your name legally changed since the issuance of your Permanent Resident Card? N/A - I never received my previous card.	1	Y/Blank	1	10	checkbox is not marked, the barcode value is blank.	
	Your name exactly as reflected on your Permanent Resident Card						
4.a.	Family Name (Last Name)	30	Alpha,Hyphen,Space	1	11		
4.b.	Given Name (First Name)	18	Alpha,Hyphen,Space	1	12		
4.c.	Middle Name	18	Alpha, Space	1	13		
	Mailing Address						
5.a.	In Care of Name	34	Alpha,Hyphen,Space	1	14		
5.b.	Street Number and Name	34	Alphanumeric, Space, Forward Slash	1	15	Format: 12345 Example Street Name APT A123  The output in the barcode for Street Number and Name, and Apt. Number, is concatenated. The barcode displays 34	
5.c.	Apt. Ste. Flr.	4	Alphanumeric, Space			characters total: 25 (street names) + 1 (space) + 3 (APT or STE or FLR) + 1 (space) + 4 (Apt#). It is not necessary to pad the field to reach 25 characters.	
5.d.	City or Town	20	Alpha, Space	1	16		
5.e.	State	2	Alpha	1	17		
5.f.	Zip Code	5	Numeric	1	18		



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5.g.	Postal Code	9	Alphanumeric, Space	1	19	
5.h.	Province	20	Alpha, Space	1	20	
5.i.	Country	29	Alpha, Space	1	21	
	U.S. Physical Address					
6.a.	Street Number and Name	34	Alphanumeric, Space, Forward Slash	1	22	Format: 12345 Example Street Name APT A123  The output in the barcode for Street Number and Name, and Apt. Number, is concatenated. The barcode displays 34 characters total: 25 (street names) + 1 (space) + 3 (APT or STE or FLR) + 1 (space) + 4 (Apt#). It is not necessary to pad the field to reach 25 characters.
6.b.	Apt. Ste. Fir.	4	Alphanumeric, Space			
6.c.	City or Town	20	Alpha, Space	1	23	
6.d.	State	2	Alpha	1	24	
6.e.	Zip Code	5	Numeric	1	25	
	Page 2 (Part 1 continued)					
	Form Type	4	Alphanumeric	2	1	Format: I-90
	Form Revision	8	Date	2	2	Format: 03/11/13 or 12/17/12. Must be an exact match to the
	Page Number	1	Numeric	2	3	Format: 2
7	Gender: Male	1	Y/Blank	2	4	The checkboxes in this group are mutually exclusive - the user cannot check multiple boxes in the group.
	Gender: Female	1	Y/Blank	2	5	The barcode value is 'Y' if the checkbox is marked. If the checkbox is not marked, the barcode value is blank.
8	Date of Birth (mm/dd/yyyy)	10	Date	2	6	Format: mm/dd/yyyy
10	Country of Birth	29	Alpha, Space	2	7	
11	Class of Admission	29	Alpha, Space	2	8	
12	Date of Admission (mm/dd/yyyy)	10	Date	2	9	Format: mm/dd/yyyy
13	U.S. Social Security Number (if any)	9	Numeric	2	10	Format: 999999999
Part 2.	Application Type					
	My status is:					
1.a.	Permanent Resident	1	Y/Blank	2	11	The checkboxes in this group are mutually exclusive - the user cannot check multiple boxes in the group.
1.b.	Permanent Resident - In Commuter Status	1	Y/Blank	2	12	The barcode value is 'Y' if the checkbox is marked. If the checkbox is not marked, the barcode value is blank.
1.c.	Conditional Permanent Resident	1	Y/Blank	2	13	
	Reason for application (select only one box):					
	Section A. (To be used only by a permanent resident or a permanent resident in commuter status)					



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2.a.	My previous card has been lost, stolen or destroyed.	1	Y/Blank	2	14	The checkboxes in this group are mutually exclusive - the
2.b.	My previous card was issued but never received.	1	Y/Blank	2	15	user cannot check multiple boxes in the group.
2.c.	My existing card has been mutilated.	1	Y/Blank	2	16	
2.d.	My existing card has incorrect data because of USCIS error.	1	Y/Blank	2	17	The barcode value is 'Y' if the checkbox is marked. If the checkbox is not marked, the barcode value is blank.
2.e.	My name or other biographic information has been legally changed since issuance of my existing card.	1	Y/Blank	2	18	
2.f.	My present card will expire in 6 months or has already expired.	1	Y/Blank	2	19	
2.g1.	I have reached my 14th birthday and am registering as required. My existing card will expire after my 16th birthday.	1	Y/Blank	2	20	
2.g2.	I have reached my 14th birthday and am registering as required. My existing card will expire before my 16th birthday.	1	Y/Blank	2	21	
2.h1.	I am a permanent resident who is taking up Commuter status.	1	Y/Blank	2	22	
2.h2.	I am a commuter who is taking up actual residence in the United States.	1	Y/Blank	2	23	
2.i.	I have been automatically converted to permanent resident status.	1	Y/Blank	2	24	
2.j.	I have a prior edition of the Alien Registration Card, or I am applying to replace my current Permanent Resident Card for a reason that is not specified above.	1	Y/Blank	2	25	
	Section B. (To be used only by a conditional permanent resident)					
3.a.	My previous card has been lost, stolen or destroyed.	1	Y/Blank	2	26	The checkboxes in this group are mutually exclusive - the
3.b.	My previous card was issued but never received.	1	Y/Blank	2	27	user cannot check multiple boxes in the group.
3.c.	My existing card has been mutilated.	1	Y/Blank	2	28	The barcode value is 'Y' if the checkbox is marked. If the
3.d.	My existing card has incorrect data because of USCIS error.	1	Y/Blank	2	29	checkbox is not marked, the barcode value is blank.
3.e.	My name or other biographical information has been legally changed since the issuance of my existing card.	1	Y/Blank	2	30	
	Page 3					
	Form Type	4	Alphanumeric	3	1	Format: I-90
	Form Revision	8	Date	3	2	Format: 03/11/13 or 12/17/12. Must be an exact match to the value printed on the Form I-90 footer.
	Page Number	1	Numeric	3	3	Format: 3
Part 3.	Processing Information					
	Mother's Name					
1	Given Name (First Name)	18	Alpha,Hyphen,Space	3	4	
	Father's Name					
2	Given Name (First Name)	18	Alpha,Hyphen,Space	3	5	



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5.a1. City and Sta  Page 4  Part 5. Signature of		29	Alpha,Hyphen,Space, Comma	3	6	
Page 4 Part 5. Signature of		29		3	6	
Part 5. Signature of						
<u> </u>	f Applicant					
Form Type		4	Alphanumeric	4	1	Format: I-90
Form Revision	ion	8	Date	4	2	Format: 03/11/13 or 12/17/12. Must be an exact match to the value printed on the Form I-90 footer.
Page Number	per	1	Numeric	4	3	Format: 4
1.b. Date of Sign	nature (mm/dd/yyyy)	10	Date	4	4	Format: mm/dd/yyyy
2 Daytime Pho	one Number	10	Numeric	4	5	Format: 9999999999



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