Application for Naturalization

AND SECUL

Department of Homeland Security

USCIS						
Form N-400						
OMB No. 1615-0052						
Expires 09/30/2022						

TAND SEC		Prepared by the ILRC & CRLAF, July 2020. Annotated working copy of the N-400. Do not	Expires 09/30/2022
For USCIS Use Only	Date Stamp	submit to the USCIS.	Action Block
Remarks			

START HERE - Type or print in black ink. Type or print "N/A" if an item is not applicable or the answer is none, unless otherwise indicated. Failure to answer all of the questions may delay U.S. Citizenship and Immigration Services (USCIS) processing your Form N-400. **NOTE: You must complete Parts 1. - 15.**

				e mother or father is a U.S. citizen by birth, or was natur S. citizen. Before you consider filing this application, p	loago vigit the
<u>wwv</u>	v.usci	s.gov	for more informati	ion on this topic and to review the instructions for Form pplication for Citizenship and Issuance of Certificate U	N-600, Applic American Samoa or
NO	TE: A	Are eit	her of your parents	s a United States citizen? If you answer "Yes," then con	nplete Part 6. the A# sections blank.
Pa	rt 1.	Info		 If you answer "No," then skip Part 6. and go to Part t Your Eligibility (Select only one box or you d) 	
1.	You	are at	t least 18 years of a	age and:	May send 90 days
	A.		Have been a lawfu	al permanent resident of the United States for at least 5	before 5 or 3 years.
	В.		and living with the	al permanent resident of the United States for at least 3 years, and your e you filed your Form N-400.	•
	C.		spouse is regularly 319(b).) If your re	anent resident of the United States and you are the spory y engaged in specified employment abroad. (See the Im- esidential address is outside the United States and you a ce from the list below where you would like to have you	imigration and Nationality Act (INA) section re filing under Section 319(b), select the
	D.		Are applying on the	he basis of qualifying military service.	
			Other (Explain):		1
	Е.		Other (Explain).		
Da	t)	Infa	www.adian Alban	t Vou (Porson applyin	

Part 2. Information About You (Person applyin Name as it appears on birth certificate or most recent legal document (i.e. marriage certificate, etc.)

1. Your Current Legal Name (do not provide a nickname)

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)

2. Your Name Exactly As It Appears on Your Permanent Resident Card (if applicable)

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Copy name exactly as it appears on your Green Card, even if misspelled.

Pa	rt 2. Information About You (Person ap	pplying for naturalization) (continued) A-
3.	Other Names You Have Used Since Birth (inclu	ide nicknames, aliases, and maiden name, if applicable)
	Family Name (Last Name)	Given Name (First Name) Middle Name (if applicable)
4.	Name Change (Optional)	
	Would you like to legally change your name?	a decide whether or not you would like to legally change your name. Write names as applicant would like it to appear on Yes No
	If you answered "Yes," type or print the new nar	naturalization certificate. Name changes are not
		allowed at all field offices.
	Family Name (Last Name)	Given Name (First Name) Middle Name (if applicable)
5.	U.S. Social Security Number (if applicable) 6	6. USCIS Online Account Number (if any)
		Consular Processing or
7.	Write REAL S.S. Numbers only! Gender 8. Date of Birth	9. Date You Became a Law Adjustment of Status
	Male Female (mm/dd/yyyy)	Permanent Resident (mm residence date). See
		green card for date.
10.	Country of Birth	11. Country of Citizenship or Nationality
12.		ility or mental impairment that prevents you from Yes No ng of the English language and/or civics requirements
	If you answered "Yes," submit a completed Forr Form N-400.	m N-648, Medical Certification for Disability Exceptions, when you file your
13.	Exemptions from the English Language Test	If qualify for exemption, can take history/civics test (oral test) with an interpreter and applicant does not need to be literate
	A. Are you 50 years of age or older and have y resident for periods totaling at least 20 years	you in native language. Must qualify at time of filing.
	B. Are you 55 years of age or older and have y resident for periods totaling at least 15 years	you lived in the United States as a lawful permanent S at the time you file your Form N-400?
		you lived in the United States as a lawful permanent S at the time you file your Form N-400? (If you meet implified version of the civics test.)
Pa	rt 3. Accommodations for Individuals	With Disabilities and/or Impairments
NO	TE: Read the information in the Form N-400 Inst	ructions before completing this part.
1.	Are you requesting an accommodation because of	of your disabilities and/or impairments?
	If you answered "Yes," select any applicable box	х.
		est the following accommodation. (If you are requesting a sign-language ge (for example, American Sign Language).)
	B. I am blind or have low vision and requ	uest the following accommodation:
		e

