



Application For Naturalization
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form N-400
OMB No. 1615-0052
Expires 09/30/2015

For USCIS Use Only	Date Stamp	Receipt	Action Block
Remarks			

Type or print all your answers 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 USCIS processing your Form N-400. **NOTE: You must complete Parts 1. - 14.**

✓ Add 0 in front if not 9 digits.

Part 1. Information About Your Eligibility (Check only one box or your Form N-400 may be delayed)

Enter Your 9 Digit A-Number:

▶ A-

You are at least 18 years old and

- ☐ Have been a Permanent Resident of the United States for at least 5 years. Refer to dates on memo
- ☐ Have been a Permanent Resident of the United States for at least 3 years. In addition, you have been married to and living with the same U.S. citizen spouse for the last 3 years, and your spouse has been a U.S. citizen for the last 3 years at the time of filing your Form N-400.
- ☐ Are a Permanent Resident of the United States, and you are the spouse of a U.S. citizen, and your U.S. citizen spouse is regularly engaged in specified employment abroad. (Section 319(b) of the Immigration and Nationality Act)
- ☐ Are applying on the basis of qualifying military service.
- ☐ Other (explain):

Part 2. Information About You (Person applying for naturalization)

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

Use name on most recent document. May be different from name on green card or birth certificate.

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)

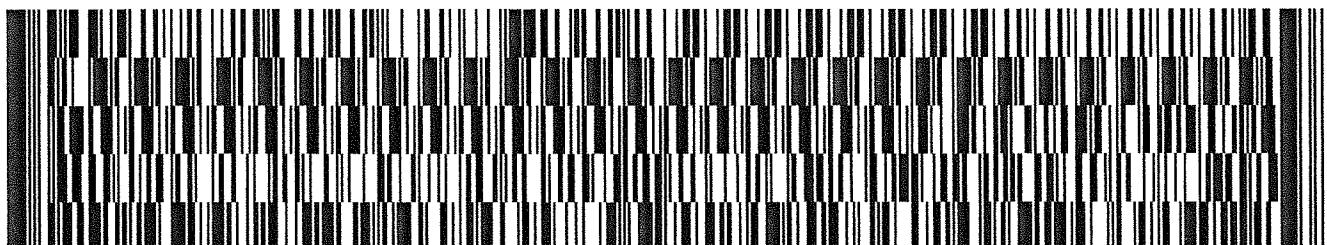
3. Other Name(s) You Have Used Since Birth (include nicknames, aliases, and maiden name if applicable)

All names in any country.

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)



Part 3. Information to Contact You

A-

1. Daytime Phone Number

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2. Work Phone Number (if any)

() -

3. Evening Phone Number

() -

4. Mobile Phone Number (if any)

() -

5. E-mail Address (if any)**Part 4. Information About Your Residence**

- 1. Where have you lived during the last 5 years?** Begin with where you live now and then list every location where you have lived during the last 5 years. **If you need more space, use an additional sheet(s) of paper.**

Date of Residence From (mm/dd/yyyy) ▶

To (mm/dd/yyyy) ▶

Present

Street Number and Name

Apt. Ste. Flr. Number

☐ ☐ ☐ ☐

City

County

[Refer to list in binder](#)

State

ZIP Code + 4

☐ - ☐

Province or Region (foreign address only)

Country (foreign address only)

Postal Code (foreign address only)

A. Mailing Address (if different from the address above)

C/O ("In Care Of" Name, if applicable)

Street Number and Name

Apt. Ste. Flr. Number

☐ ☐ ☐ ☐

City

State

ZIP Code + 4

☐ - ☐

Province or Region (foreign address only)

Country (foreign address only)

Postal Code (foreign address only)

A-												
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- | Street Number and Name | Apt. | Ste. | Flr. | Number |
|------------------------|--------------------------|--------------------------|--------------------------|--------|
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

