

## **Application For Naturalization**

## **Department of Homeland Security**

U.S. Citizenship and Immigration Services

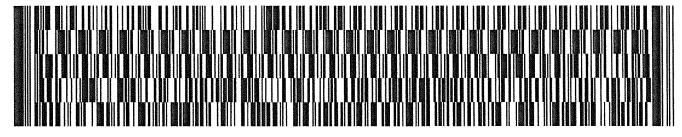
**USCIS Form N-400** OMB No. 1615-0052 Expires 09/30/2015

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		e or print all your answers in b								
		rwise indicated. Failure to answ plete Parts 1 14.	er all of the questions ma	y delay USCIS process	ing your Form					
Э						Add 0 in front if not ter Your 9 Digit A-Number:				
one	Pa	rt 1. Information About Y		ck only one box or	<i>y</i> 0					
is										
;ked!		are at least 18 years old and	*1	C (1 (5	Refer to d	ates on memo				
	1.	Have been a Permanent Re			7 1100	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
: h	2.	1		•		have been married to and living izen for the last 3 years at the time				
f of	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.									
iage proof	3.	3. 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								
ıse's	regularly engaged in specified employment abroad. (Section 319(b) of the Immigration and Nationality Act)									
nship.	4.	Are applying on the basis	of qualifying military ser	vice.						
						L L				
	5.	Other (explain):								
,			You (Person applying	for naturalization						
•	Pa	rt 2. Information About Y		Use name on mos	t recent docum	ent. May be different from name or				
,		rt 2. Information About Y	lo not provide a nickname	Use name on mos green card or birth	t recent docum certificate.	ent. May be different from name or				
	Pa	rt 2. Information About Y	lo not provide a nickname	Use name on mos	t recent docum certificate.					
٠	Pa 1.	rt 2. Information About Y Your Current Legal Name (a Family Name (Last Name)	do not provide a nickname G	Use name on mos green card or birth iven Name (First Name	t recent docum certificate. e)	ent. May be different from name or				
	Pa	rt 2. Information About Y  Your Current Legal Name (a  Family Name (Last Name)  Your Name Exactly As It Ap	do not provide a nickname G opears on Your Permane	Use name on mos green card or birth iven Name (First Name) ent Resident Card (if a	t recent docum certificate. e) applicable)	ent. May be different from name of Middle Name (if applicable)				
	Pa 1.	rt 2. Information About Y Your Current Legal Name (a Family Name (Last Name)	do not provide a nickname G opears on Your Permane	Use name on mos green card or birth iven Name (First Name	t recent docum certificate. e) applicable)	ent. May be different from name or				
	Pa 1.	rt 2. Information About Y  Your Current Legal Name (a  Family Name (Last Name)  Your Name Exactly As It Ap	do not provide a nickname G opears on Your Permane	Use name on mos green card or birth iven Name (First Name) ent Resident Card (if a	t recent docum certificate. e) applicable)	ent. May be different from name of Middle Name (if applicable)				
	Pa 1.	rt 2. Information About Y  Your Current Legal Name (a  Family Name (Last Name)  Your Name Exactly As It Ap	opears on Your Permane	Use name on mos green card or birth iven Name (First Name) ent Resident Card (if diven Name (First Name)	t recent docum certificate. e) applicable)	ent. May be different from name of Middle Name (if applicable)  Middle Name (if applicable)				
	Pa 1.	Your Current Legal Name (a Family Name (Last Name)  Your Name Exactly As It Ap Family Name (Last Name)	opears on Your Permane  Ged Since Birth (include in	Use name on mos green card or birth iven Name (First Name) ent Resident Card (if diven Name (First Name)	t recent docum certificate. e) applicable) e) I maiden name i	Middle Name (if applicable)  Middle Name (if applicable)  Middle Name (if applicable)				
	Pa 1.	Your Current Legal Name (a Family Name (Last Name)  Your Name Exactly As It Ap Family Name (Last Name)  Other Name(s) You Have Us	opears on Your Permane  Ged Since Birth (include in	Use name on mos green card or birth iven Name (First Name) ent Resident Card (if a iven Name (First Name) iven Name (First Name) iven Name (First Name) iven Name, aliases, and	t recent docum certificate. e) applicable) e) I maiden name i	Middle Name (if applicable)  Middle Name (if applicable)  Middle Name (if applicable)  All names in any cou				
	Pa 1.	Your Current Legal Name (a Family Name (Last Name)  Your Name Exactly As It Ap Family Name (Last Name)  Other Name(s) You Have Us	opears on Your Permane  Ged Since Birth (include in	Use name on mos green card or birth iven Name (First Name) ent Resident Card (if a iven Name (First Name) iven Name (First Name) iven Name (First Name) iven Name, aliases, and	t recent docum certificate. e) applicable) e) I maiden name i	Middle Name (if applicable)  Middle Name (if applicable)  Middle Name (if applicable)  All names in any cou				