Part 4. Information to Contact You . Daytime Telephone Number 2. Work Telephone Number (if any) . Evening Telephone Number 4. Mobile Telephone Number (if any) . Email Address (if any) 4. Mobile Telephone Number (if any) . Email Address (if any) 4. Mobile Telephone Number (if any) . Email Address (if any) 4. Mobile Telephone Number (if any) . Email Address (if any) 4. Mobile Telephone Number (if any) . Where have you lived during the last five years? Provide your most recent residence and then list every location where you have lived during the last five years. If you need extra space, use additional sheets of paper. A. Current Physical Address Actual/Physical address. Street Number and Name Apt. Ste. Fir. Number . City or Town County . Groreign address only) (foreign address only) . Groreign address only) (foreign address only) . Dates of From (mm/dd/yyyy) To (mm/dd/yyyy) . Current Mailing Address (if different from the address above) Use a secure mailing address is not secure. . Street Number and Name Apt. Ste. Fir. Number . City or Town County State . City or Town County Your home address is not secure. . Street N	C.			y and/or impairment (for ex nd the accommodation you a	ample, use a wheelchair). (Describe are requesting.)	the nature of your
A. Evening Telephone Number 4. Mobile Telephone Number (if any) 5. Email Address (if any) 6. Where have you lived during the last five years? Provide your most recent residence and then list every location where you have lived during the last five years? If you need extra space, use additional sheets of paper. A. Current Physical Address Street Number and Name Apt. Ste. Flr. Number City or Town County City or Town County State ZIP Code + 4 Province or Region Postal Code (foreign address only) (foreign address only) (foreign address only) (foreign address only) Dates of From (mm/dd/yyyy) To (mm/dd/yyyy) To (mm/dd/yyyy) B. Current Mailing Address (if different from the address above) In Care Of Name (if any) Use a secure mailing address if your home address is not secure Street Number and Name Apt. Ste. Flr. Number City or Town County State </th <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>						
	Da	aytime Teleph	one Number	2. V	Vork Telephone Number (1f any)	
Part 5. Information About Your Residence • Where have you lived during the last five years? Provide your most recent residence and then list every location where you have lived during the last five years. If you need extra space, use additional sheets of paper. A. Current Physical Address Actual/Physical address. Street Number and Name Apt. Ste. Flr. Number City or Town County State ZIP Code + 4 Province or Region Postal Code Country (foreign address only) (foreign address only) (foreign address only) Dates of From (mm/dd/yyyy) To (mm/dd/yyyy) If can't remember exact date, can handwrite month and year, (e.g. May/2010). B. Current Mailing Address (if different from the address above) Use a secure mailing address is not secure. Street Number and Name Apt. Ste. Flr. Number City or Town Country Street Number and Name Apt. Ste. Flr. Number City or Town Country Street Number and Name Apt. Ste. Flr. Number City or Town Country State ZIP Code + 4 City or Town Country State ZIP Code + 4 Province or Region Postal Code	. Ev	vening Telepho	one Number	4. N	fobile Telephone Number (if any)	
Where have you lived during the last five years? Provide your most recent residence and then list every location where you have lived during the last five years. If you need extra space, use additional sheets of paper. A. Current Physical Address Actual/Physical address. Street Number and Name Apt. Ste. Flr. Number City or Town County State ZIP Code + 4 Province or Region Postal Code Country (foreign address only) If can't remember exact date, can handwrite month and year, (e.g. May/2010). B. Current Mailing Address (if different from the address above) In Care Of Name (if any) Street Number and Name Apt. Ste. Flr. Number City or Town County (foreign address is not secure. Street Number and Name Apt. Ste. Flr. Number Current Mailing Address (if different from the address above) In Care Of Name (if any) Use a secure mailing address if your home address is not secure. Street Number and Name City or Town County Street Number and Name Apt. Ste. Flr. Number Province or Region Postal Code County State ZIP Code + 4 City or Town County State ZIP Code + 4 City or Town County State ZIP Code + 4 City or Town County State ZIP Code + 4 City or Town County State ZIP Code + 4 City or Town County State ZIP Code + 4 City or Town County State ZIP Code + 4 City or Town County State ZIP Code + 4 City or Tow	. Er	mail Address (if any)			
have lived during the last five years. If you need extra space, use additional sheets of paper. A. Current Physical Address Street Number and Name City or Town County State ZIP Code + 4 Province or Region Postal Code Country (foreign address only) (foreign address only) (foreign address only) Dates of From (mm/dd/yyyy) To (mm/dd/yyyy) In Care Of Name (if any) Use a secure mailing address if your home address is not secure. Street Number and Name Apt. Ste. Flr. Number City or Town Country Use a secure mailing address if your home address is not secure. Street Number and Name Apt. Ste. Flr. Number City or Town Country State ZIP Code + 4 City or Town Country State ZIP Code + 4 Province or Region Postal Code Country	Part 5	5. Informat	tion About Your Re	sidence		
Province or Region Postal Code Country (foreign address only) (foreign address only) (foreign address only) Dates of Residence From (mm/dd/yyyy) To (mm/dd/yyyy) B. Current Mailing Address (if different from the address above) If can't remember exact date, can handwrite month and year, (e.g. May/2010). B. Current Mailing Address (if different from the address above) Use a secure mailing address if your home address is not secure. Street Number and Name Apt. Ste. Flr. Number City or Town County City or Town County State ZIP Code + 4 Province or Region Postal Code		. Current Phy	vsical Address Actual	-		Ste. Flr. Number
(foreign address only) (foreign address only) (foreign address only) Dates of Residence From (mm/dd/yyyy) To (mm/dd/yyyy) If can't remember exact date, can handwrite month and year, (e.g. May/2010). B. Current Mailing Address (if different from the address above) In Care Of Name (if any) Use a secure mailing address if your home address is not secure. Street Number and Name Apt. Ste. Flr. Number City or Town County State ZIP Code + 4 Province or Region Postal Code County		City or Tow	'n	County	State	ZIP Code + 4
Dates of Residence Present month and year, (e.g. May/2010). B. Current Mailing Address (if different from the address above) Use a secure mailing address if your home address is not secure. In Care Of Name (if any) Use a secure mailing address is not secure. Street Number and Name Apt. Ste. Flr. Number City or Town County State Province or Region Postal Code Country						
In Care Of Name (if any) Use a secure mailing address if your home address is not secure. Street Number and Name Apt. Ste. Flr. Number City or Town County State ZIP Code + 4 City or Town Province or Region Postal Code County			From (mm/dd/yyyy)			
City or Town County State ZIP Code + 4 County State County - Province or Region Postal Code Country -	B.		-	t from the address above)		
Province or Region Postal Code Country		Street Num	ber and Name	K	Apt.	Ste. Flr. Number
5		City or Tow	'n	County	State	ZIP Code + 4
			-			