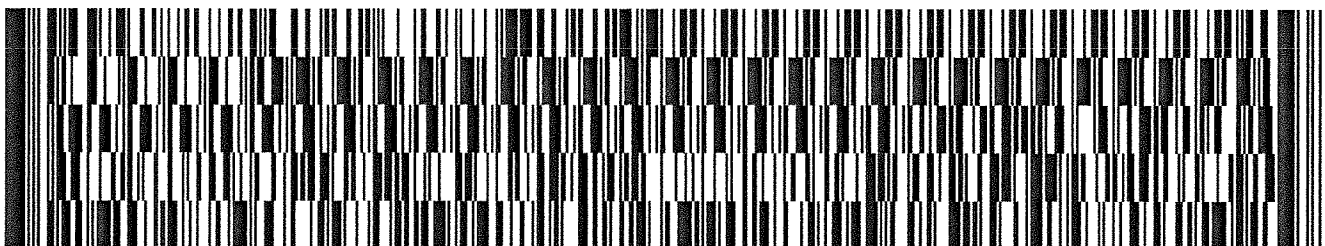
Province or Region <i>(foreign address only)</i>	Country <i>(foreign address only)</i>	Postal Code <i>(foreign address only)</i>

- | Street Number and Name | Apt. | Ste. | Flr. | Number |
|------------------------|--------------------------|--------------------------|--------------------------|--------|
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

Province or Region <i>(foreign address only)</i>	Country <i>(foreign address only)</i>	Postal Code <i>(foreign address only)</i>

- | Street Number and Name | Apt. | Ste. | Flr. | Number |
|------------------------|--------------------------|--------------------------|--------------------------|--------|
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

Province or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address only)



Part 5. Information About Your Parents

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If your biological or legally adoptive mother or father is a U.S. citizen by birth, or naturalized before you reached your 18th birthday, you may already be a U.S. citizen. Visit the USCIS Web site at www.uscis.gov for further information on this topic before you consider filing Form N-400.

1. Were your parents married before your 18th birthday?

☐ Yes ☐ No

2. Is your mother a U.S. citizen?

☐ Yes ☐ No

If "Yes," complete the following information.

If either parent is a USC, please flag for quality control

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)

B. Mother's Country of Birth

C. Mother's Date of Birth (mm/dd/yyyy)

3. Is your father a U.S. citizen?

☐ Yes ☐ No

If "Yes," complete the information below.

A. 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)

B. Father's Country of Birth

C. Father's Date of Birth (mm/dd/yyyy)

Part 6. Information for Criminal Records Check

NOTE: USCIS requires you to complete the categories below to conduct background checks. (See Form N-400 Instructions for more information)

1. Gender ☐ Male ☐ Female

2. Height Feet Inches

3. Ethnicity (Select one)

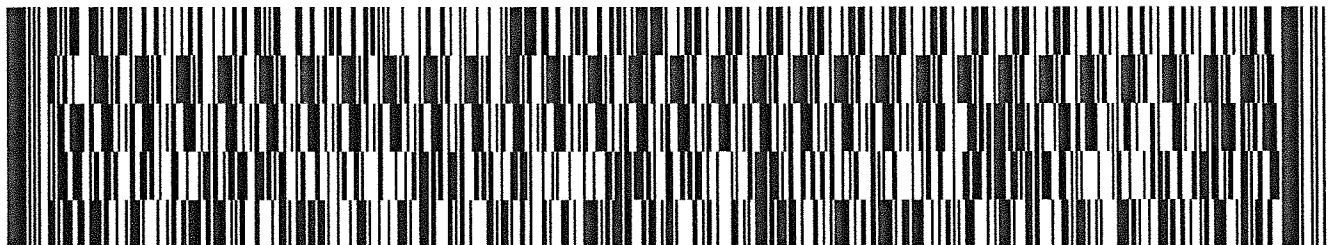
☐ Hispanic or Latino ☐ Not Hispanic or Latino

4. Race (Select one or more)

☐ White ☐ Asian ☐ Black or African American ☐ American Indian or Alaska Native ☐ Native Hawaiian or Other Pacific Islander

5. Hair color

☐ Black ☐ Brown ☐ Blonde ☐ Gray ☐ White ☐ Red ☐ Sandy ☐ Bald (No hair)



Most recent first. If retired or unemployed, put that here, then put most recent job in #2 if any.

Include Adult ED, ESOL, Trainings, & Several/Part-time Employment

Dates can be approximate

Part 6. Information for Criminal Records Check (continued)

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6. Eye color

☐ Brown ☐ Blue ☐ Green ☐ Hazel ☐ Gray ☐ Black ☐ Pink ☐ Maroon ☐ Other

Part 7. Information About Your Employment and Schools You Attended

List where you have worked or attended school full time or part time during the last 5 years. Provide information for the complete time period. Include all military, police, and/or intelligence service. Begin by providing information about your most recent or current employment, studies, or unemployment (if applicable). Provide the locations and dates where you worked, were self-employed, were unemployed, or have studied for the last 5 years. If you worked for yourself, write "self-employed." If you were unemployed, write "unemployed." If you need more space, use an additional sheet(s) of paper to complete Part 7.

