

## **Application For Naturalization**

## **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form N-400 OMB No. 1615-0052 Expires 03/31/2013

	D	<b>.</b>		
For	Date Stamp	Receipt		Action Block
USCI	$\mathbf{s}$			
Use				
Only				
Rema	nrks			
otherw		lack ink. Type or print "N/A" if an it or all of the questions may delay USC	1.1	orm N-400. NOTE: You must
Part		our Eligibility (Check only on	e box or your	Enter Your 9 Digit A-Number:
	Form N-400 may be de	elayed)		▶ A-
You ar	e at least 18 years old and			
1. [	Have been a Permanent Re	sident of the United States for at least	t 5 years.	
2. [				you have been married to and living S. citizen for the last 3 years at the time
3. [		of the United States, and you are the said employment abroad. (Section 319)		, ,
4. [	Are applying on the basis of	of qualifying military service.		
5. [	Other (explain):	rodil	ctic	n
Part	2. Information About Y	ou (Person applying for natura	ılization)	
1.	Your Current Legal Name (de	o not provide a nickname)		
I	Family Name (Last Name)	Given Name (I	First Name)	Middle Name (if applicable)
2.	Your Name Exactly As It App	pears on Your Permanent Resident	Card (if applicable)	
	Family Name (Last Name)	Given Name (A		Middle Name (if applicable)
	(			(g spp. constraint)
3. (	Other Name(s) Von Have Use	d Since Birth (include nicknames, al	iases and maiden no	ume if applicable)
	Family Name (Last Name)	Given Name (I		,
, 	anniy ivanie (Lust ivame)	Given Name (I	rirsi ivamej	Middle Name (if applicable)
-				

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Pa	rt 2	. Information About You (continued)
4.	Na	me Change (optional)
		ad the Form N-400 Instructions before you decide whether or not you would like to legally change your name.
		ould you like to legally change your name?  Yes No
		Yes," print the new name you would like to use in the space below.
	Far	mily Name (Last Name) Given Name (First Name) Middle Name (if applicable)
5.		S. Social Security Number 6. Date of Birth 7. Date You Became a Permanent Resident (mm/dd/yyyy) (mm/dd/yyyy)
		<b>▶</b>
8.	Co	untry of Birth  9. Country of Citizenship or Nationality
0.		country of Chizenship of Ivationality
10.	Ar	e you requesting an accommodation(s) to the naturalization process because of a disability and/or Yes No
10.		impairment? (See Form N-400 Instructions for accommodation examples)
	If "	Yes," check the box(es) below that applies:
		Deaf or hard of hearing and need an interpreter who uses the following sign language (e.g., American Sign Language):
		Use a wheelchair or other device that assists with mobility.
		Blind or low vision.
		Require another type of accommodation. (explain):
		Production
11.	dei	you have a physical or developmental disability or mental impairment that prevents you from Wes No monstrating your knowledge and understanding of the English language and/or civics requirements naturalization?
	If "	Yes," submit a completed Form N-648, Medical Certification for Disability Exceptions, when you file your Form N-400.
12.	Ex	emptions from the English Language Test
	A.	Are you <b>50</b> years of age or older <b>and</b> have you lived in the United States as a Permanent Resident for periods totaling at least <b>20</b> years at the time of filing your Form N-400?
	В.	Are you <b>55</b> years of age or older <b>and</b> have you lived in the United States as a Permanent Resident for periods totaling at least <b>15</b> years at the time of filing your Form N-400?
	C.	Are you <b>65</b> years of age or older <b>and</b> have you lived in the United States as a Permanent Resident for periods totaling at least <b>20</b> years at the time of filing your Form N-400? (If you meet this requirement, you will also be given a simplified version of the civics test.)

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Pa	et 3. Information to Contact You		A-
1. 4.	Daytime Phone Number 2.  (	Work Phone Number (if any) (	B. Evening Phone Number
		() //	
Pai	t 4. Information About Your Resid	ence	
1.	Where have you lived during the last 5 ye lived during the last 5 years. If you need m		
	Date of Residence From (mm/dd/yyyy) ▶	To (mm)	/dd/yyyy) ▶
	Street Number and Name	Draft	Apt. Ste. Flr. Number
		Diail	
	City	County	State ZIP Code + 4
	Province or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address only)
	Trovince of Region yoreign duaress only)	Country (Joreign dadress only)	1 Ostar Code (Joreign address only)
	A. Mailing Address (if different from the	address above)	
	C/O ("In Care Of" Name, if applicable)		
		duction	
	Street Number and Name	<del>'uucii</del>	Apt. Ste. Flr. Number
	City	State	ZIP Code + 4
			-
	Province or Region (foreign address on	ly) Country (foreign address only)	Postal Code (foreign address only)
	U0/	20/ZU	