Pa	rt 2. Information About You (contin	nued)		4-	
<b>→ 4.</b>	Name Change (optional)				
1	Read the Form N-400 Instructions before	you decide whether or not w	on would like to lose	lls, change vour no	ma
Fill out <b>only</b> if applicant	Would you like to legally change your name	•	ou would like to lega		
wants a name	If "Yes," print the new name you would like				Yes   No
change.	Family Name (Last Name)	Given Name (First I	Vame)	Middle Name (if ap	plicable)
	New Name	New Name		New Name	7
5.	U.S. Social Security Number 6. (if applicable) If no SSN, write "N/A"	Date of Birth (mm/dd/yyyy)	7. Date You (mm/dd/yy	Became a Permane	ent Resident
	(y appreciate) II 10 33N, Write N/A	<i>(mm/aa/yyyy)</i> <b>▶</b>	(mini ace yy	<i>yy)</i>	
					Located o
8.	Country of Birth	9. Cou	ıntry of Citizenship (	or Nationality 🗲	resident
					card.
10.	Are you requesting an accommodation(s) an impairment? (See Form N-400 Instruction of The Tryes," check the box(es) below that applied to Deaf or hard of hearing and need an interpretation.	ions for accommodation exampes:	oles)		Yes No
	I los a vibalabair or other device that a			78 V F 2/5 NO ANNE O 2 = 1 =	
	Use a wheelchair or other device that as	ssisis with modifity.			
	Blind or low vision.				
<b>→</b>	Require another type of accommodation	n. (explain):			·
lag for quality o	ontrol				*
11.	Do you have a physical or developmental demonstrating your knowledge and under for naturalization?	rstanding of the English lang	uage and/or civics re Flag for quality con	equirements	Yes No
	If "Yes," submit a completed Form N-648, N	Aedical Certification for Disab	ility Exceptions, when	you file your Form	<i>N-400</i> .
12.	<b>Exemptions from the English Language T</b>	Гest			
<b>50/20</b> and <b>55/15</b> exempt	A. Are you 50 years of age or older and ha periods totaling at least 20 years at the t			esident for	Yes No
from language test.	B. Are you 55 years of age or older and has periods totaling at least 15 years at the t			sident for	Yes No
65/20 exempt from language test and get simplified civics test.	C. Are you 65 years of age or older and has periods totaling at least 20 years at the tyou will also be given a simplified version	time of filing your Form N-400			Yes No

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				******			<del>7.1 71.1.1</del>	
Par	t 3. Information to Contact You				<b>A-</b>		op de grand	
1.	Daytime Phone Number	2. Work P	hone Number (if an	3.	Evenin	g Phone Nu	mber	
4.	Mobile Phone Number (if any)	5. E-mail A	Address (if any)					
Par	t 4. Information About Your Ro	esidence						
Physical	Where have you lived during the last lived during the last 5 years. If you need					location wl	nere you have	•
address, not just mailing	Date of Residence From (mm/dd/yyyy	) ▶		To (mm/da	Uyyyy) <b>▶</b>	Present		
address.	Street Number and Name					Apt. Ste.	Flr. Number	er
	City	Cou	ınty		State	ZI	P Code + 4	
		Re	efer to list in binder					
	Province or Region (foreign address on	ly) Cou	untry (foreign addres	s only)	Postal C	ode <i>(foreign</i>	address only	<i>v)</i>
	A. Mailing Address (if different from C/O ("In Care Of" Name, if applica		ove)					
Ask if		,						
applicant can receive mail reliably at	Street Number and Name					Apt. Ste.	Flr. Numb	er ·
home. If not, give mailing	City			State		Z	IP Code + 4	
address.								
	Province or Region (foreign addre	ss only) Cou	ıntry <i>(foreign addres</i>	ss only)	Postal	Code (foreig	gn address on	ıly)



Pa	rt 4. Information About Your Residenc	ee (continued)	A-
2.	Date of Residence From (mm/dd/yyyy) ▶	To (mm/c	dd/yyyy) ▶
	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)
3.	Date of Residence From (mm/dd/yyyy) ▶	To (mm/c	dd/yyyy) ▶
	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)
4.	Date of Residence From (mm/dd/yyyy) ▶	To (mm/c	dd/yyyy) ▶
	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)