Part 5	. Information About Yo	List former physical re	esidences A-	
C.	Physical Address 2	in reverse chronologie		
	Street Number and Name		Apt. Ste. Flr. Number	
	City or Town	County	State ZIP Code + 4	
			-	٦
	Province or Region	Postal Code	Country	
	(foreign address only)	(foreign address only)	(foreign address only)	
	Dates of From (mm/dd/y	/yyy) To (mm/dd/yyyy)		
	Residence			
D.	Physical Address 3			
	Street Number and Name		Apt. Ste. Flr. Number	
	City or Town	County	State ZIP Code + 4	
				7
	Province or Region	Postal Code	Country	
	(foreign address only)	(foreign address only)	(foreign address only)	
	Dates of From (mm/dd/y	/yyy) To (mm/dd/yyyy)		
	Residence			
E.	Physical Address 4			
	Street Number and Name		Apt. Ste. Flr. Number	
	City or Town	County	State ZIP Code + 4	
	Province or Region	Postal Code	Country	
	(foreign address only)	(foreign address only)	(foreign address only)	
	Dates of From (mm/dd/y	/yyy) To (mm/dd/yyyy)		
	Residence			
			This section relates to acquisition	٦
Part 6	. Information About Yo	our Parents	and derivation. If person is already a	£
If neithe	r one of your parents is a Uni	ited States citizen, then skip this part an	nd go to P: citizen, they cannot naturalize.	
1. We	ere your parents married before	your 18th birthday?	Yes N	No
X A				
Inform	ation About Your Mothe	21		
2. Is y	your mother a U.S. citizen?		Yes N	No
Ify	ou answered "Yes," complete	the following information. If you answere	ed "No," go to Item Number 3.	

Par	rt 6.	Information About Your Parents (continued)
	A.	Current Legal Name of U.S. Citizen Mother
		Family Name (Last Name)Given Name (First Name)Middle Name (if applicable)
	B.	Mother's Country of Birth C. Mother's Date of Birth (mm/dd/yyyy)
	D.	Date Mother Became a U.S. Citizen E. Mother's A-Number
		(if known) (mm/dd/yyyy) (if any)
		► A-
Inf	orm	nation About Your Father
mj		
3.	Is y	your father a U.S. citizen?
	If y	ou answered "Yes," complete the information below. If you answered "No," go to Part 7.
	A.	Current Legal Name of U.S. Citizen Father
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	B.	Father's Country of Birth C. Father's Date of Birth (mm/dd/yyyy)
	D.	Date Father Became a U.S. Citizen E. Father's A-Number
		(if known) (mm/dd/yyyy) (if any)
		► A-
D		
		Biographic Information
		USCIS requires you to complete the categories below to conduct background checks. (See the Form N-400 Instructions for prmation.)
1.		nicity (Select only one box)
1.		Most recent Driver's
r		
2.		ce (Select all applicable boxes) White Asian Black or American Indian Native Hawaiian or
		African American or Alaska Native Other Pacific Islander
3.	Hei	ight Feet Inches 4. Weight Pounds
5.	Eye	e color (Select only one box) Black Blue Brown Gray Green Hazel Maroon Pink Unknown/
		Other
6.	Hai	r color (Select only one box)
		Bald Black Blond Brown Gray Red Sandy White Unknown/ (No hair) Other
		(ivo nan) Other

Par	t 8. Information About	Your E	List current and f	Sahaa	s You	Attended	A	-				
perio emple unem	where you have worked or attend d. Include all military, police, ar oyment, studies, or unemployme ployed, or have studied for the la or print "unemployed." If you ne Employer or School Name	nd/or intel ent (if appl ast five ye	employers/schoo reverse chronolo order (start with	ols in gical the	viding s and da	five years. Pr information al ites where you or print "self-	bout you 1 worked	ır mos l, were	t recei e self-	nt or cu employ	irrent ved, w	ere
1.												
	Street Number and Name							Δn	t St	e. Flr	Nu	mher
									ι. sι 1 Γ			initer
	City or Town	If unem	ployed, write	1			State			ZIP Co	'∟	4
			oloyed" in section									4
			ks for "Employer ol Name."									
	Province or Region (foreign address only)		(foreign address o	l nlv)		Country (foreign add	lress on	v)				
		If hom	emaker without	<i>y</i>)				.))				
	Date From (mm/dd/yyyy)		player state	Vour Or	ccupation] [
		- "home	emaker" as job.		cupation							
2.	Employer or School Name	If now	retired indicate "r	etired"								
	\sim	-	estion 1. If worked									
	Street Number and Name		years ago, then lis yment under rema					Ap	t. St	e. Flr	. Nu	mber
			for this part.	giiiiig] []	
	City or Town					State			ZIP Co	ode +	4	
											-	
	Province or Region (foreign address only)		Postal Code (foreign address o	nly)		Country (foreign add	lress on	y)	 			
	Date From (mm/dd/yyyy)	Date To (r	nm/dd/yyyy)	Your Oc	ccupation	n						
3.	Employer or School Name											
	Street Number and Name							Ap	t. St	e. Flr	. Nu	mber
] []	
	City or Town						State			ZIP Co	ode +	4
											-	
	Province or Region (foreign address only)		Postal Code (foreign address o	nly)		Country (foreign add	lress on	y)				
	Date From (mm/dd/yyyy) I	Date To (r	nm/dd/yyyy)	Your Oc	ccupation	n						

	This section relates to the requirements of continuous			
Part 9. Time Outside the United States	residence, physical presence, and abandonment of residence.			
	Please note questions ask for absences within the last s	years.		
. How many total days (24 hours or longer) did you spen	d outside the United States during the last 5 years?	days		

- 2. How many trips of **24 hours or longer** have you taken of **Note:** Canada & Mexico are "outside" of the U.S.
- 3. List below all the trips of 24 hours or longer that you have taken outside the United States during the last 5 years. Start with your most recent trip and work backwards. If you need extra space, use additional sheets of paper.