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Pa	rt 4. Information About Your Residenc	e (continued)	A-
2.	Date of Residence From (mm/dd/yyyy) ►  Street Number and Name	To (n	Apt. Ste. Flr. Number
	City	County	State ZIP Code + 4
	Province or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address only)
3.	Date of Residence From (mm/dd/yyyy) ►  Street Number and Name	To (n	nm/dd/yyyy) ►  Apt. Ste. Flr. Number
	City  Province or Region (foreign address only)	County  Country (foreign address only)	State ZIP Code + 4  Postal Code (foreign address only)
4.	Date of Residence From (mm/dd/yyyy) ►  Street Number and Name  City	To (n	Apt. Ste. Flr. Number  State  ZIP Code + 4
	Province or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address only)

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Pa	ırt 5	5. Information About Your Parents A-
birt	hday	biological or legally adoptive mother or father is a U.S. citizen by birth, or naturalized before you reached your 18th y, you may already be a U.S. citizen. Visit the USCIS Web site at <a href="https://www.uscis.gov">www.uscis.gov</a> for further information on this topic ou consider filing Form N-400.
1.	W	ere your parents married before your 18th birthday?
2.	Is ·	your mother a U.S. citizen?
		"Yes," complete the following information.
	A.	Current Legal Name of U.S. Citizen Mother  Mother's Family Name (Last Name) Mother's Given Name (First Name) Mother's Middle Name (if applicable)
	В.	Mother's Country of Birth  C. Mother's Date of Birth (mm/dd/yyyy)
3.	Is	your father a U.S. citizen?
	If'	"Yes," complete the information below.
	A. B.	Current Legal Name of U.S. Citizen Father  Father's Family Name (Last Name)  Father's Given Name (First Name)  Father's Middle Name (if applicable)  Father's Country of Birth  C. Father's Date of Birth (mm/dd/yyyy)
Pa	ırt 6	5. Information for Criminal Records Check
	TE:	USCIS requires you to complete the categories below to conduct background checks. (See Form N-400 Instructions for more ion)
1.	Ge	ender Male Female 2. Height Feet Inches
3.	Et	hnicity (Select one)  Hispanic or Latino   Not Hispanic or Latino
4.	Ra	ace (Select one or more)
		White Asian Black or African American Indian Native Hawaiian or African American or Alaska Native Other Pacific Islander
5.	На	air color
		Black Brown Blonde Gray White Red Sandy Bald (No hair)

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Par	rt 6. Information for Criminal Records Check (continued)	A-		
6.	Eye color  Brown Blue Green Hazel Gray Black Pink	Maroor	n 🗌 Otl	ner
Par	t 7. Information About Your Employment and Schools You Attended			
recenself-e	where you have worked or attended school full time or part time during the last 5 years. In the last 5 years. Include all military, police, and/or intelligence service. Begin by providing at or current employment, studies, or unemployment (if applicable). Provide the locations and comployed, were unemployed, or have studied for the last 5 years. If you worked for yourself, we apployed, write "unemployed." If you need more space, use an additional sheet(s) of paper to	informat dates who rite "self	tion about yere you wor -employed.	our most ked, were
1.	Employer or School Name			
	Street Number and Name	A <sub>l</sub>	ot. Ste. F	ilr. Number
	City	ate	ZIP	Code + 4
				-
		stal Code	e (foreign a	ddress only)
	Date From (mm/dd/yyyy)  Date To (mm/dd/yyyy)  Your Occupation  ►			
2.	Employer or School Name	h		
	Street Number and Name	Al	ot. Ste. F	Îlr. Number
	City	ate	ZIP	Code + 4
	Province or Region (foreign address only)  Country (foreign address only)  Po	stal Code	e (foreign a	ddress only)
	Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation   ▶ □			