	1. 2.	Wei	e your p our mot	her a U.S	narried S. citizen	before yo		birthday?	L	JSC, p	parer lease	flag		Yes	
	$\rightarrow$		Curren	t Legal N	Name of	g informe U.S. Citi ast Name	zen Moth	er Mother's					ner's Midd	le Name <i>(if a</i>	applic
lete her ISC	<b>&gt;</b>	В.		's Count										Birth (mm/	
	3.	-		er a U.S.		tion belo	w.					L		☐ Yes	s [
	$\rightarrow$	Α.				U.S. Citi ast Name)	zen Fathe )		Given Nar	ne <i>(Firsi</i>	Name)	Fath	er's Middle	e Name (if a	pplica
ete r is	<u> </u>	В.	Father'	s Counti	ry of Bir	th					C.	Father'	s Date of	Birth (mm/c	dd/yyy
	Par	rt 6.	Inforn	nation	for Cri	minal F	Records	Check							
	NOT infor			quires yo	ou to com	plete the	categories	s below to	conduct be	ackgrour	d checks	. (See Fo	orm N-400	Instructions	s for i
	1.	Ger	der [	Male	Fen	nale	2. He	eight Feet		Inches					
	3.	Eth	-	<i>elect one</i> c or Latii		Not His	spanic or I	Latino							
,	4.	Rac	<b>e</b> (Select White	one or n	nore) ian	Black (	or n America	<del></del>	nerican Ir Alaska N			e Hawai r Pacific			
	5.	Ha	r color Black	☐ Bro	own [	Blond	le 🗌 (	Gray 🗌	White	☐ Rec	i 🗌	Sandy	☐ Bald	(No hair)	
	Parameter				<del></del>		Porte de la companya								

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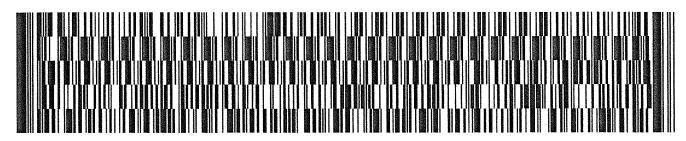
Most recent first. If retired Part 6. Information for Criminal Records Check (continued) or unempl 6. Eye color oyed, put that Blue Green Hazel Brown Gray Black Pink Maroon Other here, then Part 7. Information About Your Employment and Schools You Attended put most List where you have worked or attended school full time or part time during the last 5 years. Provide information for the recent job in complete time period. Include all military, police, and/or intelligence service. Begin by providing information about your most #2 if recent or current employment, studies, or unemployment (if applicable). Provide the locations and dates where you worked, were any. 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 <u> 1</u>. not disqualify you! Employer or School Name Include Adult ED, ESOL, Street Number and Name Apt. Ste. Flr. Number Trainings, & Several/Parttime City State ZIP Code + 4 **Employment** Province or Region (foreign address only) Country (foreign address only) Postal Code (foreign address only) Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation Dates can be approximate 2. Employer or School Name Street Number and Name Apt. Ste. Flr. Number City ZIP Code + 4 State Province or Region (foreign address only) Country (foreign address only) Postal Code (foreign address only) Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation

Employer or School N	Jame		1 HARAGON AND AND AND AND AND AND AND AND AND AN	
Street Number and Na	ıme			Apt. Ste. Flr. Number
City				State ZIP Code + 4
Province or Region (f	oreign address only)	Country (foreign a	ddress only)	Postal Code (foreign address only)
Date From (mm/dd/yy	yy) Date To (mm/dd	l/yyyy) Your (	Occupation	
How many total days	(24 hours or longer) di	• •	the United States d	-
How many total days How many trips of 24 List below all the trip Begin with your most	(24 hours or longer) di hours or longer have y s of 24 hours or longer recent trip and work bac	id you spend outside ou taken outside the that you have taken ockwards. If you need	the United States d United States durin	uring the last 5 years? day
How many total days How many trips of 24 List below all the trip Begin with your most	(24 hours or longer) di hours or longer have y s of 24 hours or longer	id you spend outside rou taken outside the that you have taken ockwards. If you need control.  Did Trip Last 6	the United States d United States durin outside the United S d more space, use	uring the last 5 years? day  g the last 5 years? trip  States during the last 5 years.  Use C  Works
How many total days How many trips of 24 List below all the trip Begin with your most  Date You Left the United States	hours or longer have y s of 24 hours or longer recent trip and work bac f yes, flag for quality of to the United States	id you spend outside rou taken outside the that you have taken ockwards. If you need control.  Did Trip Last 6	the United States d United States durin outside the United S d more space, use	uring the last 5 years? day  g the last 5 years? trip  States during the last 5 years.  an additional sheet(s) of paper.  Use C Works calcula  untries to You Traveled  day  Total Days Outside the
How many total days How many trips of 24 List below all the trip Begin with your most  Date You Left the United States	hours or longer have y s of 24 hours or longer recent trip and work bac f yes, flag for quality of to the United States	id you spend outside you taken outside the that you have taken o ckwards. If you need control.  Did Trip Last 6 Months or More?	the United States d United States durin outside the United S d more space, use	uring the last 5 years? day  g the last 5 years? trip  States during the last 5 years.  an additional sheet(s) of paper.  Use C Works calcula  untries to You Traveled  day  Total Days Outside the
How many total days How many trips of 24 List below all the trip Begin with your most  Date You Left the United States	hours or longer have y s of 24 hours or longer recent trip and work bac f yes, flag for quality of to the United States (mm/dd/yyyy)	id you spend outside  you taken outside the that you have taken o ckwards. If you need control.  Did Trip Last 6 Months or More?  Yes No Yes No	the United States d United States durin outside the United S d more space, use	uring the last 5 years? day  g the last 5 years? trip  States during the last 5 years.  an additional sheet(s) of paper.  Use C Works calcula  untries to You Traveled  day  Total Days Outside the
How many total days How many trips of 24 List below all the trip Begin with your most  Date You Left the United States	hours or longer have y s of 24 hours or longer recent trip and work bac f yes, flag for quality of to the United States (mm/dd/yyyy)	id you spend outside  rou taken outside the  that you have taken outside the  ckwards. If you need  control.  Did Trip Last 6  Months or More?  Yes No  Yes No  Yes No	the United States d United States durin outside the United S d more space, use	uring the last 5 years? day  g the last 5 years? trip  States during the last 5 years.  an additional sheet(s) of paper.  Use C Works calcula  untries to You Traveled  day  Total Days Outside the
How many trips of 24  List below all the trip  Begin with your most  Date You Left the United States	hours or longer have y s of 24 hours or longer recent trip and work bac f yes, flag for quality of to the United States (mm/dd/yyyy)	id you spend outside  you taken outside the that you have taken o ckwards. If you need control.  Did Trip Last 6 Months or More?  Yes No Yes No	the United States d United States durin outside the United S d more space, use	uring the last 5 years? day  g the last 5 years? trip  States during the last 5 years.  an additional sheet(s) of paper.  Use C Works calcula  untries to You Traveled  day  Total Days Outside the

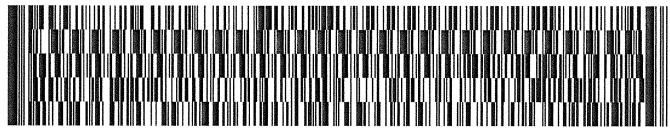
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Pa	rt 9.	. Information About Your Marital I	History	A-
1.	VX/1	hat is your current marital status?	Flag for quality control if using	
1.			eparated Divorced Widowed	
		<del></del>		Marriage annulled
2.	Ify	you are married, is your spouse a current n	nember of the U.S. Armed Forces?	Yes No
3.	Но	w many times have you been married (incl	uding annulled marriages and marriage(.	s) to the same person)?
	Ify	ou are single and have <b>never</b> been married, i	ndicate "0" and go to <b>Part 10.</b>	
4.	If y	you are married now, provide the following	information about your current spous	e. If currently married and no
	A.	Legal Name of Current Spouse		other marriages, answer "1"
		Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
	В.	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 (in		
		Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
	D.	Current Spouse's Date of Birth	E. Date You Entered i	nto Marriage with Current Spouse
		(mm/dd/yyyy) ▶	(mm/dd/yyyy) ▶	ato Harringe with Current Spouse
	F.	Current Spouse's Present Home Address		
		Street Number and Name		Apt. Ste. Flr. Number
		"Same as applicant"		
		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	our current spouse a U.S. citizen?		Yes No
	If"	Yes," answer <b>Item Number 6.</b>		
	If"	No," go to <b>Item Number 7.</b>		
-	***************************************			
			The control of the	1000 1000 1000 1000 1000 1000 1000 100

_		Information About Your Marital History (continued)
<b>).</b>	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.
	В.	Date your current spouse became a U.S. citizen  (mm/dd/yyyy)  If spouse is undocumented, check "other" and write "non-LPR." If I-130 is
7.	If y	our current spouse is not a U.S. citizen, complete the following information. pending, write "adjustment application pending."
	A.	Current Spouse's Country of Citizenship or Nationality  B. Current Spouse's A-Number (if applicable)
		► A-
	C.	Current Spouse's Immigration Status
		Permanent Resident Other (explain):
	info	our current spouse has had more than one previous marriage, use an additional sheet(s) of paper to provide the ormation requested in Items A H. below for each marriage.  Prior Spouse's Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	В.	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) ▶
	E.	Prior Spouse's Country of Citizenship or Nationality
	F.	Date of Marriage with Prior Spouse  G. Date Marriage Ended with Prior Spouse
		(mm/dd/yyyy) ▶ (mm/dd/yyyy) ▶
	н.	How Marriage Ended with Prior Spouse
		Annulled Divorced Spouse Deceased Other (explain):

