

# I-191, Application for Advance Permission to Return to Unrelinquished Domicile

<b>Action Block</b>	<b>Fee Stamp</b>
	Alien Registration Number
	Date

(1) I hereby apply for permission to return to the United States under the authority contained in Section 212(c) of the Immigration and Nationality Act.

MY NAME IS: _____	(First) _____ (Middle) _____ (Last)	
DATE OF BIRTH: (mm/dd/yyyy)	PLACE OF BIRTH: (City, Province, Country)	I AM A CITIZEN/NATIONAL OF: (Country)
PRESENT ADDRESS: (Street and number, apt. no., city, state, country)		

(2) I was lawfully admitted to the United States for permanent residence at:

PORT OF ENTRY/DHS OFFICE:	DATE: (mm/dd/yyyy)	NAME OF VESSEL OR OTHER MEANS OF CONVEYANCE:
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(3) Since that admission I have departed from and reentered the United States as follows:

DEPARTED FROM THE UNITED STATES			RETURNED TO THE UNITED STATES			PURPOSE OF TRIP
Port	Date (mm/dd/yyyy)	Vessel or Other Means of Conveyance	Port	Date (mm/dd/yyyy)	Vessel or Other Means of Conveyance	

(4) During the past 7 years I have resided at the following places: (List present address first)

(Complete Address - Include Apt. No.)	From -	To -
		<b>Present time</b>

(5) During the past 7 years I have been employed as follows: (List present employment first)

From -	To -	Employer's Name	Address	Occupation or Type of Business

(6) My immediate family (spouse, unmarried minor children and parents) consists of the following persons:

Name	Relation	Date and Country of Birth	Citizen of	Present Address

(7) I \_\_\_\_\_ depart(ed) temporarily from the United States on or about \_\_\_\_\_ and will remain \_\_\_\_\_  
 (Intend to or have) \_\_\_\_\_ (Date - mm/dd/yyyy)  
 in \_\_\_\_\_ approximately \_\_\_\_\_, for the purpose of \_\_\_\_\_  
 (Country) \_\_\_\_\_ (Length of Time)  
 ; and expect to apply for admission at \_\_\_\_\_ (Port)

Remarks:	RECEIVED	TRANS. IN	RET'D-TRANS. OUT	COMPLETED



**(8)** I believe I may be inadmissible to the United States for the following reasons:

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I understand that the information herein contained may be used in any criminal or civil proceedings, including removal, hereafter instituted against me.

I certify that the statements above are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
*(Signature of Applicant)*

**Signature of person preparing form, if other than applicant.**

I declare that the document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

\_\_\_\_\_  
*(Signature)*

\_\_\_\_\_  
*(Address)*

\_\_\_\_\_  
*(Date)*

Decision:

Application granted upon the following terms and conditions:

DATE  
OF  
ACTION

DD  
DISTRICT