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	Employer or School Name					
	Street Number and Name			Apt.	Ste. Flr.	Number
	City			State	ZIP Code	e + 4
						-
	Province or Region (foreign address	Country (foreign a	address only)	Postal Code (fo	oreign addre	ss only)
		D. ( 11)				
	Date From $(mm/dd/yyyy)$ Date T	To (mm/dd/yyyy) Your (	Occupation			
			+			
Pa	rt 8. Time Outside the United	States				
			the United States during	the last 5 years	s?	days
	How many total days (24 hours or	longer) did you spend outside		-	s?	days
•		longer) did you spend outside		-	s?	days
•	How many total days (24 hours or	longer) did you spend outside ger have you taken outside the	United States during the	last 5 years?		
•	How many total days (24 hours or How many trips of 24 hours or long	longer) did you spend outside ger have you taken outside the or longer that you have taken	United States during the outside the United States	last 5 years?	5 years.	trips
Pa	How many total days (24 hours or How many trips of 24 hours or long List below all the trips of 24 hours of Begin with your most recent trip and	longer) did you spend outside ger have you taken outside the or longer that you have taken d work backwards. If you nee	United States during the outside the United States d more space, use an add	last 5 years? during the last	5 years.	trips
•	How many total days (24 hours or How many trips of 24 hours or long List below all the trips of 24 hours of Begin with your most recent trip and	longer) did you spend outside ger have you taken outside the or longer that you have taken d work backwards. If you nee eturned Did Trip Last 6 d States Months or More?	United States during the outside the United States	last 5 years?  during the last  ditional sheet	5 years. (s) of paper.  To Ou	trips trips
•	How many total days (24 hours or  How many trips of 24 hours or long List below all the trips of 24 hours of Begin with your most recent trip and  Date You Left the United States  United States	longer) did you spend outside ger have you taken outside the or longer that you have taken d work backwards. If you nee eturned Did Trip Last 6 d States Months or More?	United States during the outside the United States d more space, use an additional Countries	last 5 years?  during the last  ditional sheet	5 years. (s) of paper.  To Ou	trips trips
•	How many total days (24 hours or  How many trips of 24 hours or long List below all the trips of 24 hours of Begin with your most recent trip and  Date You Left the United States  United States	longer) did you spend outside ger have you taken outside the or longer that you have taken d work backwards. If you need turned d States Months or More?	United States during the outside the United States d more space, use an additional Countries	last 5 years?  during the last  ditional sheet	5 years. (s) of paper.  To Ou	trips trips
•	How many total days (24 hours or  How many trips of 24 hours or long List below all the trips of 24 hours of Begin with your most recent trip and  Date You Left the United States  United States	longer) did you spend outside ger have you taken outside the or longer that you have taken d work backwards. If you need to states   Did Trip Last 6   Months or More?   Yes   No   Yes   No   Yes   No   Yes   Yes   Yes   No   Yes   Yes	United States during the outside the United States d more space, use an additional Countries	last 5 years?  during the last  ditional sheet	5 years. (s) of paper.  To Ou	trips trips
•	How many total days (24 hours or  How many trips of 24 hours or long List below all the trips of 24 hours of Begin with your most recent trip and  Date You Left the United States  United States	longer) did you spend outside the ger have you taken outside the or longer that you have taken d work backwards. If you need to states Months or More?  Yes No Yes No Yes No	United States during the outside the United States of more space, use an additional Countries Which You T	last 5 years? during the last ditional sheeters to Traveled	5 years. (s) of paper.  To Ou	trips trips
•	How many total days (24 hours or  How many trips of 24 hours or long List below all the trips of 24 hours of Begin with your most recent trip and  Date You Left the United States  United States	longer) did you spend outside ger have you taken outside the or longer that you have taken d work backwards. If you need to states   Did Trip Last 6   Months or More?   Yes   No   Yes   No   Yes   No   Yes   Yes   Yes   No   Yes   Yes	United States during the outside the United States of more space, use an additional Countries Which You T	last 5 years? during the last ditional sheeters to Traveled	5 years. (s) of paper.  To Ou	trips trips

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Pa	rt 9.	. Information About Your Marital History					
1.	Wh	nat is your current marital status?					
		Single, never married  Married  Separated  Divorced  Widowed  Marriage annulled					
2.	If y	ou are married, is your spouse a current member of the U.S. Armed Forces?					
3.	Ho	How many times have you been married (including annulled marriages and marriage(s) to the same person)?					
	If y	ou are single and have <b>never</b> been married, indicate "0" and go to <b>Part 10.</b>					
4.	If y	ou are married now, provide the following information about your current spouse.					
	A.	Legal Name of Current Spouse					
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
	B.	Previous Legal Name of Current Spouse					
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
	C.	Other Names Used by Current Spouse (include nicknames, aliases, and maiden name, if applicable)					
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
	D.	Current Spouse's Date of Birth E. Date You Entered into Marriage with Current Spouse					
		$(mm/dd/yyyy)$ $\blacktriangleright$ $(mm/dd/yyyy)$ $\blacktriangleright$					
	F.	Current Spouse's Present Home Address  Street Number and Name  Apt. Ste. Flr. Number					
		City County State ZIP Code + 4					
		Province or Region (foreign address only)  Country (foreign address only)  Postal Code (foreign address only)					
	G.	Current Spouse's Present Employer					
5.	Is y	your current spouse a U.S. citizen?					
	If "	Yes," answer Item Number 6.					
		No," go to Item Number 7.					

