I-90 Form and Barcode Requirements

	Form Field Name	Data Length (Max)	Field Type	Barcode Mapping Form Rev 06/30/15Y Form Rev 12/23/16N		Comment
				Page	Position	
	Page 1					
	Form Type	4	Alphanumeric	1	1	Format: I-90
	Form Revision	8	Date	1	2	Format: mm/dd/yy
	Page Number	1	Numeric	1	3	Format: 1
Part 1 Information About You						
1	Alien Registration Number (A-Number)	9	Numeric	1	4	Do not include the leading 'A'
2	USCIS ELIS Account Number (if any)	12	Numeric	1	5	
	Your Full Name					
3.a.	Family Name (Last Name)	30	Alpha,Hyphen,Space	1	6	
3.b.	Given Name (First Name)	18	Alpha,Hyphen,Space	1	7	
3.c.	Middle Name	18	Alpha, Space	1	8	
4	Has your name legally changed since the issuance of your Permanent Resident Card? Yes/No/Never Received	1	Y/N/A	1	9	Y = Yes N - No A = Never Received
	Provide your name exactly as it is printed on your current Permanent Resident Card					
5.a.	Family Name (Last Name)	30	Alpha,Hyphen,Space	1	10	
5.b.	Given Name (First Name)	18	Alpha,Hyphen,Space	1	11	
5.c.	Middle Name	18	Alpha, Space	1	12	
	Mailing Address					
6.a.	In Care of Name	34	Alpha,Hyphen,Space	1	13	
6.b.	Street Number and Name	34	Alphanumeric, Space	1	14	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#).
6.c.	Apt. Ste. Flr.					
6.d.	City or Town	20	Alpha, Space	1	15	
6.e.	State	2	Alpha	1	16	
6.f.	Zip Code	5	Numeric	1	17	
6.g.	Province	20	Alpha, Space	1	18	
6.h.	Postal Code	9	Alphanumeric, Space	1	19	
6.i.	Country	42	Alphanumeric, Hyphen, Space, Special Characters	1	20	
	Page 2 (Part 1 continued)					
	Form Type	4	Alphanumeric	2	1	Format: I-90
	Form Revision	8	Date	2	2	Format: mm/dd/yy
	Page Number	1	Numeric	2	3	Format: 2
	Physical Address					
7.a.	Street Number and Name	34	Alphanumeric, Space	2	4	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#).
7.b.	Apt. Ste. Flr.					
7.c.	City or Town	20	Alpha, Space	2	5	
7.d.	State	2	Alpha	2	6	
7.e.	Zip Code	5	Numeric	2	7	
7.f.	Province	20	Alpha, Space	2	8	
7.g.	Postal Code	9	Alphanumeric, Space	2	9	
7.h.	Country	42	Alphanumeric, Hyphen, Space, Special Characters	2	10	
8	Gender: Male	1	Y/Blank	2	11	
	Gender: Female	1	Y/Blank	2	12	
9	Date of Birth (mm/dd/yyyy)	10	Date	2	13	Format: mm/dd/yyyy
10	City/Town/Village of Birth	38	Alpha, Space	2	14	
11	Country of Birth	42	Alphanumeric, Hyphen, Space, Special Characters	2	15	
	Mother's Name					
12	Given Name (First Name)	18	Alpha, Hyphen, Space	2	16	
	Father's Name					
13	Given Name (First Name)	18	Alpha, Hyphen, Space	2	17	
14	Class of Admission	38	Alphanumeric, Hyphen, Space, Special Characters	2	18	
15	Date of Admission (mm/dd/yyyy)	10	Alphanumeric, Hyphen,	2	19	Format: mm/dd/yyyy
16	U.S. Social Security Number (if any)	9	Numeric	2	20	Format: 999999999
Part 2. Application Type						
	My status is:					

1.a.	Lawful Permanent Resident	1	Y/Blank	2	21	
1.b.	Permanent Resident - In Commuter Status	1	Y/Blank	2	22	
1.c.	Conditional Permanent Resident	1	Y/Blank	2	23	
	Reason for application (select only one box):					
	Section A. (To be used only by a law permanent resident or a permanent resident in commuter status)					
2.a.	My previous card has been lost, stolen or destroyed.	1	Y/Blank	2	24	
2.b.	My previous card was issued but never received.	1	Y/Blank	2	25	
2.c.	My existing card has been mutilated.	1	Y/Blank	2	26	
2.d.	My existing card has incorrect data because of DHS error.	1	Y/Blank	2	27	
2.e.	My name or other biographic information has been legally changed since issuance of my existing card.	1	Y/Blank	2	28	
2.f.	My existing card has already expiredor will expire within six months.	1	Y/Blank	2	29	
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	30	
2.g2.	I have reached my 14th birthday and am registering as required. My existing card will expire BEORE my 16th birthday.	1	Y/Blank	2	31	