Being unemployed will not disqualify you!

1. Employer or School Name

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Street Number and Name

Apt. Ste. Flr. Number

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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City

State

ZIP Code + 4

			-	
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Province or Region (foreign address only)

Country (foreign address only)

Postal Code (foreign address only)

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Date From (mm/dd/yyyy)

Date To (mm/dd/yyyy)

Your Occupation

►		►		
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2. Employer or School Name

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Street Number and Name

Apt. Ste. Flr. Number

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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City

State

ZIP Code + 4

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Province or Region (foreign address only)

Country (foreign address only)

Postal Code (foreign address only)

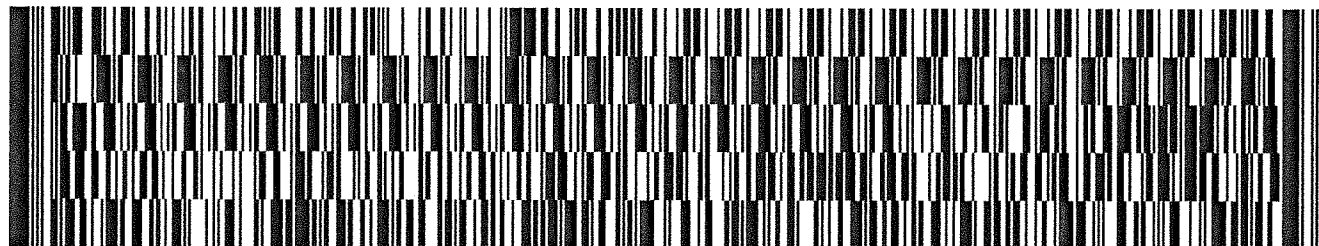
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Date From (mm/dd/yyyy)

Date To (mm/dd/yyyy)

Your Occupation

►		►		
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[illegible]

_____ - _____

►

- days.

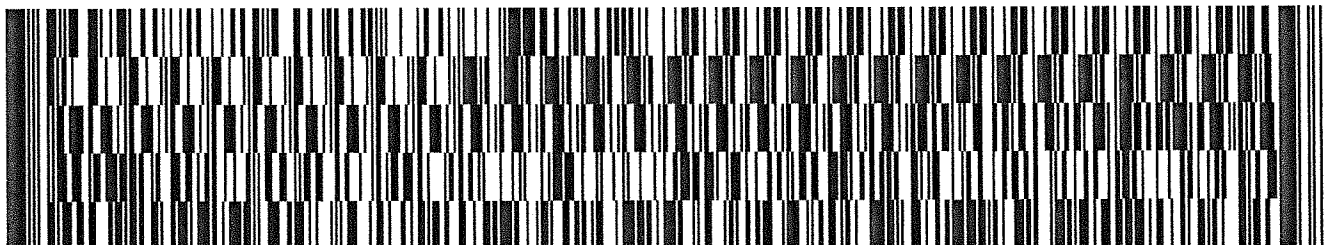
- trips

- Use Citizenship Works app for calculation.

If yes, flag for quality control.

[illegible]

This is not a memory test for the applicant. Dates can be approximate. Check passport stamps if available.



Part 9. Information About Your Marital History

A-

1. What is your current marital status?

☐ Single, never married ☐ Married ☒ Separated ☐ Divorced ☐ Widowed ☐ Marriage annulled

Flag for quality control if using three-year eligibility. Only check if legally separated.

2. If you are married, is your spouse a current member of the U.S. Armed Forces?

☐ Yes ☐ No

3. How many times have you been married (including annulled marriages and marriage(s) to the same person)?

If you are single and have never been married, indicate "0" and go to Part 10.

4. If you are married now, provide the following information about your current spouse.

If currently married and no other marriages, answer "1"

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

(mm/dd/yyyy) ▶

E. Date You Entered into Marriage with Current Spouse

(mm/dd/yyyy) ▶

F. Current Spouse's Present Home Address

Street Number and Name

"Same as applicant"

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 your current spouse a U.S. citizen?