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Pa	9. Information About Your Marital History (continued)  A-	
6.	f your current spouse is a U.S. citizen, complete the following information.	
	When did your current spouse become a U.S. citizen?	
	At birth - Go to Item Number 8.	
	Date your current spouse became a U.S. citizen	
	(mm/dd/yyyy) ►	
7.	f your current spouse is not a U.S. citizen, complete the following information.	
	a. Current Spouse's Country of Citizenship or Nationality  B. Current Spouse's A-Number (if approximately approxim	plicable)
	► A-	
	C. Current Spouse's Immigration Status	
	Permanent Resident Other (explain):	
	Diali	
8.	low many times has your current spouse been married (including annulled marriages and marriage(s)	
	othe same person)? If your current spouse has been married before, provide the following information about our current spouse's prior spouse.	
	f your current spouse has had more than one previous marriage, use an additional sheet(s) of paper to provide to information requested in Items A H. below for each marriage.  A. Prior Spouse's Family Name (Last Name) Given Name (First Name) Middle Name (if application)	
	3. Prior Spouse's Immigration Status	
	U.S. Citizen Permanent Resident Other (explain):	
	C. Prior Spouse's Date of Birth  D. Prior Spouse's Country of Birth	
	(mm/dd/yyyy) ►	
	2. Prior Spouse's Country of Citizenship or Nationality	
	0 6 10 0 10 0 4 0	
	Date of Marriage with Prior Spouse  G. Date Marriage Ended with Prior Spouse	
	(mm/dd/yyyy) ► (mm/dd/yyyy) ►	
	I. How Marriage Ended with Prior Spouse	
	Annulled Divorced Spouse Deceased Other (explain):	

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Pa	rt 9. Ir	formation About Your Marital History (continued)  A-
<b>)</b> .		were married before, provide the following information about your prior spouse. If you have more than one previous ge, use an additional sheet(s) of paper to provide the information requested in Items A H. below for each ge.
	A. Y	ur Prior Spouse's Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	L B. Ye	ur Prior Spouse's Immigration Status When Your Marriage Ended
		U.S. Citizen Permanent Resident Other (explain):
		ur Prior Spouse's Date of Birth  m/dd/yyyy) ▶  D. Your Prior Spouse's Country of Birth
	E. Y	ur Prior Spouse's Country of Citizenship or Nationality
		te of Marriage with Your Prior Spouse  G. Date Marriage Ended with Your Prior Spouse  m/dd/yyyy)   (mm/dd/yyyy)
	н. н	w Marriage Ended with Your Prior Spouse
		Annulled Divorced Deceased Other (explain):
Pa	rt 10. l	nformation About Your Children
l <b>.</b>	missing or olde	e your total number of children. (All children should be indicated, including: A. Children who are alive, a deceased; B. Children born in the United States or in other countries; C. Children under 18 years of age r; D. Children who are currently married or unmarried; E. Children living with you or elsewhere; tent stepchildren; G. Legally adopted children; and H. Children born when you were not married.)
2.		the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. additional sheet(s) of paper to list any additional children.
	A.2. C	ild's Current Legal Name mily Name (Last Name) Given Name (First Name) Middle Name (if applicable)  ild's A-Number (if applicable) A-  (mm/dd/yyyy)
	A.4.C	ild's Country of Birth