Date You Left the United States (mm/dd/yyyy)	Inited States to the United States		Countries to Which You Traveled		Total Days Outside the United States
		Yes No			
Use appro applicant	oximate date if	Yes No	If don't know all absences, applicant can state		le trips to co/Canada
	r the exact dates.	Yes No	something like, "since 2017		if crossed at
	PROX." before	Yes No	I have been going to Mexico	land b	oorder.
each date to indicate it is an approximate date.		Yes No	for approx. one month every year to visit my family."		
		🗌 Yes 🗌 No			

Part 10. Information About Your Marital History

vv 11c	at is your current marital status?		
	Single, Never Married 🗌 Married 🗌 Divord	ced 🗌 Widowed 🕞 Separated 📃	Marriage Annulled
lf yo	ou are single and have never married, go to Part	11. This means	
lf yo	ou are married, is your spouse a current member of	of the U.S. armed forces?	not just living Yes No
	v many times have you been married (including a riages to the same person)?		le, and
lf yo	ou are married now, provide the following inform	ation about your current spouse.	
A.	Current Spouse's Legal Name		
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
B.	Current Spouse's Previous Legal Name		
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
c.	Other Names Used by Current Spouse (include n	nicknames, aliases, and maiden name, if app	blicable)
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
D.	1	6	
	mar f yc A. B.	 narriages to the same person)? f you are married now, provide the following inform A. Current Spouse's Legal Name Family Name (Last Name) G. Current Spouse's Previous Legal Name Family Name (Last Name) C. Other Names Used by Current Spouse (include r Family Name (Last Name) C. Other Names Used by Current Spouse (include r Family Name (Last Name) D. Current Spouse's Date of Birth 	 narriages to the same person)? f you are married now, provide the following information about your current spouse. A. Current Spouse's Legal Name Family Name (Last Name) Given Name (First Name) Given Name (First Name) Given Name (Last Name) Given Name (First Name) Given Name (First Name) Cother Names Used by Current Spouse (include nicknames, aliases, and maiden name, if app Family Name (Last Name) Given Name (First Name) Cother Names Used by Current Spouse (include nicknames, aliases, and maiden name, if app Family Name (Last Name) Cother Name (First Name) Current Spouse's Date of Birth E. Date You Entered into Marriage

trips

Pa	rt 1	0. Information About Your Marital History (continued) A-
	F.	Current Spouse's Present Home Address
		Street Number and Name Apt. Ste. Flr. Number
		City or Town County State ZIP Code + 4
		Province or Region Postal Code Country
		(foreign address only) (foreign address only) (foreign address only)
	G.	Current Spouse's Current Employer or Company
5.	Is y	our current spouse a U.S. citizen?
	If y	ou answered "Yes," answer Item Number 6. If you answered "No," go to Item Number 7.
6.	If y	our current spouse is a U.S. citizen, complete the following information.
	A.	When did your current spouse become a U.S. citizen?
		At Birth - Go to Item Number 8. Other - Complete the WARNING: If spouse is undocumented, be careful about admitting to alien smuggling.
	B.	Date Your Current Spouse Became Talk to an immigration attorney if this might
		a U.S. Citizen (mm/dd/yyyy) Refer to naturalization apply to you.
		certificate.
7.	If y	our current spouse is not a U.S. citizen, complete the following information. If an I-130 petition has been submitted,
	А.	Current Spouse's Country of Citizenship or Nationality B. Current Spou can list as "adjustment applicant" or second preference beneficiary. If
		► A- spouse is undocumented, can list as
	C.	Current Spouse's Immigration Status "Alien" or N/A. The preference is to <i>not</i>
		Lawful Permanent Resident Other (Explain): list as undocumented.
8.		w many times has your current spouse been married (including annulled marriages, marriages to
		er people, and marriages to the same person)? If your current spouse has been married before, vide the following information about your current spouse's prior spouse.
	If y	our current spouse has had more than one previous marriage, provide that information on additional sheets of paper.
		Legal Name of My Current Spouse's Prior Spouse
		Family Name (Last Name)Given Name (First Name)Middle Name (if applicable)
	B.	Immigration Status of My Current Spouse's Prior Spouse (if known)
		U.S. Citizen Lawful Permanent Resident Other (Explain):
	C.	Date of Birth of My Current Spouse's D. Country of Birth of My Current Spouse's
		Prior Spouse (mm/dd/yyyy) Prior Spouse
	Е.	Country of Citizenship or Nationality of My Current
		Spouse's Prior Spouse