☐ Yes ☐ No

If "Yes," answer Item Number 6.

If "No," go to Item Number 7.

A-

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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- (mm/dd/yyyy) ►

If spouse is undocumented, check "other" and write "non-LPR." If I-130 is pending, write "adjustment application pending."

- _____

[illegible]

- ☐ Permanent Resident ☐ Other (explain):

-

If no other marriages, write "1"

Middle Name *(if applicable)*

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- ☐ U.S. Citizen ☐ Permanent Resident ☐ Other (explain):

- (mm/dd/yyyy) ►

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|--|
| |
|--|

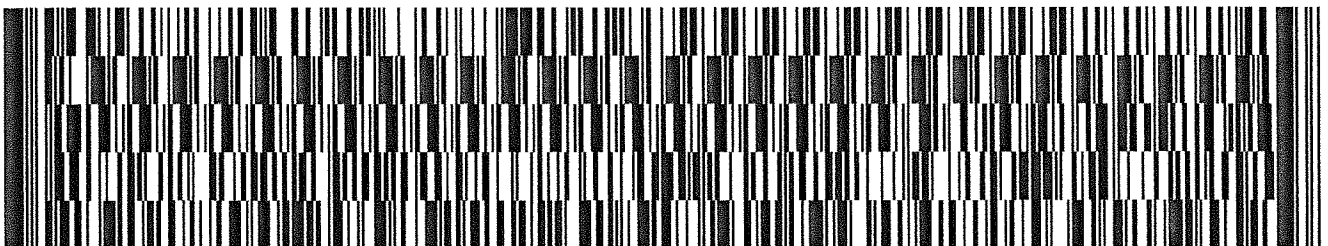
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- (mm/dd/yyyy) ►

- (mm/dd/yyyy) ►

- ☐ Annulled ☐ Divorced ☐ Spouse Deceased ☐ Other (explain):

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Part 9. Information About Your Marital History (continued)

A-

9. If you were married before, provide the following information about your prior spouse. **If you have more than one previous marriage, use an additional sheet(s) of paper to provide the information requested in Items A. - H. below for each marriage.**

A. **Your Prior Spouse's Family Name (Last Name)** **Given Name (First Name)** **Middle Name (if applicable)**

B. **Your Prior Spouse's Immigration Status When Your Marriage Ended**

☐ U.S. Citizen ☐ Permanent Resident ☐ Other (explain):

C. **Your Prior Spouse's Date of Birth**

(mm/dd/yyyy) ▶

D. **Your Prior Spouse's Country of Birth**

E. **Your Prior Spouse's Country of Citizenship or Nationality**

F. **Date of Marriage with Your Prior Spouse**

(mm/dd/yyyy) ▶

G. **Date Marriage Ended with Your Prior Spouse**

(mm/dd/yyyy) ▶

H. **How Marriage Ended with Your Prior Spouse**

☐ Annulled ☐ Divorced ☐ Spouse Deceased ☐ Other (explain):

Part 10. Information About Your Children

1. **Indicate your total number of children.** (All children should be indicated, including: A. Children who are alive, missing, deceased; B. Children born in the United States or in other countries; C. Children under 18 years of age or older; D. Children who are currently married or unmarried; E. Children living with you or elsewhere; F. Current stepchildren; G. Legally adopted children; and H. Children born when you were not married.)

2. Provide the following information about **all your children (sons and daughters)** listed in Item Number 1., regardless of age. Use an additional sheet(s) of paper to list any additional children.

A.1. **Child's Current Legal Name**

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

A.2. **Child's A-Number (if applicable)**

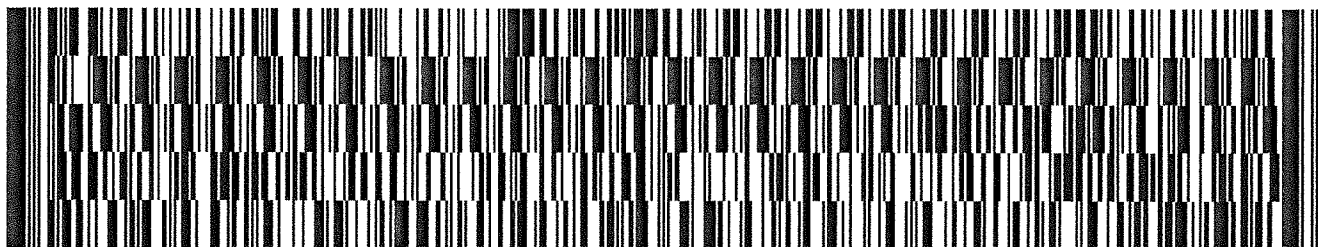
▶ A-

A.3. **Child's Date of Birth**

(mm/dd/yyyy) ▶

A.4. **Child's Country of Birth**

Country name as it was
when child was born.