	Page 3					
	Form Type	4	Alphanumeric	3	1	Format: I-90
	Form Revision	8	Date	3	2	Format: mm/dd/yy
	Page Number	1	Numeric	3	3	Format: 3
Part 2. Application Type (continued)						
2.h1.	I am a permanent resident who is taking up Commuter status.	1	Y/Blank	3	4	
2.h1.1.	My Port-of-Entry (POE) into the United States will be: City and State	25	Alpha, Space	3	5	
2.h2.	I am a communter who is taking up actual residence in the United States.	1	Y/Blank	3	6	
2.i.	I have been automatically converted to permanent resident status.	1	Y/Blank	3	7	
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	3	8	
	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	3	9	
3.b.	My previous card was issued but never received.	1	Y/Blank	3	10	
3.c.	My existing card has been mutilated.	1	Y/Blank	3	11	
3.d.	My existing card has incorrect data because of DHS error.	1	Y/Blank	3	12	
3.e.	My name or other biographical information has been legally changed since the issuance of my existing card.	1	Y/Blank	3	13	
Part 3. Processing Information						
1	Location where you applied for an immigrant visa or adjustment of status	38	Alphanumeric, Hyphen, Space, Special Characters	3	14	
2	Location where your immigrant visa was issued or USCIS office where you were granted adjustment of status	38	Alphanumeric, Hyphen, Space, Special Characters	3	15	
	Complete Item Numbers 3.a. and 3.a.1. if you entered the United States with an immigrant visa. (If you were granted adjustment of status, proceed to Item Number 4.)					
3.a.	Destination in the United States at time of admission	38	Alphanumeric, Hyphen, Space, Special Characters	3	16	
3.a1.	Port-of-Entry where admitted to the United States: City or Town and State	25	Alphanumeric, Hyphen, Space, Special Characters	3	17	
4	Have you ever been in exclusion, deportation, or removal proceedings or ordered removal from the United States?	1	Y/N	3	18	
5	Since you were granted premanent residence, have you ever filed Form I-407, Abandonment by Alien of Status as Lawful Permanent Resident, or otherwise been determined to have abandoned your status?	1	Y/N	3	19	
	NOTE: If you answered "Yes" to Item Numbers 4. or 5. above, provide a detailed explanation in the space provided in Part 8. Additional Information.					
	Biographic Information					
6	Ethnicity (select only one box): Hispanic or Latino; Not Hispanic or Latino	1	H/N/blank	3	20	(H=Hispanic, N=Not Hispanic)
7	Race (Select all applicable boxes)					
	White	1	Y/Blank	3	21	

	Asian	1	Y/Blank	3	22	
	Black or African American	1	Y/Blank	3	23	
	American Indian or Alaska Native	1	Y/Blank	3	24	
	Native Hawaiian or Other Pacific Islander	1	Y/Blank	3	25	
8	Height					
	Feet	1	Numeric	3	26	
	Inches	2	Numeric	3	27	
9	Weight					
	Pounds	1	Numeric	3	28	The values in each of the three individual text boxes are concatenated into a single field
10	Eye Color (select only one box)	3	BLK/BLU/BRO/GRY/GRN/HAZ/MAR/PNK/UNK	3	29	Black = BLK Blue = BLU Brown = BRO Gray = GRY Green = GRN Hazel = HAZ Maroon = MAR Pink = PNK Unknown/Other = UNK
11	Hair Color (select only one box)	3	BAL/BLK/BLN/BRO/GRY/RED/SDY/WHI/UNK	3	30	Bald = BAL Black = BLK Blond = BLN Brown = BRO Gray = GRY Red = RED Sandy = SDY White = WHI Unknown/Other = UNK
	Page 4					
	Form Type	4	Alphanumeric	4	1	Format: I-90
	Form Revision	8	Date	4	2	Format: mm/dd/yy
	Page Number	1	Numeric	4	3	Format: 4
Part 4.	**Accommodations for Individuals With Disabilities and Impairments (Read the information in the Form I-90 instructions before completing this part.)**					
	NOTE: If you need extra space to complete this section, use the space provided in Part 8. Additional Information.					