D.	4 10		
Pa	rt I(A-	
	F.	My Current Spouse's Date of Marriage G. Date My Current Spouse's Marriage Ended	
		with Prior Spouse (mm/dd/yyyy) with Prior Spouse (mm/dd/yyyy) If the spouse was not	_
		divorced before marrying the applicant, then it is possible	e
	Н.	How My Current Spouse's Marriage Ended with Prior Spouse that the applicant's present	
		Annulled Divorced Spouse Deceased Other (Explain): marriage is invalid.	
9.		ou were married before, provide the following information about your prior spouse. If you have more than one previous	
	mar	riage, provide that information on additional sheets of paper. CAUTION: very short marriages, especially ones through which immigration status w	as
	A.	My Prior Spouse's Legal N obtained can be investigated by USCIS to ensure no marriage fraud was committed.	uJ
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)	-
	B.	My Prior Spouse's Immigration Status When My Marriage Ended (if known)	
		U.S. Citizen Lawful Permanent Resident Other (Explain):	
	C.	My Prior Spouse's Date of Birth D. My Prior Spouse's Country	
	0.	(mm/dd/yyyy) of Birth	
	E.	My Prior Spouse's Country of F. Date of Marriage with My Prior	
		Citizenship or Nationality Spouse (mm/dd/yyyy)	
	G.	Date Marriage Ended with My	
		Prior Spouse (mm/dd/yyyy)	
	H.	How Marriage Ended with My Prior Spouse	
		Annulled Divorced Spouse Deceased Other (Explain):	
Pa	rt 11	. Information About Your Children	
1.	Indi	cate your total number of children. (You must indicate ALL children, including: children who are alive,	_
1.		sing, or deceased; children born in the United States or in other countries; children under 18 years of age or	
		er; children who are currently married or unmarried; children living with you or elsewhere; current	
	-	children; legally adopted children; and children born when you were not married.)	
2.		vide the following information about all your children (sons and daughters) listed in Item Number 1. , regardless of age. ist any additional children, use additi WARNUNC. If child is undesumanted he	
		warning: If child is undocumented, be	
	А.	Child 1careful about admitting to alien smuggling.Current L and NameTalk to an immigration attorney if this might	
		Family Name (Last Name) Image: Given Name (First Name) Middle Name (if applicable)	
		A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth	
		► A-	
		U.S. born and some	
		undocumented children	
		will not have an A#, so	

indicate N/A.

Part 1	1. Information About You	ur Children (continued) A-
	Current Address Street Number and Name	If child is living with you, write "Child Residing with Me." If child is missing or deceased write "Child Missing" or "Child Deceased."
	City or Town	State ZIP Code + 4
	Province or Region (foreign address only)	Postal Code Country (foreign address only) (foreign address only)
	What is your child's relationshi stepchild, legally adopted child	<pre>p to you? (for example, biological child,)</pre> Don't forget adult children, stepchildren, children born in another country, deceased, or missing.
B.	Child 2 Current Legal Name	
	Family Name (Last Name)	Given Name (First Name) Middle Name (if applicable)
	A-Number (if any) ► A-	Date of Birth (mm/dd/yyyy) Country of Birth
	Current Address Street Number and Name	Apt. Ste. Flr. Number
	City or Town	County State ZIP Code + 4
	Province or Region (foreign address only)	Postal Code Country (foreign address only) (foreign address only)
	What is your child's relationshi stepchild, legally adopted child	p to you? (for example, biological child,
C.	Child 3 Current Legal Name	
	Family Name (Last Name)	Given Name (First Name) Middle Name (if applicable)
	A-Number (if any) ► A-	Date of Birth (mm/dd/yyyy) Country of Birth

Par	+ 11	. Information A	hout Vour Ch	ildron (d	continued)				A-					
1 41	ι 11			nuren (-	A-					
		Current Address Street Number and Name								Apt. S	Sta	Flr	Num	har
										трі. П	Si€.		Tulli	
		City or Town		Col	unty			Stat			71	D P Cod	e + 4	
					unity				0]-[
		Province or Region (foreign address onl	v)	Postal C (foreign	Code address only)		Country (foreign	address of	only)				J L	
			<i>J</i> /		,		(8							
		What is your child's stepchild, legally ad		u? (for exa	ample, biological	child,								
	D.	Child 4												
		Current Legal Name	2											
		Family Name (Last	Name)		Given Name (Fi	irst Nam	ne)		Mic	idle N	ame	(if app	olicabl	le)
		A-Number (if any)		Date	of Birth (mm/dd/	/yyyy)	Country	of Birth						
		► A-												
		Current Address												
		Street Number and M	Name							Apt. S	Ste.	Flr.	Num	ber
		City or Town			unty			Stat	e		ZI	P Cod	e + 4	
		Province or Region (foreign address onl	y)	Postal C (foreign	Code address only)		Country (foreign	address o	only)					
		What is your child's stepchild, legally ad		u? (for exa	ample, biological	child,								
Par	t 12	Additional I	f the answer to a	iny of que	estions 1-36 or 3	39-43 is	s "yes,"	then it is	s a <u>re</u>	d-flag	issu	e whi	ch	
	er It	tem Numbers 1 g	nust be discussed good moral chara ifter 9/30/1996 is	cter and	deportability. B	e CARE	•		•				e n	al
		re you EVER claime		-	•	-						$\neg \mathbf{v}_{c}$		l Na
		-		x		• /						_ Y€] No
2.	Hav	e you EVER registe	red to vote in any	Federal, st	ate, or local elect	tion in th	he United	d States?					es 🗌] No
3.	Hav	e you EVER voted i	n any Federal, stat	te, or local	election in the U	nited St	tates?		_] Ye	es 🗌] No
4.	А.	Do you now have, o country?	r did you EVER h	ave, a her	editary title or an	order o	fnobility	y in any fo		sue of o U.S.	falle	gianc	e] No
	B.	If you answered "Ye have in a foreign co				tles or o	orders of	nobility t	hat yo	ou] Ye	es 🗌] No
5.	Hav	e you EVER been d	eclared legally inc	ompetent	or been confined	to a me	ntal insti	tution?] Ye	es 🗌] No
Form	N-40	Must prove that I based on disabilit									ent.	Р	age 11	of 20