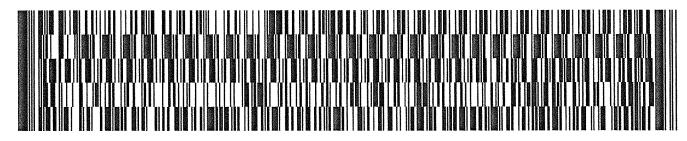


9.	If you were married before, provide the following information about your prior spouse. If you have more than one previous marriage, use an additional sheet(s) of paper to provide the information requested in Items A H. below for each marriage.								
	A.	Your Prior Spouse's Family Name (Last Name) Given Name (First Name) Middle Name (if applicated)							
	В.	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) ►							
	Н.	How Marriage Ended with Your Prior Spouse  Annulled Divorced Spouse Deceased Other (explain):							
Pa	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								
2.	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.)								
<i>.</i>	Use	ovide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of se an additional sheet(s) of paper to list any additional children.  1. Child's Current Legal Name  Family Name (Last Name)  Given Name (First Name)  Middle Name (if applica							
	A.2	2. Child's A-Number (if applicable)  A.3. Child's Date of Birth  (mm/dd/yyyy) ▶							
rite N		4. Child's Country of Birth							



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A.5. Cl	hild's Current Address		
	reet Number and Name	***************************************	Apt. Ste. Flr. Number
E	ex: "Child residing with me;" "child de	eceased;" "child missing;" "unkno	wn."
Ci	ity	County	State ZIP Code + 4
Pr	covince or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address only
 A 6 W	hat is your child's relationship to you?	(e.g. hiological child stenchild	
	gally adopted child)	(e.g., otological chiia, stepchiia,	ust be completed
			. 114. (177)
<b>B.1. C</b> 1	hild's Current Legal Name		
Fa	amily Name (Last Name)	Given Name (First Name)	Middle Name (if applicable
B.2. C	hild's A-Number (if applicable)	B.3. Child's Date of Birth	
	► A-	(mm/dd/yyyy) ▶	
B.4. C	hild's Country of Birth		
	,		
_ 	233 6 441		,
	hild's Current Address		
St	treet Number and Name		Apt. Ste. Flr. Numb
<u>C</u>	ity	County	State ZIP Code + 4
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Pı	rovince or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address onl
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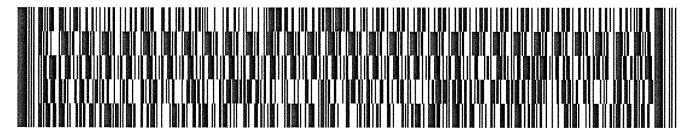


rt 10. Information About Your Children (continued)	A-
C.1. Child's Current Legal Name Family Name (Last Name) Given Name (First Name)	Middle Name (if applicable
C.2. Child's A-Number (if applicable)  A- (mm/dd/yyyy)  C.3. Child's Date of Birth  (mm/dd/yyyy)	
C.4. Child's Country of Birth	
C.5. Child's 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	
D.4. Child's Country of Birth	
D. F. Children Communication of the Communication o	
D.5. Child's Current Address Street Number and Name	Apt. Ste. Flr. Numbe
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)	

Pa	rt 11	. Additional Information			A-	man ( ) construction ( ) of	ANNOTATION OF THE STATE OF THE	1.1.00
		tem Numbers 1 21. If you answer " <i>Yes"</i> to f paper and provide any evidence to support				ı an a	ddition	ıal
1.		ve you ever claimed to be a U.S. citizen (in wi		Flag for quality c the answer to an questions is "Yes	y of these		Yes [	] No
2.	Hav	ve you <b>ever</b> registered to vote in any Federal,	State, or local election in the	ne United States?			Yes [	] No
3.	Hav	ve you <b>ever</b> voted in any Federal, State, or loc	al election in the United St	tates?			Yes [	] No
4.	Do	you now have, or did you ever have, a heredi	tary title or an order of not	oility in any foreign o	country?		Yes [	] No
5.	Hav	ve you ever been declared legally incompetent	t, or been confined to a me	ntal institution?			Yes [	] No
6.	Do	you owe any overdue Federal, State, or local t	Answer "yes" eve	n if tax return was n ke a note for quality	ot control.		Yes [	] No
7.	<b>A.</b>	Have you ever not filed a Federal, State, or l					Yes [	] No
	В.	If "Yes," did you consider yourself to be a "n	on-U.S. resident"?				Yes [	No
8.		ve you called yourself a "non-U.S. resident" or manent Resident?	n a Federal, State, or local	tax return since you	became a		Yes [	No
9.	<b>A.</b>	Have you <b>ever</b> been a member of, involved i association, fund, foundation, party, club, so location in the world?					Yes [	] No
	В.	If "Yes," provide the information below. If y additional sheet(s) of paper and provide a			e other grou	)(s) 01	n an	
		Name of Group	Purpose of th	e Group	Dates o From	f Men	nbersh To	
					(mm/dd/yyy	y) (	mm/dd/	
		Includes church groups, parent teacher organizations, etc.						
					-			
		The state of the s						
10.	Hav	we you ever been a member of, or in any way	associated (either directly	or indirectly) with:			f	,
	<b>A.</b>	The Communist Party?					Yes [	No
	В.	Any other totalitarian party?					Yes [	No
	C.	A terrorist organization?					Yes [	No

