

## U. S. Department of State BUREAU OF CONSULAR AFFAIRS

OMB NO. 1405-0178 EXPIRES: Estimated Burden - 15 minutes

## REQUEST FOR DETERMINATION OF POSSIBLE LOSS OF UNITED STATES CITIZENSHIP

The following information is needed to determine your present citizenship status and possible loss of U.S. citizenship. You cannot lose U.S. citizenship unless you VOLUNTARILY perform an act designated by U.S. statute and do so with the intent to relinquish U.S. citizenship. You are advised to consult an attorney before completing this form. If you have any questions about the form, you should discuss them with a member of our consular staff before completing the form. You are requested to complete this form carefully. Use extra paper as needed and attach any supporting documents to this form.

	PART I					
1. Name (Last, First, MI)			2. Date of Birth	3. Place of Birth		
4. (a) Last U.S. Passport Number (b) Issued at (F		d at (Pla	ace)		(c) Issued on (mm-dd-yyy	
					(	<b>3</b> /
5. If not born in the United States, did you acquire citizenship by birth outside the United States to U. S. citizen parent(s): Yes No;				0;		
or Naturalization. (Naturalization petitions prior to 11		e submit	tted to and adjudicated b	y a court. After that da	ate they were	
submitted to and adjudicated by INS/USCIS.)	es No					
(a) Name of Naturalizing Court/Office			(b) Date of Nati	uralization (mm-dd-yyy	(y)	
		e Outsid	le the United States Sind			
Date (From) (mm-dd-yyyy) Date (To) (mm-d	dd-yyyy)			Country		
When did you first become aware that you might be a	United States	citizen	(Give Approximate Date	)?		_
						_
7. How did you find out that you are a citizen of the United States? (For example, did you always know you were a U.S. citizen? If not, when did you learn about your citizenship? Did someone tell you that you are a U.S. citizen?)						
						]
8. Are you a national or citizen of any other country other than the United States?				No		
(a) If yes, of what country?						
(b) If yes, did you acquire that citizenship in the fore	ign country by:				_	
(i) Birth?				∐ No		
(ii) Marriage?				No		
(iii) Naturalization or registration; if yes, please provide a date (mm-dd-yyyy)				No		

(c) If other, explain.	
(d) If you checked YES to question 8 (B) part (iii) by what means, or in what kind of proceeding, were you naturalize foreign state?	d as a citizen of a
9. Have you taken an oath or made an affirmation or other formal declaration of allegiance to a foreign state?  If yes, please provide a date (mm-dd-yyyy) and country	Yes No
(a) If you checked YES to question 8 or 9 or both, what was the nature of the oath you took? What were the words the oath please attach it.	used? If you have a copy of
10. Have you served in the armed forces of a foreign state?	☐ Yes ☐ No
(a) If so, what country?	IesINO
(b) In which branch of the armed forces did you serve?	
(c) Dates of Service (mm-dd-yyyy)	
(d) What ranks did you hold?	
(e) What was your highest rank?	
(f) What responsibilities did you have and what functions and activities were you engaged in?	
(g) Did you take an oath? If so, describe the oath.	Yes No
11. Have you accepted, served in, or performed the duties of any office, post or employment with the government of a	Yes No
foreign state?  (a) If yes, please provide dates of service, country and the job title	
(b) What were your duties and responsibilities for each of the foreign government jobs you held?	

(c) Did you take an oath, affirmation, declaration or allegiance in connection with the job? If yes, describe the oath, affirmation, declaration or allegiance.	Yes	No
. What ties did you have to the country where you performed the act or acts indicated in Questions 8-11? For example	э:	
(a) Did you maintain a residence? If yes, please explain.	Yes	No
(b) Did you own property? If yes, please explain.	Yes	No
(c) Do you have family or social ties? If yes, please explain.	Yes	No
(d) Do you vote? If yes, please explain.	Yes	No
(e) What other ties did you have to the country where you performed the act or acts indicated in Questions 8-11?		
. What ties do you retain with the United States? For example:		
(a) Do you maintain a residence? If yes, please explain.	Yes	No
(b) Do you own property? If yes, please explain.	Yes	No
(c) Do you have family or social ties? If yes, please explain.	Yes	No
(d) Do you vote? If yes, please explain.	Yes	No
(e) Do you file U.S. income or other tax returns? If yes, please explain.	Yes	No