		2. Additional Informati ization) (continued)	on About You (Person Applying for	A Question is n "required" ta	
6.	Do	you owe any overdue Federal	s?	ever did not becoming an	file since	
7.	A.	Have you EVER not filed a resident?	((
	B.	If you answered "Yes," did y	ou consider yoursel	f to be a "non-U.S. resident"?		Yes No
8.		ve you called yourself a "non- ful permanent resident?	U.S. resident" on a I	Federal, state, or local tax return since you	became a	Yes No
9.			below. If you need extra song., school o		community volunteer	
		Name		Purpose		Membership
		of the		of the	From	То
		Group		Group	(mm/dd/yyyy) (mm/dd/yyyy)
		Importan	t to review types	of groups /orgs	Use approxin	nate
			for asylees and r		dates if you d	lon't
			•	s where purpose of	remember ex	act date.
				elated to grounds	Write "appro	x."
				bility or GMC, may	before each o	date to
			equest A-file.		indicate it's a	n —
		want to r			approximate	date.
					1	
10.	Hav	ve you EVER been a member	of, or in any way as	ssociated (either directly or indirectly) wit	h:	
	A.	The Communist Party?	NOTE: Voluntary	membership in		Yes No
	R	Any other totalitarian party?				\square Yes \square No
			vrs. can cause na	turalization denial,		
	C.	A terrorist organization?	depending on cir			Yes No
11.		ye you EVER advocated (either ence?		ctly) the overthrow of any government by	force or	Yes No
12.		ye you EVER persecuted (eith gin, membership in a particula	•	ectly) any person because of race, religion, olitical opinion?	national	🗌 Yes 🗌 No
13.		ween March 23, 1933 and Ma irectly) with:	y 8, 1945, did you v	work for or associate in any way (either di	rectly or	
	A.	The Nazi government of Ger	many?			Yes No
	B.	Any government in any area government of Germany?	occupied by, allied	with, or established with the help of the N	azi	Yes No
	C.			litary unit, self-defense unit, vigilante unit iination camp, concentration camp, prison		Yes No

camp, prison, labor camp, or transit camp?

		2. Additional Inf		ation	Abou	t You	ı (Pers	son A	pplying	; for			A-						
Na	tura	lization) (continue	ed)								An an	plican	typho	hac	orde	orod i	ncito	4	٦
14.	We	ere you EVER involve	ed in a	any wa	ay with a	any of	the foll	lowing	Z			ed, or							
	A.	Genocide? If only	/ the v	victim	of gen	ocide	or		`		genoo	cide, to	orture	or s	sever	e viol	ation	s of	Ċ
	 A. Genocide? B. Torture? If only the victim of genocide or torture, don't need to mark "yes." If only the victim of genocide or religious freedom at any deportable and is permatication. 									•		-		Ċ					
	C. Killing, or trying to kill, someone? from establishing Good										•			c					
	D.	Badly hurting, or try	ying to	o hurt,	a persor	n on pu	urpose?	\leq			for na	ituraliz	ation						Ċ
	E.	Forcing, or trying to						1	ual conta	<u>ct</u> or	relatio	ns?		C	`an li	kely b	e rea		
	F.	Not letting someone	e practi	tice his	or her 1	religior	n?						_			"inte			íc
15.	· · ·	ere you EVER a mem	ıber of,	f, or die	d you E	VER s	serve in	ı, help,	, or otherw	wise j	particir	oate in,	any of	^{f tl} a F	noth orm	everel er pei I-485,	rson. Part	See 3.	
	А.	Military unit?												It	:em.	14c. f	or co	ntext	;. ic
			Bewar	re: Fo	or Item I	Numb	oers 15	-21 со	group but onsider w ready sta	vhet	her ap	plican	ts wh				Yes		Nc
	C.	i once unit:				•	•		"yes", ir		•		115				Yes		No
	D.	Self-defense unit?	explar	nation	۱.												Yes		No
	E.	Vigilante unit (a gro	oup of j	people	e who ac	ct like 1	the poli	ice, bu	t are not j	part c	of the o	official	police)?			Yes		No
	F.	Rebel group?															Yes		No
	G.	Guerrilla group (a gr military, police, gov						agains	t or other	wise	physic	ally att	ack th	e			Yes		No
	H.	Militia (an army of p	people	e, not p	part of th	ne offic	cial mil	litary)?)								Yes		No
	I.	Insurgent organizati	ion (a g	group	that use	s weap	oons an	d fight	s against	a gov	vernme	ent)?					Yes		No
16.	We	ere you EVER a work	ker, vol	oluntee	r, or sol	dier, oi	r did yc	ou othe	erwise EV	/ER	serve i	n any o	f the f	ollov	wing:				
	A.	Prison or jail?		Care	eful witl	h appl	licants	from	war-torr	n cou	untries	(e.g. 0	Centra	al An	neric	a) or v	who		No
	B.	Prison camp?		rece	ived as	ylum.	Consu	ılt witl	h an atto	orney	y or ex	pert &	inclu	de e	expla	natior	า.		Nc
	C.	Detention facility (a	a place	e where	e people	are fo	rced to	stay)?	,								Yes		No
	D.	Labor camp (a place	e where	re peop	ple are fo	orced t	to work	z)?									Yes		No
	E.	Any other place whe	ere pec	ople w	vere forc	ed to s	stay?										Yes		No
17.		ere you EVER a part of a						elp an	y group, ı	unit, o	or orga	nizatio	n that	used		Be sui refere			
	A.	If you answered "Ye use a weapon agains	es," wł st anotl	hen yo ther pe	ou were j erson?	part of	`this gr	oup, o	r when yo	ou he	lped th	is grou	p, did	you	ľ	for "p	osses	sion	of
	B.	If you answered "Ye tell another person t									elped th	is grou	p, did	you	even	weapo convio		-	≥s/
18.		l you EVER sell, give apons to any person?	-	provide	e weapor	ns to ai	ny pers	on, or	help anot	ther p	person	sell, giv	ve, or p	provi	de		Yes		No
	A.	If you answered "Ye person?	es," dio	id you I	know th	at this	person	ı was g	joing to u	se the	e weap	ons aga	ainst a	nothe	er		Yes		No
	B.	If you answered "Ye someone who was g		•			-	-	-	ell or	give tl	ne weaj	oons to)			Yes		No

