

Alien's Change of Address Card

Department of Homeland Security U.S. Citizenship and Immigration Services

USCIS
Form AR-11
OMB No. 1615-0007
Expires 03/31/2021

NOTE: An asterisk (*) indicates a mandatory field that must be completed.

Information About You			
*Family Name (Last Name)	*Given Name (First Name)	Mid	dle Name (if applicable)
I am in the United States as a: Usistor	Student Permanent Resident	Other (Specify	y)
Country of Citizenship		<u>*</u> E	Pate of Birth (mm/dd/yyyy
Alien Registration Number (A-Number) (if an	y)		
Information About Your Address			
*Present Physical Address (No PO Boxes)			
*Street Number and Name		Apt. Ste. Flr.	Number
*City or Town		*State	*ZIP Code
Previous Physical Address			(USPS ZIP Code Lookup)
Street Number and Name		Apt. Ste. Flr.	Number
City or Town		State	ZIP Code
Mailing Address (optional)			,
Street Number and Name		Apt. Ste. Flr.	Number
City or Town		State	ZIP Code
			(USPS ZIP Code Lookup)
Your Signature			
*Your Signature		Da	te of Signature (mm/dd/yy