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		<b></b> . [		
Part 10. Information About Your Children	(continued)	A- [		
A.5. Child's Current Address				
Street Number and Name			Ant Ste	Flr. Number
Silect (valider and (valide				
City	Townster.	State	71	P Code + 4
City	County	State		- Code + 4
Province or Region (foreign address only) C	Country (foreign address only)	Postal C	ode <i>(foreign</i>	address only)
A.6. What is your child's relationship to you? (e. legally adopted child)	g., biological child, stepchild,			
B.1. Child's Current Legal Name Family Name (Last Name)	Given Name (First Name)	M	iddle Name	(if applicable)
B.2. Child's A-Number (if applicable)  A-  B.4. Child's Country of Birth	B.3. Child's Date of Birth (mm/dd/yyyy) ▶			
B.5. Child's Current Address				
Street Number and Name			Apt. Ste.	Flr. Number
	J. Ctic			
City	County	State	ZI	P Code + 4
Province or Region (foreign address only)	Country (foreign address only)	Postal C	ode <i>(foreign</i>	address only)
B.6. What is your child's relationship to you? (e. legally adopted child)			3	

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1.Child's Current Legal Name		VC111 N 46 1: 11
Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
.2. Child's A-Number (if applicable)	C.3.Child's Date of Birth	
► A-	(mm/dd/yyyy) ►	
.4.Child's Country of Birth		
.5.Child's Current Address		
Street Number and Name		Apt. Ste. Flr. Numbe
ZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZ	7.42 44	
City	County	State ZID Code 4
City	County	State ZIP Code + 4
Province or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address only,
.6. What is your child's relationship to you	? (e.g., biological child, stepchild,	
legally adopted child)	ULIUI	
1. Child's Current Legal Name		
Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
2. Child's A-Number (if applicable)	D.3. Child's Date of Birth	
► A-	(mm/dd/yyyy) ►	
.4. Child's Country of Birth		
.5. Child's Current Address		4.0
		Apt. Ste. Flr. Numbe
Street Number and Name		
Street Number and Name		
	ZO/ZU	State ZID Code + 4
Street Number and Name  City	County	State ZIP Code + 4
City		
		State ZIP Code + 4  Postal Code (foreign address only)

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Pa	rt 11	1. Additional Information		A-		
		tem Numbers 1 21. If you answer "Yes" to any of the of paper and provide any evidence to support your answer		xplanation on	an additional	
1.	Hav	ve you ever claimed to be a U.S. citizen (in writing or any	other way)?		Yes No	
2.	Hav	ve you <b>ever</b> registered to vote in any Federal, State, or loca	al election in the United States?		Yes No	
3.	Hav	ve you <b>ever</b> voted in any Federal, State, or local election in	n the United States?		Yes No	
4.	Do	you now have, or did you ever have, a hereditary title or a	n order of nobility in any foreign	country?	Yes No	
5.	Hav	ve you ever been declared legally incompetent, or been co	nfined to a mental institution?		Yes No	
6.	Do	you owe any overdue Federal, State, or local taxes?	aft		Yes No	
7.	A.	Have you ever not filed a Federal, State, or local tax retu	rn since you became a Permanent	Resident?	Yes No	
	B.	If "Yes," did you consider yourself to be a "non-U.S. resident to be a "non	dent"?		Yes No	
8.		Have you called yourself a "non-U.S. resident" on a Federal, State, or local tax return since you became a Yes No Permanent Resident?				
9.	A.	Have you <b>ever</b> been a member of, involved in, or in any association, fund, foundation, party, club, society, or sim location in the world?	, , ,		Yes No	
	В.	If "Yes," provide the information below. If you need mo additional sheet(s) of paper and provide any evidence		e other group	(s) on an	
		Name of Group	Purpose of the Group	Dates of From (mm/dd/yyyy	Membership To (mm/dd/yyyy)	
		11000	CCIO			
		06/28	/201	3		
10.		ve you <b>ever</b> been a member of, or in any way associated (e	either directly or indirectly) with:			
	A.	The Communist Party?			Yes No	
	В.	Any other totalitarian party? A terrorist organization?			☐ Yes ☐ No ☐ Yes ☐ No	
	С.	11 torrorist organization:				