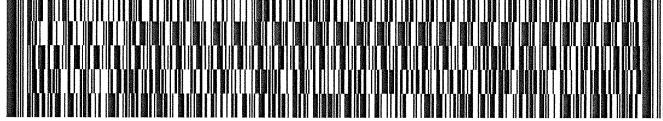
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Pa	rt 1	1. Additional Information (continued) Flag for quality control if the answer to any of these questions is "yes."	ALLAMANTERS AND AT		4	and the second
11.	Ha vio		Yes		No	
12.	Have you <b>ever</b> persecuted ( <i>either directly or indirectly</i> ) any person because of race, religion, national origin, membership in a particular social group, or political opinion?					No
13.	Bet ind					
	A.	The Nazi government of Germany?		Yes		No
	В.	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 ever involved in any way with any of the following:				
1		Genocide?		Yes		No
1	В.	Torture? Do not need to say "yes" if		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
<u>s.</u>	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
	В.	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)					No
	I. Insurgent organization? (a group that uses weapons and fights against a government)					No



				,,,,,,				_			
	Par	t 11. Additional Information (continued)	Flag for quality control if the answer to any of these questions is "yes."	<b>1</b> -	Approximately of the state of t		And a charge of a state of				
	16.	Were you <b>ever</b> a worker, volunteer, or soldier, or did	you otherwise ever serve in any of the follow	owing:							
		A. Prison or jail?				Yes		No			
		B. Prison camp?				Yes		No			
		C. Detention facility? (a place where people are for	ced to stay)			Yes		No			
		<b>D.</b> Labor camp? (a place where people are forced to	work)			Yes		No			
		E. 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> he weapon against any person, or threatened to do so?				Yes		No			
		<b>A.</b> If "Yes," when you were part of this group, or wh against another person?	en you helped this group, did you ever use	a weapon		Yes		No			
		<b>B.</b> If "Yes," when you were part of this group, or wh person that you would use a weapon against that		another		Yes		No			
7	18.	Did you <b>ever</b> sell, give, or provide weapons to any peweapons to any person?	rson, or help another person sell, give, or p	rovide		Yes		No			
Cross- reference	e	A. If "Yes," did you know that this person was going	g to use the weapons against another person	1?		Yes		No			
applican criminal history.		<b>B.</b> If "Yes," did you know that this person was going going to use them against another person?	g to sell or give the weapons to someone w	no was		Yes		No			
inotory.	19.	Did you <b>ever</b> receive any type of military, paramilitar are not part of the official military), or weapons training		y group but		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?									
	21.	Did you ever use any person under age 15 to do anyth	ning that helped or supported people in con	nbat?		Yes		No			
Check		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									
juvenile records,	you that it no longer constitutes a record or told you that you do not have to disclose the information. Flag for quality										
too.	22.	Have you <b>ever</b> committed, assisted in committing, or	attempted to commit, a crime or offense for	or which you	$\overline{\Box}$	Yes		No			
			ving violations, but not parking tickets.	,	Ш	163		110			
	23.	Have you <b>ever</b> been arrested, cited, or detained by an immigration officials or the U.S. Armed Forces) for a		ınd all		Yes		No			
	24.	Have you <b>ever</b> been charged with committing, attemptoffense?	oting to commit, or assisting in committing	a crime or		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 sentencial deferred prosecution, withheld adjudication, deferred		on,		Yes		No			

