

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

USCIS  
 Form N-400  
 OMB No. 1615-0052  
 Expires 03/31/2019

For USCIS Use Only	Date Stamp	Receipt	Action Block
Remarks			

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

If your biological or legal adoptive mother or father is a U.S. citizen by birth, or was naturalized before you reached your 18th birthday, you may already be a U.S. citizen. Before you consider filing this application, please visit the USCIS Website at [www.uscis.gov](http://www.uscis.gov) for more information on this topic and to review the instructions for Form N-600, Application for Certificate of Citizenship, and Form N-600K, Application for Citizenship and Issuance of Certificate Under Section 322.

NOTE: Are either of your parents a United States citizen? If you answer "Yes," then **Complete** Information About Your Parents as part of this application. If you answer "No," then **Part 6**, and go to **Part 7**, Biographic Information.

<b>Part 1. Information About Your Eligibility (Select only one box or your Form N-400 may be delayed)</b>	Enter Your 9 Digit A-Number: y A- <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>									

1. You are at least 18 years of ~~age~~ **aged**:
  - A.  Have been a lawful permanent resident of the United States for at least 5 years.
  - B.  Have been a lawful permanent resident of the United States for at least 3 years. In addition, you have been married and living with the same U.S. citizen spouse for the last 3 ~~years~~ **years**, your spouse has been a U.S. citizen for the last 3 years at the time you filed your Form N-400.
  - C.  Are a lawful permanent resident of the United States ~~and~~ **and** you are the spouse of a U.S. citizen ~~and~~ **and** your U.S. citizen spouse is regularly engaged in specified employment abroad. (See the Immigration and Nationality Act (INA) section 319(b).) If your residential address is outside the United States and you are filing under Section 319(b), select the USCIS Field Office from the list below where you would like to have your naturalization interview:
  - D.  Are applying on the basis of qualifying military service.
  - E.  Other (Explain):

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

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

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
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)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

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

3. Other Names 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)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Name Change (Optional)  
 Read the Form N-400 Instructions before you decide whether or not you would like to legally change your name.  
 Would you like to legally change your name? Check one →  Yes  No  
 If you answered "Yes," type or print the new name you would like to use in the spaces provided below.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
New Name	New Name	New Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. U.S. Social Security Number (if applicable) 6. USCIS Online Account Number (if any)

y <input type="text"/>	y <input type="text"/>
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← Leave blank

7. Gender  Male  Female

8. Date of Birth (mm/dd/yyyy)

9. Date You Became a Lawful Permanent Resident (mm/dd/yyyy)  located on permanent resident card.

10. Country of Birth Name when applicant was born

11. Country of Citizenship or Nationality

12. Do you have a physical or developmental disability or mental impairment that prevents you from demonstrating your knowledge and understanding of the English language and/or civics requirements for naturalization? Yes  No

If you answered "Yes," submit a completed Form N-648, Medical Certification for Disability Exceptions, when you file your Form N-400.

13. Exemptions from the English Language Test

A. 50/20 and 55/15 Are you 50 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 20 years at the time you file your Form N-400?  Yes  No

B. 65/20 exempt fr Are you 55 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 15 years at the time you file your Form N-400?  Yes  No

C. Are you 65 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 20 years at the time you file your Form N-400? (If you meet this requirement, you will also be given a simplified version of the civics test.)  Yes  No

**Part 3. Accommodations for Individuals With Disabilities and/or Impairments**

NOTE: Read the information in the Form N-400 Instructions before completing this part. Flag for quality control.

1. Are you requesting an accommodation because of your disabilities and/or impairments? Yes  No

If you answered "Yes," select any applicable box.

A.  I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).)

B.  I am blind or have low vision and request the following accommodation:

**Part 3. Accommodations for Individuals With Disabilities and/or Impairments (continued)**

A-

- C.  I have another type of disability and/or impairment (for example, use a wheelchair). (Describe the nature of your disability and/or impairment and the accommodation you are requesting.)

**Part 4. Information to Contact You**

1. Daytime Telephone Number

2. Work Telephone Number (if any)

3. Evening Telephone Number

4. Mobile Telephone Number (if any)

5. Email Address (if any)

**Part 5. Information About Your Residence**

1. Where have you lived during the last five years? Provide your most recent residence and then list every location where you have lived during the last five years. If you need extra space, use additional sheets of paper.

A. Current Physical Address

Physical address

Street Number and Name

Apt. Ste. Flr. Number

   

City or Town

County

 Refer to list in binder

State

ZIP Code + 4

 - 

Province or Region  
(foreign address only)

Postal Code  
(foreign address only)

Country  
(foreign address only)

Dates of Residence From (mm/dd/yyyy)

To (mm/dd/yyyy)

B. Current Mailing Address (if different from the address above)

In Care Of Name (if any)

Street Number and Name

Apt. Ste. Flr. Number

   

City or Town

County

State

ZIP Code + 4

 - 

Province or Region  
(foreign address only)

Postal Code  
(foreign address only)

Country  
(foreign address only)