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Pa	rt 11	1. Additional Information (continued)  A-		
11.		we you <b>ever</b> advocated (either directly or indirectly) the overthrow of any government by force or lence?	Yes	No
12.		we you <b>ever</b> persecuted ( <i>either directly or indirectly</i> ) any person because of race, religion, national gin, membership in a particular social group, or political opinion?	Yes	No
13.		ween March 23, 1933 and May 8, 1945, did you work for or associate in any way (either directly or irectly) with:		
	A.	The Nazi government of Germany?	Yes	No
	B.	Any government in any area (1) occupied by, (2) allied with, or (3) established with the help of the Nazi government of Germany?	Yes	No
	C.	Any German, Nazi, or S.S. military unit, paramilitary unit, self-defense unit, vigilante unit, citizen unit, police unit, government agency or office, extermination camp, concentration camp, prisoner of war camp, prison, labor camp, or transit camp?	Yes	No
14.	We	re you <b>ever</b> involved in any way with any of the following:		
	A.	Genocide?	Yes	No
	B.	Torture?	Yes	No
	C.	Killing, or trying to kill, someone?	Yes	No
	D.	Badly hurting, or trying to hurt, a person on purpose?	Yes	No
	E.	Forcing, or trying to force, someone to have any kind of sexual contact or relations?	Yes	No
	F.	Not letting someone practice his or her religion?	Yes	No
15.		re you <b>ever</b> a member of, or did you <b>ever</b> serve in, help, or otherwise participate in, any of the owing groups:		
	A.	Military unit?	Yes	No
	B.	Paramilitary unit? (a group of people who act like a military group but are not part of the official military)	Yes	No
	C.	Police unit?	Yes	No
	D.	Self-defense unit?	Yes	No
	E.	Vigilante unit? (a group of people who act like the police, but are not part of the official police)	Yes	No
	F.	Rebel group?	Yes	No
	G.	Guerrilla group? (a group of people who use weapons against or otherwise physically attack the military, police, government, or other people)	Yes	No
	Н.	Militia? (an army of people, not part of the official military)	Yes	No
	I.	Insurgent organization? (a group that uses weapons and fights against a government)	Yes	No

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Pai	rt 11. Additional Information (continued)		
16.	Were you <b>ever</b> a worker, volunteer, or soldier, or did you otherwise <b>ever</b> serve in any of the following: <b>A.</b> Prison or jail?	Yes	☐ No
	<b>B.</b> Prison camp?	Yes	☐ No
	C. Detention facility? (a place where people are forced to stay)	Yes	☐ No
	<b>D.</b> Labor camp? (a place where people are forced to work)	Yes	☐ No
	<b>E.</b> Any other place where people were forced to stay?	Yes	☐ No
17.	Were you <b>ever</b> a part of any group, or did you <b>ever</b> help any group, unit, or organization that used a weapon against any person, or threatened to do so?	Yes	☐ No
	<b>A.</b> If "Yes," when you were part of this group, or when you helped this group, did you ever use a weapon against another person?	Yes	☐ No
	<b>B.</b> If "Yes," when you were part of this group, or when you helped this group, did you ever tell another person that you would use a weapon against that person?	Yes	☐ No
18.	Did you <b>ever</b> sell, give, or provide weapons to any person, or help another person sell, give, or provide weapons to any person?	Yes	☐ No
	<b>A.</b> If "Yes," did you know that this person was going to use the weapons against another person?	Yes	☐ No
	<b>B.</b> If "Yes," did you know that this person was going to sell or give the weapons to someone who was going to use them against another person?	Yes	☐ No
19.	Did you <b>ever</b> receive any type of military, paramilitary (a group of people who act like a military group but are not part of the official military), or weapons training?	Yes	☐ No
20.	Did you <b>ever</b> recruit (ask), enlist (sign up), conscript (require), or use any person under age 15 to serve in or help an armed force or group?	Yes	☐ No
21.	Did you <b>ever</b> use any person under age 15 to do anything that helped or supported people in combat?	Yes	☐ No
othe	y of Item Numbers 22 28. apply to you, you must answer "Yes" even if your records have been sealed, rwise cleared. You must disclose this information even if anyone, including a judge, law enforcement officer, that it no longer constitutes a record or told you that you do not have to disclose the information.		
22.	Have you <b>ever</b> committed, assisted in committing, or attempted to commit, a crime or offense for which you were <b>not</b> arrested?	Yes	☐ No
23.	Have you <b>ever</b> been arrested, cited, or detained by any law enforcement officer (including any and all immigration officials or the U.S. Armed Forces) for any reason?	Yes	☐ No
24.	Have you <b>ever</b> been charged with committing, attempting to commit, or assisting in committing a crime or offense?	Yes	☐ No
25.	Have you ever been convicted of a crime or offense?	Yes	☐ No
26.	Have you <b>ever</b> been placed in an alternative sentencing or a rehabilitative program (e.g., diversion, deferred prosecution, withheld adjudication, deferred adjudication)?	Yes	☐ No