	rt 12. Additional Informat	tion About You (Pe	erson Applying for	A	-			
19.	Did you EVER receive any type but are not part of the official m			act like a milit	ary group	<u> </u>	Yes 🗌	No
20.	Did you EVER recruit (ask), en to serve i WARNING: USCIS w	list (sign up), conscript ill have access to you		n under 15 yea	urs of age		Yes 🗌	No
21.	Did you combat? Criminal activity may lead to natz denial and/or deportation. Talk with an immigration attorney if this may apply to you.							
othe	 f any of Item Numbers 22 28. apply to you, you must answer "Yes" even if your records have been sealed, expunged, or therwise cleared. You must disclose this information even if someone, including a judge, law enforcement officer and the sealed of the seal							
	you were NOT arrested?					juvenil	e recor	ds.
23.	Have you EVER been arrested, immigration official or any offic		•	(including any	Do not Applica	file Nat		No
24.	Have you EVER been charged or offense?	with committing, attemp	oting to commit, or assistin Includes border patrol	-	^{1g} on prot suspen	, pation, j	parole,	or
25.	Have you EVER been convicted	l of a crime or offense?	and ICE or INS arrests.		interim not app			ill
26.	Have you EVER been placed in diversion, deferred prosecution,		0 1 0	` 1		tion unt bation,	til after parole	or
27.	A. Have you EVER received a	suspended sentence, be	een placed on probation, or	been paroled				103
	B. If you answered "Yes," have	e you completed the pro	obation or parole?				Yes	No
28.	A. Have you EVER been in ja	il or prison?					Yes	No
	B. If you answered "Yes," how	v long were you in jail o	r prison? Years	Months		Day	^{/s}	
29.	If you answered "No" to ALL q	uestions in Item Numb	ers 23 28., then skip this	item and go to	o Item Nun	nber 30.	· \	
	If you answered "Yes" to any qu additional sheets of paper and pr			this table. If y	ou need ext	ra space	, use	\setminus
	Why were you arrested, cited, detained, or charged?	Date arrested, cited, detained, or charged. (mm/dd/yyyy)	Where were you arrested, cited, detain charged? (City or To State, Country)	ed, or a a sown, ch	Dutcome or arrest, citat arge (no ch lismissed, ja	ion, det e arges fil	ention, o led, char	or rges
	Include traffic violations. Don't forget political arrests for asylees (check				(even or a d by wr labele provid	ay), ind iting 1 i ed "days de expla exact nu	han 24 licate th n the bo s," and	hrs nat ox
	asylum app).							

Part 12. Additional Information About You (Person Applying for	ŀ
Naturalization) (continued)	ł

WARNING: A "yes" answer in Part 12 may result in a natz denial and/or deportation. Talk to an immigration attorney if you answered yes to any of these.

Answer Item Numbers 30. - 46. If you answer "Yes" to any of these questions, except Item Numbers 37. and 38., include a typed or printed explanation on additional sheets of paper and provide any evidence to support your answers.

	•			
	A. Been a habitual drunkard?	Ves No		
	R Reen a prostitute or produced anyone for prostitution?	s even if you I a family member.		
	C. Sold or smuggled controlled substances, illegal drugs, or narcotics?	Yes No		
	D. Been married to more than one person at the same time? Only willful (on	purpose) failure to		
	E. Married someone in order to obtain an iningration benefit.	ent should count		
	F. Helped anyone to enter, or try to enter, the United States illegally?			
	G. Gambled illegally or received income from illegal gambling?			
	$\mathbf{H} = \mathbf{F}^{1} 1 1$	illful and knowing" n. If this is true for		
	I. Made any misrepresentation to obtain any public benefit in the United States? applicant, mark "y intent and provide	es" regardless of		
31.	Have you EVER given any U.S. Government officials any information or documentation that was false fraudulent, or misleading?	cludes any false		
32.	inform Have you EVER lied to any U.S. Government officials to gain entry or admission into the United card ap	ation on a green		
52.		ition, asylum		
33.	applica	tion, or other ation applications.		
34.		ally, you cannot		
35.	Have you EVER been placed in removal, exclusion, rescission, or deportation proceedings? proceedings?	lize while in dings, but if		
36.	proceedings) currently pending against Voll /	e for lization, can t that proceedings		
37.	Have you EVER served in the U.S. armed forces? be terr	ninated pending lization outcome.		
38.		may apply to you,		
	B. If you answered "Yes," are you scheduled to deploy overseas, including to a vessel, within the three months? (Refer to the Address Change section in the Instructions on how to notify US you learn of your deployment plans after you file your Form N-400.)	an immigration ey.		
	C. If you answered "Yes," are you currently stationed overseas?	Yes No		
39.	Have you EVER been court-martialed, administratively separated, or disciplined, or have you received an other than honorable discharge, while in the U.S. armed forces?	Yes No		
40.	Have you EVER been discharged from training or service in the U.S. armed forces because you were an alien?	Yes No		
41.	Have you EVER left the United States to avoid being drafted in the U.S. armed forces?	Yes No		
42.	Have you EVER applied for any kind of exemption from military service in the U.S. armed forces?	Yes No		
43.	Have you EVER deserted from the U.S. armed forces?	🗌 Yes 🗌 No		

30.