**Part 5. Information About Your Residence(continued)**

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**C. Physical Address 2**

Street Number and Name  Apt.  Ste.  Flr.  Number

City or Town  County  State  ZIP Code + 4  -

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

Dates of Residence From (mm/dd/yyyy)  To (mm/dd/yyyy)

**D. Physical Address 3**

Street Number and Name  Apt.  Ste.  Flr.  Number

City or Town  County  State  ZIP Code + 4  -

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

Dates of Residence From (mm/dd/yyyy)  To (mm/dd/yyyy)

**E. Physical Address 4**

Street Number and Name  Apt.  Ste.  Flr.  Number

City or Town  County  State  ZIP Code + 4  -

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

Dates of Residence From (mm/dd/yyyy)  To (mm/dd/yyyy)

**Part 6. Information About Your Parents**

If neither one of your parents is a United States citizen, then skip this part and go to Part 7.

1. Were your parents married before your 18th birthday?  Yes  No

**Information About Your Mother**

for quality control.

2. Is your mother a U.S. citizen?  Yes  No

If you answered "Yes," complete the following information. If you answered "No," go to Number 3.

**Part 6. Information About Your Parents (continued)**

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A. Current Legal Name of U.S. Citizen Mother

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

B. Mother's Country of Birth

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

Only complete

D. Date Mother Became a U.S. Citizen (if known) (mm/dd/yyyy)

E. Mother's A-Number (if any)

y A-

**Information About Your Father**

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

Yes  No

If you answered "Yes," complete the information below. If you answered "No," **Part 7.**

A. Current Legal Name of U.S. Citizen Father

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

B. Father's Country of Birth

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

Only complete

D. Date Father Became a U.S. Citizen (if known) (mm/dd/yyyy)

E. Father's A-Number (if any)

y A-

**Part 7. Biographic Information**

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

1. Ethnicity (Select only one box)

Hispanic or Latino  Not Hispanic or Latino

2. Race (Select all applicable boxes)

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

3. Height Feet  Inches  4. Weight Pounds

5. Eye color (Select only one box)

Black  Blue  Brown  Gray  Green  Hazel  Maroon  Pink  Unknown/Other

6. Hair color (Select only one box)

Bald (No hair)  Black  Blond  Brown  Gray  Red  Sandy  White  Unknown/Other

**Part 8. Information About Your Employment and Schools You Attended**

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List where you have worked or attended school full time or part time during the last five 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 five years. If you worked for yourself, type or print "self-employed." If you were unemployed, type or print "unemployed." If you need extra space, use additional sheets of paper.

Being unemployed will not disqualify you!

1. Employer or School Name Most recent Prst. If retired or unemployed, put that here, then put most recent job in #2 if any.

Include Adult

Street Number and Name Address where applicant worked. City/State is okay. Apt. Ste. Flr. Number

City or Town State ZIP Code + 4  
   -

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

Dates can be a

Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation

2. Employer or School Name

Street Number and Name Apt. Ste. Flr. Number

City or Town State ZIP Code + 4  
   -

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

Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation

3. Employer or School Name

Street Number and Name Apt. Ste. Flr. Number

City or Town State ZIP Code + 4  
   -

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

Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation

**Part 9. Time Outside the United States**

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- How many total days (24 hours or longer) did you spend outside the United States during the last 5 years?  days Use citizenship-jip Works app for calculation.
- How many trips of 24 hours or longer have you taken outside the United States during the last 5 years?  trips
- List below all the trips of 24 hours or longer that you have taken outside the United States during the last 5 years. Start with your most recent trip and work backwards. If you need extra space, use additional sheets of paper.

If yes, flag f

This is not a me

Date You Left the United States (mm/dd/yyyy)	Date You Returned to the United States (mm/dd/yyyy)	Did Trip Last 6 Months or More?	Countries to Which You Traveled	Total Days Outside the United States
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part 10. Information About Your Marital History**

- What is your current marital status?  
 Single, Never Married  Married  Divorced  Widowed  Separated  Marriage Annulled  
 If you are single and have never married, go to Part 11.
- If you are married, is your spouse a current member of the U.S. armed forces?  Yes  No
- How many times have you been married (including annulled marriages, marriages to other people, and marriages to the same person)?
- If you are married now, provide the following information about your current spouse. If currently married and no other marriages, answer 010

A. Current Spouse's Legal Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>

B. Current Spouse's Previous Legal Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>

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)
<input type="text"/>	<input type="text"/>	<input type="text"/>

D. Current Spouse's Date of Birth (mm/dd/yyyy)

E. Date You Entered into Marriage with Current Spouse (mm/dd/yyyy)

ÒSame as applicant



If spouse is undocu

If no other  
marriages, write Ò1

**OK to write unknown**



**Part 10. Information About Your Marital History (continued)**

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F. My Current Spouse's Date of Marriage with Prior Spouse (mm/dd/yyyy)   
G. Date My Current Spouse's Marriage Ended with Prior Spouse (mm/dd/yyyy)

H. How My Current Spouse's 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, provide that information on additional sheets of paper.