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Pai	rt 1	1. Additional Informati	on (continued)			A-	
27.	A.	Have you <b>ever</b> received a su	ispended sentence, beei	n placed on probation	n, or been parole	d?	Yes No
	B.	If "Yes," have you complete	d the probation or paro	le?			Yes No
28.	A.	Have you <b>ever</b> been in jail of	or prison?				Yes No
	B.	If "Yes," how long were you	in jail or prison?	Years	M	lonths	Days
29. If you answered "Yes" to Item Numbers 23 28., complete the following table. If you need more space sheet(s) of paper and provide any evidence to support your answer. If you answered "No" to all Item go to Item Number 30.							
		Why were you arrested, cited, detained, or charged?	Date arrested, cited, detained, or charged. (mm/dd/yyyy)	Where were you a detained, or (City, State,	charged?	arrest, charge (n	e or disposition of the citation, detention or o charges filed, charges d, jail, probation, etc.)
			No	t fo	)r		
	ten e	Item Numbers 30 46. If yo explanation on an additional ve you ever:					
50.		Been a habitual drunkard?					☐ Yes ☐ No
	В.					☐ Yes ☐ No	
	C.						Yes No
	D.	Been married to more than o	one person at the same	time?			Yes No
	E.	Married someone in order to	o obtain an immigration	benefit?			Yes No
	F.	Helped anyone to enter, or t	ry to enter, the United S	States illegally?			Yes No
	G.	Gambled illegally or receive	ed income from illegal	gambling?			☐ Yes ☐ No
	Н.	Failed to support your deper	ndents or to pay alimon	y?			Yes No
	I.	Made any misrepresentation	to obtain any public be	enefit in the United S	States?		Yes No

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Pa	rt 11. Additional Information (continued)	
31.	Have you <b>ever</b> given any U.S. Government official(s) <b>any</b> information or documentation that was false, fraudulent, or misleading?	Yes No
32.	Have you <b>ever</b> lied to any U.S. Government official to gain entry or admission into the United States or to gain immigration benefits while in the United States?	Yes No
33.	Have you ever been removed, excluded, or deported from the United States?	Yes No
34.	Have you ever been ordered removed, excluded, or deported from the United States?	Yes No
35.	Have you ever been placed in removal, exclusion, rescission, or deportation proceedings?	Yes No
36.	Are removal, exclusion, rescission, or deportation proceedings (including administratively closed proceedings) currently pending against you?	Yes No
37.	Have you <b>ever</b> served in the U.S. Armed Forces?	Yes No
38.	Are you currently a member of the U.S. Armed Forces?	Yes No
39.	If you are <b>currently</b> a member of the U.S. Armed Forces, are you scheduled to deploy overseas, including to a vessel, within the next 3 months? (Refer to the <b>Address Change</b> section within the Form N-400 Instructions on how to notify USCIS if you learn of your deployment plans after you file your Form N-400.)	Yes No
40.	If you are <b>currently</b> a member of the U.S. Armed Forces, are you <b>currently</b> stationed overseas?	Yes No
41.	Have you <b>ever</b> 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
42.	Have you <b>ever</b> been discharged from training or service in the U.S. Armed Forces because you were an alien?	Yes No
43.	Have you ever left the United States to avoid being drafted in the U.S. Armed Forces?	Yes No
44.	Have you <b>ever</b> applied for any kind of exemption from military service in the U.S. Armed Forces?	Yes No
45.	Have you ever deserted from the U.S. Armed Forces?	Yes No
46.	A. Are you a male who lived in the United States at any time between your 18th and 26th birthdays? (This does not include living in the United States as a lawful nonimmigrant.)	Yes No
	<b>B.</b> If "Yes," when did you register for the Selective Service? Provide the information below.	
	Date Registered (mm/dd/yyyy) ► Selective Service Number	