Flag Part 11. Additional Information (continued) for quality control 27. A. Have you ever received a suspended sentence, been placed on probation, or been paroled? if **B.** If "Yes," have you completed the probation or parole? Yes No "yes" 28. A. Have you ever been in jail or prison? Yes No **B.** If "Yes," how long were you in jail or prison? Years Months Days 29. If you answered "Yes" to Item Numbers 23. - 28., complete the following table. If you need more space, use an additional sheet(s) of paper and provide any evidence to support your answer. If you answered "No" to all Item Numbers 23. - 28., DO NOT go to Item Number 30. FILE if applicant Why were you Date arrested, cited. Where were you arrested, cited, Outcome or disposition of the is detained, or detained, or charged? arrested, cited, arrest, citation, detention or currently charged. charge (no charges filed, charges detained, or charged? (City, State, Country) on (mm/dd/yyyy) dismissed, jail, probation, etc.) 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. 30. Have you ever: Flag for quality control if "yes" A. Been a habitual drunkard? Yes ☐ No **B.** Been a prostitute, or procured anyone for prostitution? Yes No C. Sold or smuggled controlled substances, illegal drugs, or narcotics? Yes No **D.** Been married to more than one person at the same time? Yes No E. Married someone in order to obtain an immigration benefit? Yes No Applies even for family F. Helped anyone to enter, or try to enter, the United States illegally? Yes No members G. Gambled illegally or received income from illegal gambling? Yes No **H.** Failed to support your dependents or to pay alimony? Yes No Made any misrepresentation to obtain any public benefit in the United States? Yes No

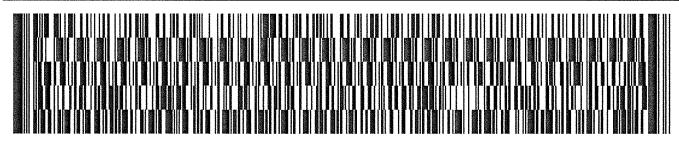


Par	rt 11. Additional Information (continued) Flag for quality control if "yes"	- chicare and delegates	
31.	Have you <b>ever</b> given any U.S. Government official(s) <b>any</b> information or documentation that was false, fraudulent, or misleading? Includes false information on green card, visa, and asylum applications	Yes	
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	
33.	Have you ever been removed, excluded, or deported from the United States?	Yes	
34.	Have you ever been ordered removed, excluded, or deported from the United States?	Yes	
35.	Have you ever been placed in removal, exclusion, rescission, or deportation proceedings?	Yes	
36.	Are removal, exclusion, rescission, or deportation proceedings (including administratively closed proceedings) currently pending against you?	Yes	
37.	Have you ever served in the U.S. Armed Forces?	Yes	
38.	Are you currently a member of the U.S. Armed Forces?	Yes	
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	
40.	If you are currently a member of the U.S. Armed Forces, are you currently stationed overseas?	Yes	
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	
42.	Have you <b>ever</b> been discharged from training or service in the U.S. Armed Forces because you were an alien?	Yes	
43.	Have you ever left the United States to avoid being drafted in the U.S. Armed Forces?	Yes	
44.	Have you ever applied for any kind of exemption from military service in the U.S. Armed Forces?	Yes	
45.	Have you ever deserted from the U.S. Armed Forces?	Yes	
<b>46.</b> ↑	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.)  B. If "Year" when did you resister for the Selective Service? Provide the information below.	Yes	
tion at	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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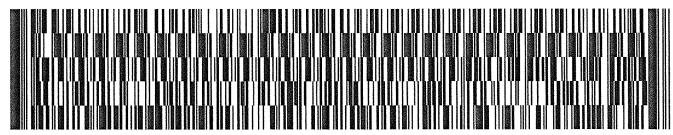
Pa	rt 11. Additional Information (continued)					
	C. If "Yes," but you did not register with the Selective Service System and you are:  Register at sss.gov before mailing.					
	<ol> <li>Still under 26 years of age, you must register before you apply for naturalization, and complete the information above; OR</li> </ol>	Selective Service				
	2. Now 26 years of age or older but you did not register with the Selective Service, you must attach a why you did not register, and a status information letter from the Selective Service. Use attached	statement explaining explanation letter.				
	wer Item Numbers 47 53. If you answer "No" to any of these questions, include a written explanation at(s) of paper and provide any evidence to support your answer.  Flag for quality control if "no"					
<b>1</b> 7.	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?					
50.	. If the law requires it, are you willing to bear arms on behalf of the United States?					
51.	. If the law requires it, are you willing to perform noncombatant services in the U.S. Armed Forces?					
52.	If the law requires it, are you willing to perform work of national importance under civilian direction?	Yes No				
NO	TE: Answer the next question <b>ONLY</b> if you answered "Yes" to <b>Part 11., Item Number 4.</b> 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				
Pa	rt 12. Your Signature USCIS will reject your Form N-400 if it is not signed)					
ce vith	r Statement tify, under penalty of perjury under the laws of the United States of America, that this application, and the evi- it, are all true and correct. I authorize the release of any information USCIS needs to determine my eligibility r Signature  Will be signed at Copy/Mail station					
Pa	rt 13. Signature and Contact Information of the Person Who Prepared This Form, If (	Other Than the				

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.