1	Are you requesting an accomodation because of a disability and/or impairment? Yes/No	1	Y/N/Blank	4	4	
	If you answered "Yes," check any applicable boxes:					
1.a.	I am deaf or hard of hearing and request the following accommodation (if you are requesting a sign-language interpreter, indicate for which language (e.g., American Sign Language)):	1	Y/Blank	4	5	
	Text field for 1.a.	134	Alpha-numeric, space, plus special characters (Period, Comma, Apostrophe, Hyphen, and Ampersand)	4	6	
1.b.	I am blind or sight-impaired and request the following accomodations:	1	Y/Blank	4	7	
	Text field for 1.b.	134	Alpha-numeric, space, plus special characters (Period, Comma, Apostrophe, Hyphen, and Ampersand)	4	8	
1.c.	I have another type of disability and/or impairment (describe the nature of your disability and/or impairment and the accommodation you are requesting):	1	Y/Blank	4	9	
	Text field for 1.c.	134	Alpha-numeric, space, plus special characters (Period, Comma, Apostrophe, Hyphen, and Ampersand)	4	10	
Part 5.	**Applicant's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature**					
	NOTE: Read the information on penalties in the Form I-90 instructions before completing this part. You must file Form I-90 while in the United States.					
	NOTE: Check the box for either Item Number 1.a. or 1.b. If applicable, check the box for Item Number 2.					
1.a.	I can read and understand English, and have read and understand each and every question and instruction on this application, as well as my answer to each question. I have read and understand the Acknowledgement of Appointment at USCIS Application Support Center.	1	Y/Blank	4	11	

1.b.	The interpreter named in Part 6 has read to me each and every question and instruction on this application, as well as my answer to each question, in	1	Y/Blank	4	12	
	a language in which I am fluent. I understand each and every question and instruction on this application as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above. The interpreter named Part 6. has also read the Acknolwedgement of Appointment at USCIS Application Support Center to me, in the language in which I am fluent, and I understand this Application Support Center (ASC) Acknowledgement as read to me by my interpreter.	34	Alpha-numeric, space, plus special characters (Period, Comma, Apostrophe, Hyphen, and Ampersand)	4	13	
2	I have requested the services of and consented to	1	Y/Blank	4	14	
	I have requested the services of and consented to: Text Box	34	Alpha-numeric, space, plus special characters (Period, Comma, Apostrophe, Hyphen, and Ampersand)	4	15	
	who is/is not an attorney or accredited representative, preparing this application for me. This person who assisted me in preparing my application has reviewed the Acknowledgement of Appointment at USCIS Application Support Center with me, and I understand the ASC Acknowledgement.	1	Y/N/Blank	4	16	
	Page 5					
	Form Type	4	Alphanumeric	5	1	Format: I-90
	Form Revision	8	Date	5	2	Format: mm/dd/yy
	Page Number	1	Numeric	5	3	Format: 5
Part 5. Applicant's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature (continued)						
	Applicant's Contact Information					
3	Applicant's Daytime Telephone Number	10	Numeric	5	4	Format: 999999999
4	Applicant's Mobile Telephone Number (if any)	10	Numeric	5	5	Format: 999999999
5	Applicant's Email Address (if any)	38	Alphanumeric and Special (period and @)	5	6	
	Acknowledgement of Appointment at USCIS Application Support					
	I, _____, understand that the purpose of a USCIS ASC appointment is for me to provide fingerprints, photograph, and/or signature and to re-affirm that all of the information in my application is complete, true, and correct and was provided by me.	30	Alpha, Space, Hyphen	5	7	
	Applicant's Signature					
6.b.	Date of Signature	10	Alphanumeric, Hyphen, Special Characters	5	8	Format: mm/dd/yyyy
Part 6. Interpreter's Contact Information, Certification, and Signature						
	Interpreter's Full Name					
	Provide the following information concerning the interpreter:			5		
1.a.	Interpreter's Family Name (Last Name)	30	Alpha,Hyphen,Space	5	9	
1.b.	Interpreter's Given Name (First Name)	18	Alpha,Hyphen,Space	5	10	
2	Interpreter's Business or Organization Name (if any)	30	Alphanumeric, Hyphen, Space, Special Characters	5	11	
	Page 6					
	Form Type	4	Alphanumeric	6	1	Format: I-90
	Form Revision	8	Date	6	2	Format: mm/dd/yy
	Page Number	1	Numeric	6	3	Format: 6
Part 6. Interpreter's Contact Information, Certification, and Signature (continued)						
	Interpreter's Mailing Address					
3.a. 3.b.	Street Number and Name Apt. Ste. Flr.	34	Alphanumeric, Space	6	4	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#).