Part 10. Information About Your Children (continued)

A-

A.5. Child's Current Address

Street Number and Name

Apt. Ste. Flr. Number

Ex: "Child residing with me;" "child deceased;" "child missing;" "unknown."

City

County

State

ZIP Code + 4

Province or Region (foreign address only)

Country (foreign address only)

Postal Code (foreign address only)

A.6. What is your child's relationship to you? (e.g., biological child, stepchild, legally adopted child)

Must be completed

B.1. Child's Current Legal Name

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

B.2. Child's A-Number (if applicable)

▶ A-

B.3. Child's Date of Birth

(mm/dd/yyyy) ▶

B.4. Child's Country of Birth**B.5. Child's Current Address**

Street Number and Name

Apt. Ste. Flr. Number

City

County

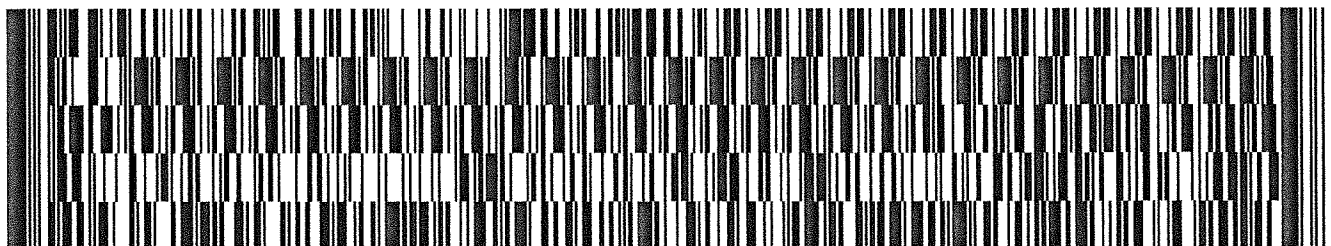
State

ZIP Code + 4

Province or Region (foreign address only)

Country (foreign address only)

Postal Code (foreign address only)

B.6. What is your child's relationship to you? (e.g., biological child, stepchild, legally adopted child)

Part 10. Information About Your Children (continued)

A-

C.1. Child's Current Legal NameFamily Name (*Last Name*)Given Name (*First Name*)Middle Name (*if applicable*)**C.2. Child's A-Number (if applicable)**

▶ A-

C.3. Child's Date of Birth

(mm/dd/yyyy) ▶

C.4. Child's Country of Birth**C.5. Child's Current 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*)**C.6. What is your child's relationship to you? (e.g., biological child, stepchild, legally adopted child)****D.1. Child's Current Legal Name**Family Name (*Last Name*)Given Name (*First Name*)Middle Name (*if applicable*)**D.2. Child's A-Number (if applicable)**

▶ A-

D.3. Child's Date of Birth

(mm/dd/yyyy) ▶

D.4. Child's Country of Birth**D.5. Child's Current Address**

Street Number and Name

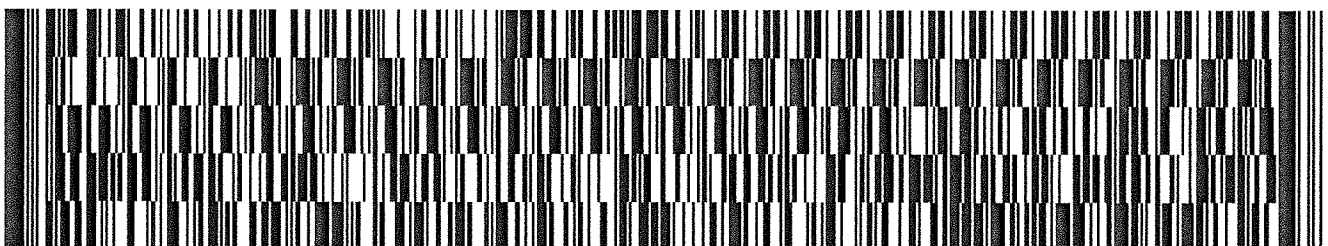
Apt. Ste. Flr. Number

City

County

State

ZIP Code + 4

Province or Region (*foreign address only*)Country (*foreign address only*)Postal Code (*foreign address only*)**D.6. What is your child's relationship to you? (e.g., biological child, stepchild, legally adopted child)**

Flag for quality control if the answer to any of these questions is "yes."

