## I-90 Form and Barcode Requirements



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\begin{tabular}{|c|c|c|c|c|c|c|}
\hline 5.g. \& Postal Code \& 9 \& Alphanumeric, Space \& 1 \& 19 \& \\
\hline 5.h. \& Province \& 20 \& Alpha, Space \& 1 \& 20 \& \\
\hline \multirow[t]{2}{*}{5.i.} \& Country \& 29 \& Alpha, Space \& 1 \& 21 \& \\
\hline \& \multicolumn{3}{|l|}{U.S. Physical Address} \& \& \& \\
\hline 6.a. \& \begin{tabular}{|l} 
Street Number and Name \\
\hline Apt. Ste. Flr.
\end{tabular} \& 34

4 \& \begin{tabular}{l}
Alphanumeric, Space, Forward Slash <br>
Alphanumeric, Space

 \& 1 \& 22 \& 

Format: 12345 Example Street Name APT A123 <br>
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.
\end{tabular} <br>

\hline 6.c. \& City or Town \& 20 \& Alpha, Space \& 1 \& 23 \& <br>
\hline 6.d. \& State \& 2 \& Alpha \& 1 \& 24 \& <br>
\hline \multirow[t]{5}{*}{6.e.} \& Zip Code \& 5 \& Numeric \& 1 \& 25 \& <br>
\hline \& \multicolumn{3}{|l|}{Page 2 (Part 1 continued)} \& \& \& <br>
\hline \& Form Type \& 4 \& Alphanumeric \& 2 \& 1 \& Format: I-90 <br>
\hline \& Form Revision \& 8 \& Date \& 2 \& 2 \& Format: 03/11/13 or 12/17/12. Must be an exact match to the <br>
\hline \& Page Number \& 1 \& Numeric \& 2 \& 3 \& Format: 2 <br>

\hline \multirow[t]{2}{*}{7} \& Gender: Male \& 1 \& Y/Blank \& 2 \& 4 \& \multirow[t]{2}{*}{| The checkboxes in this group are mutually exclusive - the user cannot check multiple boxes in the group. |
| :--- |
| The barcode value is ' Y ' if the checkbox is marked. If the checkbox is not marked, the barcode value is blank. |} <br>

\hline \& Gender: Female \& 1 \& Y/Blank \& 2 \& 5 \& <br>
\hline 8 \& Date of Birth (mm/dd/yyyy) \& 10 \& Date \& 2 \& 6 \& Format: mm/dd/yyyy <br>
\hline 10 \& Country of Birth \& 29 \& Alpha, Space \& 2 \& 7 \& <br>
\hline 11 \& Class of Admission \& 29 \& Alpha, Space \& 2 \& 8 \& <br>
\hline 12 \& Date of Admission (mm/dd/yyyy) \& 10 \& Date \& 2 \& 9 \& Format: mm/dd/yyyy <br>
\hline 13 \& U.S. Social Security Number (if any) \& 9 \& Numeric \& 2 \& 10 \& Format: 999999999 <br>
\hline \multicolumn{2}{|l|}{Part 2. Application Type} \& \& \& \& \& <br>
\hline \& My status is: \& \& \& \& \& <br>

\hline 1.a. \& Permanent Resident \& 1 \& Y/Blank \& 2 \& 11 \& \multirow[t]{3}{*}{| The checkboxes in this group are mutually exclusive - the user cannot check multiple boxes in the group. |
| :--- |
| The barcode value is ' $Y$ ' if the checkbox is marked. If the checkbox is not marked, the barcode value is blank. |} <br>

\hline 1.b. \& Permanent Resident - In Commuter Status \& 1 \& Y/Blank \& 2 \& 12 \& <br>
\hline \multirow[t]{3}{*}{1.c.} \& Conditional Permanent Resident \& 1 \& Y/Blank \& 2 \& 13 \& <br>
\hline \& Reason for application (select only one box): \& \& \& \& \& <br>
\hline \& Section A. (To be used only by a permanent resident or a permanent resident in commuter status) \& \& \& \& \& <br>
\hline
\end{tabular}

## I-90 Form and Barcode Requirements


U.S. Citizenship
and Immigration
Services

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|  | Did you enter the United States with an immigrant visa? Complete number 5.a. and number 5.a1. |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Port of entry where admitted to United States |  |  |  |  |  |
| 5.a1. | City and State | 29 | Alpha,Hyphen,Space, Comma | 3 | 6 |  |
|  | Page 4 |  |  |  |  |  |
| Part 5 | Signature of Applicant |  |  |  |  |  |
|  | Form Type | 4 | Alphanumeric | 4 | 1 | Format: I-90 |
|  | Form Revision | 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 | 1 | Numeric | 4 | 3 | Format: 4 |
| 1.b. | Date of Signature (mm/dd/yyyy) | 10 | Date | 4 | 4 | Format: mm/dd/yyy |
| 2 | Daytime Phone Number | 10 | Numeric | 4 | 5 | Format: 9999999999 |

