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

OMB No. 1615-0007; Expires 12/31/2014

AR-11, Alien's Change of Address Card

*Name (Last in CAPS)	*(First Name)	(Middle Name)	I am in the United States as a: ☐ Visitor ☐ Permanent Resident ☐ Student ☐ Other _____(Specify)
Country of Citizenship	*Date of Birth (mm/dd/yyyy)		A-Number (Copy Number From Alien Card) **A-**

*Present Address (Street or Rural Route) *(City or Post Office) *(State) *(Zip Code)

(If the above address is temporary) I expect to remain there _____ Years _____ Months

Last Address (Street or Rural Route) (City or Post Office) (State) (Zip Code)

I work for or attend school at: (Employer's Name or Name of School)

(Street Address or Rural Route) (City or Post Office) (State) (Zip Code)

Port of Entry Into U.S.	Date of Entry Into U.S. (mm/dd/yyyy)	If not a Permanent Resident, my stay in the U.S. expires on: (Date - mm/dd/yyyy)
*Signature	Date (mm/dd/yyyy)	

Form AR-11 (Rev. 12/11/11) Y

*** Indicates mandatory fields that must be completed.**

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This card is to be used by all aliens to report a change of address within 10 days of such change. The collection of this information is required by Section 265 of the Immigration and Nationality Act (8 U.S.C. 1305). The data is used by U.S. Citizenship and Immigration Services for statistical and record purposes and may be furnished to Federal, State, local and foreign law enforcement officials. Failure to report a change of address is punishable by fine or imprisonment and/or removal.

ADVISORY: This card is not evidence of identity, age, or status claimed.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 5 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Products Division, Office of the Executive Secretariat, 20 Massachusetts Avenue, N.W., Washington, DC 20529-2020. OMB No. 1615-0007. **Do not mail your application to this address.**

Mail Your Form AR-11 to the Address Below:

U.S. Department of Homeland Security
Citizenship and Immigration Services
Attn: Change of Address
1344 Pleasants Drive
Harrisonburg, VA 22801