A-

[illegible]

11. Have you **ever** advocated (*either directly or indirectly*) the overthrow of any government by force or violence? ☐ Yes ☐ No

12. Have you **ever** persecuted (*either directly or indirectly*) any person because of race, religion, national origin, membership in a particular social group, or political opinion? ☐ Yes ☐ No

13. Between March 23, 1933 and May 8, 1945, did you work for or associate in any way (*either directly or indirectly*) 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. Were you **ever** 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. Were you **ever** a member of, or did you **ever** serve in, help, or otherwise participate in, any of the following 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

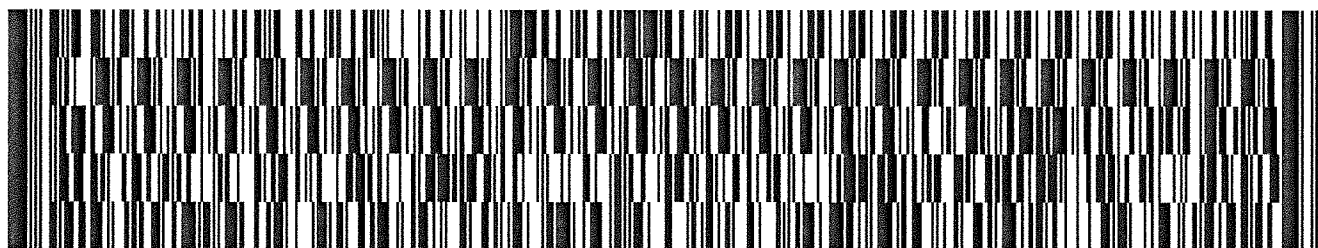
E. Vigilante unit? (*a group of people who act like the police, but are not part of the official police*) ☐ Yes ☐ No

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

H. 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



Flag for quality control if the answer to any of these questions is "yes."

A-

[illegible]

- Cross-reference applicant's criminal history.

Check
juvenile
records,
too.

If any of Item Numbers 22. - 28. apply to you, you must answer "Yes" even if your records have been sealed, expunged, or otherwise cleared. You must disclose this information even if anyone, including a judge, law enforcement officer, or attorney, told you that it no longer constitutes a record or told you that you do not have to disclose the information. **Flag for quality control if "yes"**

Flag for quality control if "yes"

22. Have you **ever** committed, assisted in committing, or attempted to commit, a crime or offense for which you were **not** arrested? ☐ Yes ☐ No

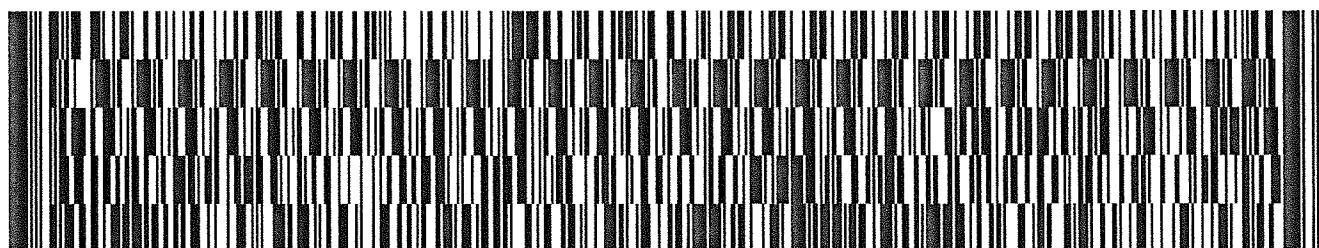
23. Have you **ever** been arrested, cited, or detained by any law enforcement officer (*including any and all immigration officials or the U.S. Armed Forces*) for any reason? ☐ Yes ☐ No

24. Have you **ever** 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 **ever** been placed in an alternative sentencing or a rehabilitative program (*e.g., diversion, deferred prosecution, withheld adjudication, deferred adjudication*)? ☐ Yes ☐ No

Includes moving violations, but not parking tickets.