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Pa	rt 11. A	dditional Information (continued)	<b>A-</b>					
	<b>C.</b> If "	Yes," but you <b>did not register</b> with the Selective Service System and you are:						
	1.	Still under 26 years of age, you must register before you apply for naturalization, and o information above; <b>OR</b>	com	plete	e the S	elective S	ervice	e
	2.	Now 26 years of age or older but you did not register with the Selective Service, you make you did not register, and a status information letter from the Selective Service.	nust	atta	ch a st	atement e	xplair	ning
		Numbers 47 53. If you answer "No" to any of these questions, include a written per and provide any evidence to support your answer.	exp	olana	ation (	on an add	litiona	al
17.	Do you	support the Constitution and form of government of the United States?				Yes		No
18.	Do you	understand the full Oath of Allegiance to the United States?				Yes		No
19.	Are you	willing to take the full Oath of Allegiance to the United States?				☐ Yes		No
50.	If the la	w requires it, are you willing to bear arms on behalf of the United States?				Yes		No
51.	If the la	w requires it, are you willing to perform noncombatant services in the U.S. Armed Forc	es?			Yes		No
52.	If the la	w requires it, are you willing to perform work of national importance under civilian dire	ectio	n?		Yes		No
NO'	ΓE: Answ	ver the next question <b>ONLY</b> if you answered "Yes" to <b>Part 11., Item Number 4.</b> of For	rm l	<b>N-4</b> 0	0.			
53.	•	naturalization ceremony, are you willing to give up any inherited title(s) or order(s) of the in a foreign country?	nobi	lity	that	☐ Yes		No
Pa	rt 12. Y	our Signature (USCIS will reject your Form N-400 if it is not signed)						
cei	•	ent  r penalty of perjury under the laws of the United States of America, that this application true and correct. I authorize the release of any information USCIS needs to determine						
You	r Signatu	re			_ ]	Date (mm	/dd/yy	vyy)
		-06/20/201		)				
Pa		gnature and Contact Information of the Person Who Prepared This pplicant	Fo	rm,	If O	ther Th	an th	he
he d	express co form, I rev	re, I certify, swear or affirm, under penalty of perjury, that I prepared this form on beharsent of the applicant. I completed the form based only on responses the applicant proviewed it and all of the applicant's responses with the applicant, who agreed with every a on the form and, when required, supplied additional information to respond to a question	vide ansv	d to ver h	me. A ne or sl	fter comp ne provide	oleting	3

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Part 13. Signature and Contact Informat This Form, If Other Than the A	<u>*</u>		
Preparer's Printed Name			
Family Name (Last Name)	Given Name (First Name)	Middle	Name (if applicable)
Preparer's Signature			Date (mm/dd/yyyy)
Preparer's Firm or Organization Name (if application	ble)	Preparer's D	aytime Phone Number
Preparer's Address	raft	(	
Street Number and Name	Jiait	Apt	t. Ste. Flr. Number
City (	County	State	ZIP Code + 4
Province or Region (foreign address only)	Country (foreign address only)	Postal Code (f	foreign address only)
Preparer's E-mail Address		Preparer's Fa	ax Number
			-
Part 14. Statement of Applicants Who Us	sed an Interpreter		
<b>NOTE</b> : If you answered " <i>Yes</i> " to <b>Part 2., Item Num</b> interpreter to interpret the questions on the form, then	2	1	f the form used an
Applicant's Statement Each and every question and instruction on this form, named below in (lange)			me by the interpreter which I am fluent.
I understand each and every question and instruction correct responses in the language indicated above.	on this form, as translated to me by my in	nterpreter, and h	ave provided true and
Your Signature			Date (mm/dd/yyyy)

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Part 14. Statement of Applicants Who	Used an Interpreter (continued)	A-
Your Interpreter's Statement		
I certify that I am fluent in English and		
5	(language used)	
I further certify that I have read each and every quapplicant in the above-mentioned language, and the instruction and question on the form, as well as the	e applicant has informed me that he or she h	
Interpreter's Printed Name		
Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
Interpreter's Signature	Draft	Date (mm/dd/yyyy)
Telephone Number	<del>Diait</del>	
NOTE: Do not complete Parts 15., 16. interview.	, and 17. until the USCIS Officer in	nstructs you to do so at the
Part 15. Signature at Interview		
I swear (affirm) and certify under penalty of perjurthis Form N-400, Application for Naturalization, s and correct. The evidence submitted by me on nur	subscribed by me, including corrections number	
Subscribed to and sworn to (affirmed) before me	$\frac{10}{100}$	12
USCIS Officer's Printed	I Name or Stamp	Date (mm/dd/yyyy)
Applicant's Signature	USCIS Officer's Sign	ature

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Part 16. Renunciation of Foreign Titles	A-				
If you answered "Yes" to Part 11., Item Numbers 4. and 53., then	n you must affirm the following before a USCIS officer:				
I further renounce the title of (list title(s))	which I have heretofore held; or				
I further renounce the order of nobility of	to which I have heretofore belonged.				
Applicant's Printed Name	Applicant's Signature				
USCIS Officer's Printed Name	USCIS Officer's Signature				
	<b>-</b> f+				
Part 17. 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 dire	ection when required by the law; and				
that I will 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					

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