Have you EVER:

		2. Additional Information About You (Person Applyin visiting	d out if registered, and get registration date by calling: 1-847-688-6888 or https://www.sss.gov/Regver/mobile/ ication.aspx
44.	А.	Are you a male who lived in the United States at any time between your 18t (This does not include living in the United States as a lawful nonimmigrant.)
	В.	If you answered "Yes," when did you register for the Selective Service? Pro Date Registered Selective Service (mm/dd/yyyy) Number	USCIS is looking for statement that applicant did not know about Selective Service requirements and had he known, he would have registered.
	C.	If you answered "Yes," but you did not register with the Selective Service	System an Applicants over the age of 31
		1. Still under 26 years of age, you must register before you apply for natu information above; OR	ralization, (or over 29 if applying based on marriage to US citizen),
		2. <u>Alow 26 to 31 years of age (29 years of age if you are filing under INA</u> Selective Service, you must attach a statement explaining why you did letter from the Selective Service.	
		tem Numbers 45 50. If you answer "No" to any of these questions, includ paper and provide any evidence to support your answers.	e a typed or printed explanation on additional
45.	Do	you support the Constitution and form of Government of the United States?	If there are religious 🗌 Yes 🗌 No
46.	Do	you understand the full Oath of Allegiance to the United States?	or moral reasons why the applicant says "NO" then could be
47.	Are	you willing to take the full Oath of Allegiance to the United States?	OK. People can take \Box Yes \Box No
48.	If tl	ne law requires it, are you willing to bear arms on behalf of the United States	religious reasons as
49.	If th	ne law requires it, are you willing to perform noncombatant services in the U	S. well. Yes No
50.	If th	ne law requires it, are you willing to perform work of national importance un	der civilian direction?
Pa	rt 13	3. Applicant's Statement, Certification, and Signature	
NOT	[E:]	Read the Penalties section of the Form N-400 Instructions before completing	, this part.
Ap	plice	ant's Statement	
NOT	Г Е: :	Select the box for either Item A. or B. in Item Number 1. If applicable, select	ect the box for Item Number 2.
1.		plicant's Statement Regarding the Interpreter	
	A.	I can read and understand English, and I have read and understand ever and my answer to every question.	y question and instruction on this application
	B.	The interpreter named in Part 14. read to me every question and instru- question in , a language	ction on this application and my answer to every in which I am fluent, and I understood everything.
2.	Apj	plicant's Statement Regarding the Preparer	
		At my request, the preparer named in Part 15. , prepared this application for me based only upon information I provided or	authorized.

Part 13. Applicant's Statement, Certification, and Signature (continued)

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I further authorize release of information contained in this application, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I understand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:

- 1) I reviewed and provided or authorized all of the information in my application;
- 2) I understood all of the information contained in, and submitted with, my application; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

Applicant's Signature

3.	Applicant's Signature	Date of Signature (mm/dd/yyyy)
⇒		

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 14. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1. Interpreter's Family Name (Last Name)

Interpreter's Given Name (First Name)

A-

2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

Street Number and Name			Apt. Ste.	Flr.	Number	
City or Town			State		ZIP Code + 4	
					-	
Province	Postal Code	Country				

Part 14. Interpreter's Contact Information, Certification, and Signature (continued)

|--|

Date of Signature (mm/dd/yyyy)

Interpreter's Contact Information

4.	Interpreter's Daytime Telephone Number	5.	Interpreter's Mobile Telephone Number (if any)
6.	Interpreter's Email Address (if any)		

Interpreter's Certification

I certify, under penalty of perjury, that: I am fluent in English and ______, which is the same language specified in **Part 13.**, **Item B.** in **Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question and answer on the application, including the **Applicant's Certification** and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature

Part 15. Contact Information, Declaration, and Signature of the Person Preparing This Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1. Preparer's Family Name (Last Name)

Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

3.	Street Number and Name			Apt. Ste. Flr.	Number
	City or Town			State	ZIP Code + 4
					-
	Province	Postal Code	Country		

Part 15.	Contact Information ,	Declaration,	and Signature o	of the Person
Preparin	ng This Application, if	Other Than	the Applicant (co	ontinued)

|--|

Preparer's Contact Information

4.	Preparer's Daytime Telephone Number	5.	Preparer's Mobile Telephone Number (if any)	
6.	Preparer's Email Address (if any)			
Pro	eparer'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.				

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.

NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this application, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature

Date of Signature (mm/dd/yyyy)

NOTE: Do not complete Parts 16., 17., or 18. until the USCIS Officer instructs you to do so at the interview.

Part 16. Signature at Interview

I swear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form N-400, Application for Naturalization, subscribed by me, including corrections number 1 through ______, are _____, are complete, true, and correct. The evidence submitted by me on numbered pages 1 through ______ are complete, true, and correct.

Subscribed to and sworn to (affirmed) before me

USCIS Officer's Printed Name or Stamp

Date of Signature (mm/dd/yyyy)

Applicant's Signature

USCIS Officer's Signature

Part 17. Renunciation of Foreign Titles

If you answered "Yes" to Part 12., Items A. and B. in Item Number 4., then you must affirm the following before a USCIS officer:

A-

I further renounce the title of	which I have heretofore held; or
(1	ist titles)
I further renounce the order of nobility of	to which I have heretofore belonged.
	(list order of nobility)
Applicant's Printed Name	Applicant's Signature
USCIS Officer's Printed Name	USCIS Officer's Signature
Date of Signature (mm/dd/yyyy)	

Part 18. Oath of Allegiance

If your application is approved, you will be scheduled for a public oath ceremony at which time you will be required to take the following Oath of Allegiance immediately prior to becoming a naturalized citizen. By signing below you acknowledge your willingness and ability to take this oath:

I hereby declare on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty, of whom or which I have heretofore been a subject or citizen;

that I will support and defend the Constitution and laws of the United States of America against all enemies, foreign, and domestic;

that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the armed forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law; and

that I take this obligation freely, without any mental reservation or purpose of evasion; so help me God.

Applicant's Printed Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
Applicant's Signature		Date of Signature (mm/dd/yyyy)