A-

1. What is the purpose of the study?	
2. What are the research objectives?	
3. What is the research methodology?	
4. What are the results of the study?	
5. What are the conclusions of the study?	
6. What are the limitations of the study?	
7. What are the implications of the study?	
8. What are the future research directions?	

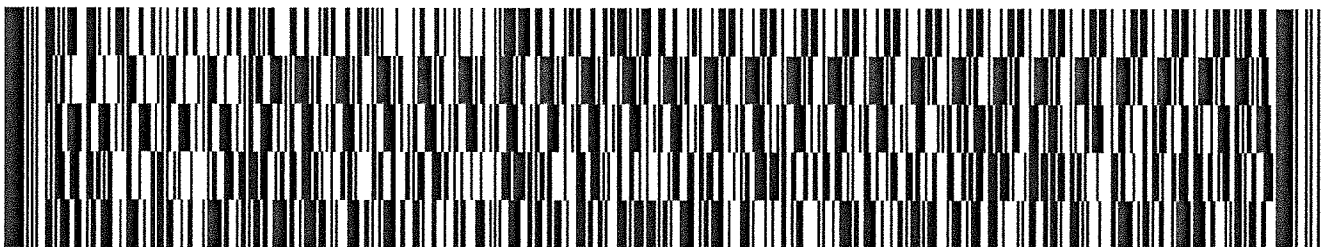
- Flag
for
quality
control
if
"yes"**

**DO NOT
FILE if
applicant
is
currently
on
probation
or parole.**

Answer Item Numbers 30. - 46. If you answer "Yes" to any of these questions, except Item Numbers 37. and 38., include a written explanation on an additional sheet(s) of paper and provide any evidence to support your answer.

- Flag for quality control
if "yes"

Applies even for family members



Part 11. Additional Information (continued)

A-

C. If "Yes," but you **did not** register with the Selective Service System and you are:Register at sss.gov
before mailing.

1. Still under 26 years of age, you must register before you apply for naturalization, and complete the Selective Service information above; **OR**
2. Now 26 years of age or older but you did not register with the Selective Service, you must attach a statement explaining why you did not register, and a status information letter from the Selective Service.

Use attached explanation letter.

Answer Item Numbers 47. - 53. If you answer "No" to any of these questions, include a written explanation on an additional sheet(s) of paper and provide any evidence to support your answer.

Flag for quality control if "no"

47. Do you support the Constitution and form of government of the United States? ☐ Yes ☐ No
48. Do you understand the full Oath of Allegiance to the United States? ☐ Yes ☐ No
49. Are you willing to take the full Oath of Allegiance to the United States? ☐ Yes ☐ No
50. If the law requires it, are you willing to bear arms on behalf of the United States? ☐ Yes ☐ No
51. If the law requires it, are you willing to perform noncombatant services in the U.S. Armed Forces? ☐ Yes ☐ No
52. If the law requires it, are you willing to perform work of national importance under civilian direction? ☐ Yes ☐ No

NOTE: Answer the next question **ONLY** if you answered "Yes" to Part 11., Item Number 4. of Form N-400.

53. At your naturalization ceremony, are you willing to give up any inherited title(s) or order(s) of nobility that you have in a foreign country? ☐ Yes ☐ No

Leave blank if Part 11.4 is "no"

Part 12. Your Signature (USCIS will reject your Form N-400 if it is not signed)**Your Statement**

I certify, under penalty of perjury under the laws of the United States of America, that this application, and the evidence submitted with it, are all true and correct. I authorize the release of any information USCIS needs to determine my eligibility for naturalization.

Your Signature Will be signed at Copy/Mail station**Date** (mm/dd/yyyy)**Part 13. Signature and Contact Information of the Person Who Prepared This Form, If Other Than the Applicant**

By my signature, I certify, swear or affirm, under penalty of perjury, that I prepared this form on behalf of, at the request of, and with the express consent of the applicant. I completed the form based only on responses the applicant provided to me. After completing the form, I reviewed it and all of the applicant's responses with the applicant, who agreed with every answer he or she provided for each question on the form and, when required, supplied additional information to respond to a question on the form.