3.c.	City or Town	20	Alpha	6	5	
3.d.	State	2	Alpha	6	6	
3.e.	Zip Code	5	Numeric	6	7	
3.f.	Province	20	Alpha	6	8	
3.g.	Postal Code	9	Alphanumeric, Space	6	9	
3.h.	Country	42	Alphanumeric, Hyphen, Space, Special Characters	6	10	
	Interpreter's Contact Information					
4	Interpreter's Daytime Telephone Number	10	Numeric	6	11	
5	Interpreter's E-mail Address	38	Alphanumeric and Special (period and @)	6	12	
	Interpreter's Certification					
	I certify that: I am fluent in English and _____	18	Alpha, Space	6	13	

	Interpreter's Signature					
6.b.	Date of Signature	10	Numeric	6	14	Format: mm/dd/yyyy
Part 7. Contact Information, Statement, Certification, and Signature of the Person Preparing This Application, If Other Than the Applicant						
	Preparer's Full Name					
	Provide the following information concerning the preparer:					
1.a.	Preparer's Family Name (Last Name)	30	Alpha,Hyphen,Space	6	15	
1.b.	Preparer's Given Name (First Name)	18	Alpha,Hyphen,Space	6	16	
2	Preparer's Business or Organization Name (if any)	30	Alphanumeric, Hyphen, Space, Special Characters	6	17	
	Page 7					
	Form Type	4	Alphanumeric	7	1	Format: I-90
	Form Revision	8	Date	7	2	Format: mm/dd/yy
	Page Number	1	Numeric	7	3	Format: 7
Part 7. Contact Information, Statement, Certification, and Signature of the Person Preparing This Application, If Other Than the Applicant (continued)						
	Preparer's Mailing Address					
3.a.	Street Number and Name	34	Alphanumeric, Space	7	4	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#).
3.b.	Apt. Ste. Flr.					
3.c.	City or Town	20	Alpha	7	5	
3.d.	State	2	Alpha	7	6	
3.e.	Zip Code	5	Numeric	7	7	
3.f.	Province	20	Alpha	7	8	
3.g.	Postal Code	9	Alphanumeric, Space	7	9	
3.h.	Country	42	Alphanumeric, Hyphen, Space, Special Characters	7	10	
	Preparer's Contact Information					
4	Preparer's Daytime Telephone Number	10	Numeric	7	11	Format: 999999999
5	Preparer's Fax Telephone Number (if any)	10	Numeric	7	12	Format: 999999999
6	Preparer's E-mail Address (if any)	38	Alphanumeric and Special (period and @)	7	13	
	Preparer's Statement					
7.a.	I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.	1	A/B/Blank	7	14	Am not an attorney = A Am an attorney = B
7.b.	I am an attorney or accredited representative and my representation of the applicant in this case extends/does not extend beyond the preparation of this application.	1	E/D/Blank	7	15	Extends = E Does not extend = D
	Preparer's Certification					
	Preparer's Signature					
8.b.	Date of Signature (mm/dd/yyyy)	10	Date	7	16	Format: mm/dd/yyyy
	Page 8					
	Form Type	4	Alphanumeric	8	1	Format: I-90
	Form Revision	8	Date	8	2	Format: mm/dd/yy
	Page Number	1	Numeric	8	3	Format: 8
Part 8. Additional Information						
	Your Full Name					
1.a.	Family Name (Last Name)	30	Alpha,Hyphen,Space	8	4	
1.b.	Given Name (First Name)	18	Alpha,Hyphen,Space	8	5	
1.c.	Middle Name	18	Alpha, Space	8	6	
2	A-Number (if any)	9	Numeric	8	7	Do not include the leading 'A'
3.a.	Page Number	2	Alphanumeric, Hyphen, Special Characters	8	8	
3.b.	Part Number	4	Alphanumeric, Hyphen, Special Characters	8	9	
3.c.	Item Number	8	Alphanumeric, Hyphen, Special Characters	8	10	
3.d.	Explanation	250	Alphanumeric, Hyphen, Special Characters	8	11	
4.a.	Page Number	2	Alphanumeric, Hyphen, Special Characters	8	12	
4.b.	Part Number	4	Alphanumeric, Hyphen, Special Characters	8	13	
4.c.	Item Number	8	Alphanumeric, Hyphen, Special Characters	8	14	
4.d.	Explanation	250	Alphanumeric, Hyphen, Special Characters	8	15	
5.a.	Page Number	2	Alphanumeric, Hyphen, Special Characters	8	16	
5.b.	Part Number	4	Alphanumeric, Hyphen, Special Characters	8	17	

5.c.	Item Number	8	Alphanumeric, Hyphen, Special Characters	8	18	
5.d.	Explanation	250	Alphanumeric, Hyphen, Special Characters	8	19	