(f) Do you maintain a prof	fession, occupation, or license in the United States? If yes, please explain.	Yes	☐ No
(g) Have you registered y	rour children as citizens of the United States?	Yes	No No
14. What passport do you ι	use to travel to and from the United States?		
15. What passport do you ι	use to travel to and from other countries?		
16. Have you renounced yo	our U.S. nationality at a U.S. Consulate or Embassy? If yes, provide a date and place.	Yes	No No
17. Describe in detail the ci	ircumstances under which you performed the act or acts indicated in Questions 8-16.		
18. Did you perform the act	or acts voluntarily?	Yes	No
(a) If not, in what sense v	was your performance of the act or acts involuntary?		
(b) Did you perform the a	cts with the intent to relinquish U.S. citizenship? If so, please explain your answer.	Yes	☐ No
19. Did you know that by p	performing the act described in Questions 8-18 you might lose U.S. citizenship? Please e	xplain your an	swer.
consulting with an attorney to provide additional inform	orm will become part of the official record in your case. Before signing this form, you are, and to read over your answers to make certain that they are as complete and accurate a lation you believe relevant to a determination of your citizenship status, and in particular to citizenship, you may attach separate sheets with that information.	as possible. If	you would like
	ne questions above is "No," please sign below before a Consular Officer at a U.S. Embass more of questions 8-19 and your intent was completely VOLUNTARY, please continue wi		e. If you
Subscribed and	Sworn		
[SEAL]	Signature		
	Signature of Consular Officer		

21. You should be aware that under United States law, a citizen, may lose U.S. citizenship if he/she voluntarily performs any of the acts specified above with the intent of relinquishing United States citizenship. If you voluntarily performed an act stated above with the intent to relinquish United States citizenship, you may sign Part II of this statement before a Consular Officer at a U.S. Embassy or Consulate. The U.S. Consulate or Embassy will prepare the forms necessary to document your loss of U.S. citizenship.

PART II				
STATEMENT OF VOLUNTARY RELINQUISHMENT OF U.S. CITIZENSHIP				
Subscribed an	d Sworn			
-, -	th the intent to relinquish my U.S. citizenship.	, performed the act of expatriation indicated in Questions 8-19,		
[SEAL]	Signature	Date (mm-dd-yyyy)		
	Signature of Consular Officer	Date (mm-dd-yyyy)		

## PRIVACY ACT STATEMENT

AUTHORITIES: The information on this form is requested under the authority of 8 U.S.C. 1104, 1481, 1483, 1488, and 1501, and 22 U.S.C. 212. Although furnishing the information is voluntary, applicants may not be eligible for a U.S. passport or for relinquishment or renunciation of U.S. nationality if they do not provide the required information.

PURPOSE: The principal purpose of gathering this information is to determine if the individual performed a potentially expatriating act as defined in 8 U.S.C. 1481 voluntarily and with the intention of relinquishing U.S. nationality.

ROUTINE USES: The information solicited on this form may be made available to foreign government agencies to fulfill passport control and immigration duties, to investigate or prosecute violations of law, or when a request for information is made pursuant to customary international practice. In the event a finding of loss of nationality is made, the information solicited on this form may be made available to other federal entities with law enforcement responsibilities relating to or affected by nationality, including but not limited to the U.S. Citizenship and Immigration Service, the Internal Revenue Service, and the Federal Bureau of Investigation. The information provided also may be released to federal, state or local agencies for law enforcement, counter-terrorism and homeland security purposes; to Congress and courts within their sphere of jurisdiction; and to other federal agencies for certain personnel and records management matters.

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## PAPERWORK REDUCTION ACT (PRA) STATEMENT

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time required for searching existing data sources, gather the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: U.S. Department of State, A/ISS/DIR, 1800 G St. N.W., Washington, D.C. 20520.

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