Part 13. Signature and Contact Information of the Person Who Prepared This Form, If Other Than the Applicant (continued)

A-

Preparer's Printed Name

Check with clinic manager for information.

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 applicable)

Preparer's Daytime Phone Number

() -

Preparer's 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)

Preparer's E-mail Address

Preparer's Fax Number

() -

Part 14. Statement of Applicants Who Used an Interpreter

NOTE: If you answered "Yes" to **Part 2., Item Numbers 11. or 12.** of this form and during the completion of the form used an interpreter to interpret the questions on the form, then **you and your interpreter** must complete this section.

Applicant's Statement

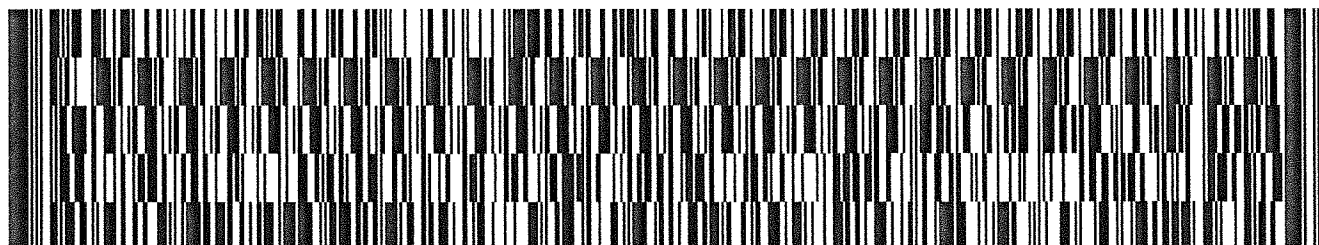
Each and every question and instruction on this form, as well as my answer to each question, has been read to me by the interpreter named below in , a language in which I am fluent.

(language used)

I understand each and every question and instruction on this form, as translated to me by my interpreter, and have provided true and correct responses in the language indicated above.

Your Signature

Date (mm/dd/yyyy)



A-

I certify that I am fluent in English and

(language used)

Interpreter's Printed Name

Family Name (*Last Name*)

Given Name (*First Name*)

Middle Name *(if applicable)***Date** (*mm/dd/yyyy*)**Telephone Number**
$$\left(\begin{array}{c} \text{ } \\ \text{ } \\ \text{ } \end{array} \right) \begin{array}{c} \text{ } \\ \text{ } \\ \text{ } \end{array} = \begin{array}{c} \text{ } \\ \text{ } \\ \text{ } \end{array}$$

LEAVE BLANK

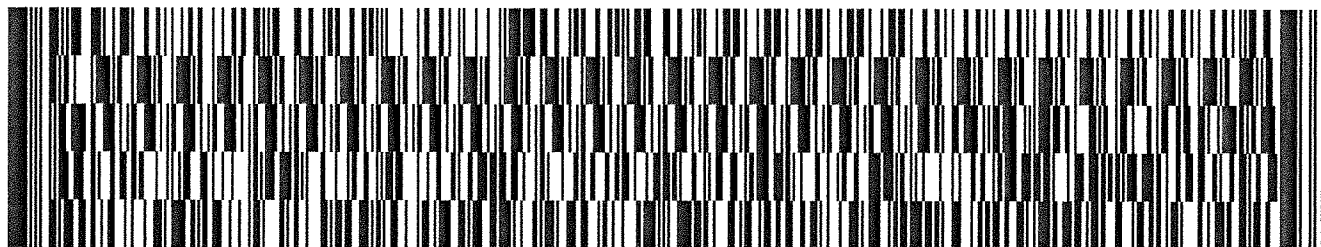
Subscribed to and sworn to (*affirmed*) before me

USCIS Officer's Printed Name or Stamp

Date (mm/dd/yyyy)

Applicant's Signature

USCIS Officer's Signature



A-

I further renounce the title of _____ which I have heretofore held; or
(list title(s))

I further renounce the order of nobility of _____ to which I have heretofore belonged.
(list order of nobility)

Applicant's Signature

USCIS Officer's Signature

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

Family Name (*Last Name*)

Given Name (*First Name*)

Middle Name (if applicable)

Applicant's Signature

