

# I-102, Application for Replacement/

## Nonimmigrant Arrival - Departure Document

**START HERE - Please type or print in black ink.**

**For USCIS Use Only**

**Part 1. Information About You**

Family Name	Given Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address - In care of - <input type="text"/>		
Street Number and Name In care of -		Apt./Suite #
<input type="text"/>		<input type="text"/>
City	State	
<input type="text"/>	<input type="text"/>	
Zip/Postal Code	Country	Date of Birth(mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of Birth	Country of Citizenship/Nationality	
<input type="text"/>	<input type="text"/>	
A # (If any)	U.S. Social Security # (if any)	
<input type="text"/>	<input type="text"/>	
Date (mm/dd/yyyy) and Place of Last Admission	Current Nonimmigrant Status	
<input type="text"/>	<input type="text"/>	
Status Expires on (mm/dd/yyyy)	I-94, I-94W, or I-95 Arrival/Departure Document #	
<input type="text"/>	<input type="text"/>	

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	
<input type="checkbox"/> Applicant Interviewed on _____	

New I-94 #

Remarks

**Part 2. Reason for Application**

Check the box that best describes your reason for requesting a replacement document. (Check one box).

- a.  I am applying to replace my lost or stolen Form I-94 (or I-94W).
- b.  I am applying to replace my lost or stolen Form I-95.
- c.  I am applying to replace Form I-94 (or I-94W) because it is mutilated. I have attached my original I-94 (or I-94W).
- d.  I am applying to replace Form I-95 because it is mutilated. I have attached original Form I-95.
- e.  I was not issued Form I-94 when I entered as a nonimmigrant, and I am filing this application together with an application for an extension of stay/change of status.
- f.  I was issued Form I-94, I-94W, or I-95 with incorrect information, and I am requesting USCIS to correct the document. I have attached my original Form I-94, I-94W, or I-95.
- g.  I was not issued Form I-94 when I entered as a nonimmigrant member of military, and I am filing this application for an initial Form I-94.

Action Block

To Be Completed by Attorney or Representative if any.  
 Fill in box if G-28 is attached to represent the applicant.

ATTY State License #

**Part 3. Processing Information**

1. Are you filing this application with any other petition or application?

No

Yes - Form #

2. Are you now in removal proceedings?

No

Yes (Give detailed information regarding the proceedings. If you need more space to complete the answer, use separate sheet(s) of paper. Write your name and A #, if any, and "Part 3, Number 2" at the top of each sheet.)

3. If you are unable to provide the original of your Form I-94, I-94W, or I-95, give the following information:

Your name exactly as it appears on Form I-94, I-94W, or I-95, if known (Print clearly)

Class of Admission

Place of Admission

**Part 4. Signature** (Read the information on penalties in the instructions before completing this section. You must file application while in the United States.)

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 I am seeking.

Signature

Daytime Telephone Number (With area code) Date (mm/dd/yyyy)

**Part 5. Signature of Person Preparing Form, if Other Than Above** (Sign below)

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 or Type Your Name

Firm Name

Firm Address (Street Number and Name or P.O. Box, City, State, Zip Code)

Daytime Telephone Number (With area code)

E-Mail Address (If any)

Date (mm/dd/yyyy)