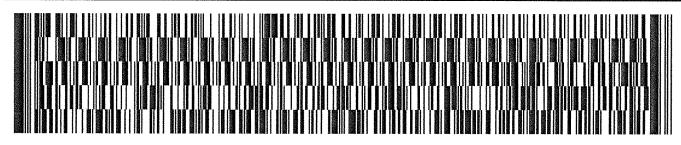
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Part 13. Signature and Contact Inform This Form, If Other Than the	医连续性结束 医克勒氏试验 化二氯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	A-
Preparer's Printed Name Check with clinic market for information.	nager	
Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
Preparer's Signature		Date (mm/dd/yyyy)
Preparer's Firm or Organization Name (if apple	cable)	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 No interpreter to interpret the questions on the form, t		
Applicant's Statement Each and every question and instruction on this for named below in	rm, as well as my answer to each question,	has been read to me by the interpreter , a language in which I am fluent.
(1	anguage used)	
I understand each and every question and instructic correct responses in the language indicated above.		interpreter, and have provided true and
Your Signature		Date (mm/dd/yyyy)



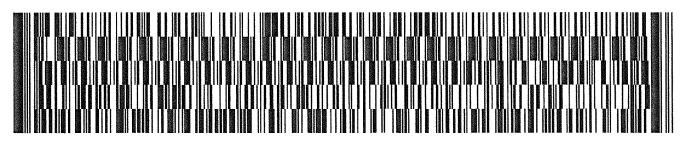
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	cants Who Used an Interpreter (continue	d)
Your Interpreter's Statement		
I certify that I am fluent in English a	and (language used)	
	, ,	
applicant in the above-mentioned la	n and every question and instruction on this form, as nguage, and the applicant has informed me that he on, as well as the answer to each question.	well as the answer to each question, to this r she has understood each and every
Interpreter's Printed Name		
Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
107-10 PM-4-07-1		
Interpreter's Signature		Date (mm/dd/yyyy)
TO STATE OF THE ST		
Telephone Number  (	arts 15., 16., and 17. until the USCIS Offi	
interview.	aris 13, 10, and 17, then the objects of	cer instructs you to do so at the
The second secon	LEAVE BLANK	
The second secon	LEAVE BLANK	
Part 15. Signature at Interv  I swear (affirm) and certify under pethis Form N-400, Application for Na	LEAVE BLANK	of America that I know that the contents of as number 1 through , are true
Part 15. Signature at Interv  I swear (affirm) and certify under pethis Form N-400, Application for Na	ciew  enalty of perjury under the laws of the United States aturalization, subscribed by me, including correction d by me on numbered pages 1 through	of America that I know that the contents of as number 1 through , are true
Part 15. Signature at Interv  I swear (affirm) and certify under pethis Form N-400, Application for National Correct. The evidence submitted	ciew  enalty of perjury under the laws of the United States aturalization, subscribed by me, including correction d by me on numbered pages 1 through	of America that I know that the contents of as number 1 through , are true
Part 15. Signature at Intervals wear (affirm) and certify under pethis Form N-400, Application for Natural Correct. The evidence submitted Subscribed to and sworn to (affirmed)	ciew  enalty of perjury under the laws of the United States aturalization, subscribed by me, including correction d by me on numbered pages 1 through	of America that I know that the contents of as number 1 through , are true
Part 15. Signature at Interval Subscribed to and sworn to (affirmed)	ciew  chalty of perjury under the laws of the United States aturalization, subscribed by me, including correction d by me on numbered pages 1 through  d) before me	of America that I know that the contents of as number 1 through, are true is true and correct.  Date (mm/dd/yyyy)



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Part 16. Renunciation of Foreign Titles		A-				
If you answered "Yes" to Part 11., Item Numbers 4. and	53., then you must affirm the fo	ollowing before a USCIS officer:				
I further renounce the title of	itle(s)) whi	ich I have heretofore held; or				
·	(2))	to which I have heretofore belonged.				
I further renounce the order of nobility of	(list order of nobility)					
Applicant's Printed Name	Applicant's Signature					
USCIS Officer's Printed Name	USCIS Officer's Sign	nature				
Part 17. Oath of Allegiance						
I hereby declare on oath, that I absolutely and entirely ren state, or sovereignty, of whom or which I have heretofore that I will support and defend the Constitution and laws of	been a subject or citizen;					
that I will bear true faith and allegiance to the same;		against an entermost, 2010-gar and acondoste,				
that I will bear arms on behalf of the United States when r	required by the law;					
that I will perform noncombatant service in the Armed Fo	orces of the United States when	required by the law;				
that I will perform work of national importance under civil	ilian direction when required by	y the law; and				
that I will take this obligation freely, without any mental r	reservation or purpose of evasion	on, 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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