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

B. My Prior Spouse's Immigration Status When My Marriage Ended (if known)  
 U.S. Citizen  Lawful Permanent Resident  Other (Explain):

C. My Prior Spouse's Date of Birth (mm/dd/yyyy)   
D. My Prior Spouse's Country of Birth

E. My Prior Spouse's Country of Citizenship or Nationality   
F. Date of Marriage with My Prior Spouse (mm/dd/yyyy)  **OK to write unknown**

G. Date Marriage Ended with My Prior Spouse (mm/dd/yyyy)

H. How Marriage Ended with My Prior Spouse  
 Annulled  Divorced  Spouse Deceased  Other (Explain):

**Part 11. Information About Your Children**

1. Indicate your total number of children. (You must include all children, including: children who are alive, missing, or deceased; children born in the United States or in other countries; children under 18 years of age or older; children who are currently married or unmarried; children living with you or elsewhere; current stepchildren; legally adopted children; and children born when you were not married.)

2. Provide the following information about all your children (sons and daughters) listed in Number 1., regardless of age. To list any additional children, use additional sheets of paper.

A. Child 1  
Current Legal Name  
Family Name (Last Name)  Given Name (First Name)  Middle Name (if applicable)

If child is a

A-Number (if any) y A- 

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 Date of Birth (mm/dd/yyyy)  Country of Birth  Country name as it was when child was born.

**Part 11. Information About Your Children (continued)**

A-

**Current Address**

**Street Number and Name**

Ex: ÒChild residing with me; Ó Child deceased; Ó child missing; Ó Òunknc

Apt.  Ste.  Flr.  Number

**City or Town**

**County**

**State**

**ZIP Code + 4**

-

**Province or Region  
(foreign address only)**

**Postal Code  
(foreign address only)**

**Country  
(foreign address only)**

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

Must be completed

**B. Child 2**

**Current Legal Name**

**Family Name (Last Name)**

**Given Name (First Name)**

**Middle Name (if applicable)**

**A-Number (if any)**

y A-

**Date of Birth (mm/dd/yyyy)**

**Country of Birth**

**Current Address**

**Street Number and Name**

Apt.  Ste.  Flr.  Number

**City or Town**

**County**

**State**

**ZIP Code + 4**

-

**Province or Region  
(foreign address only)**

**Postal Code  
(foreign address only)**

**Country  
(foreign address only)**

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

**C. Child 3**

**Current Legal Name**

**Family Name (Last Name)**

**Given Name (First Name)**

**Middle Name (if applicable)**

**A-Number (if any)**

y A-

**Date of Birth (mm/dd/yyyy)**

**Country of Birth**

**Part 11. Information About Your Children (continued)**

A-

Current Address

Street Number and Name

Apt. Ste. Flr. Number

   

City or Town

County

State

ZIP Code + 4

 - 

Province or Region  
(foreign address only)

Postal Code  
(foreign address only)

Country  
(foreign address only)

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

**D. Child 4**

Current Legal Name

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

A-Number (if any)

Date of Birth (mm/dd/yyyy) Country of Birth

y A-

Current Address

Street Number and Name

Apt. Ste. Flr. Number

   

City or Town

County

State

ZIP Code + 4

 - 

Province or Region  
(foreign address only)

Postal Code  
(foreign address only)

Country  
(foreign address only)

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

**Part 12. Additional Information About You (Person Applying for Naturalization)**

Answer Item Numbers 1. - 21. If you answer "Yes" to any of these questions, include a typed or printed explanation on additional sheets of paper.

1. Have you EVER claimed to be a U.S. citizen (in writing or any other way)?  Yes  No
2. Have you EVER registered to vote in any Federal, state, or local election in the United States?  Yes  No
3. Have you EVER voted in any Federal, state, or local election in the United States?  Yes  No
4. A. Do you now have, or did you EVER have, a hereditary title or an order of nobility in any foreign country?  Yes  No
- B. If you answered "Yes," are you willing to give up any inherited titles or orders of nobility that you have in a foreign country at your naturalization ceremony?  Yes  No
5. Have you EVER been declared legally incompetent or been confined to a mental institution?  Yes  No

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

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Flag for quality control if the answer to

6. Do you owe any overdue Federal, state, or local taxes?  Yes  No  
Answer "Yes" even if tax return was not required, then make a note for quality control.
7. A. Have you EVER not filed a Federal, state, or local tax return since you became a lawful permanent resident?  Yes  No
- B. If you answered "Yes," did you consider yourself to be a "non-U.S. resident"?  Yes  No
8. Have you called yourself a "non-U.S. resident" on a Federal, state, or local tax return since you became a lawful permanent resident?  Yes  No
9. A. Have you EVER been a member of, involved in, or in any way associated with, any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world?  Yes  No
- B. If you answered "Yes," provide the information below. If you need extra space, attach the names of the other groups on additional sheets of paper and provide any evidence to support your answers.

Name of the Group	Purpose of the Group	Dates of Membership	
		From (mm/dd/yyyy)	To (mm/dd/yyyy)
Includes church groups, parent teacher organizations, etc.			

10. Have you EVER been a member of, or in any way associated (either directly or indirectly) with:
- A. The Communist Party?  Yes  No
- B. Any other totalitarian party?  Yes  No
- C. A terrorist organization?  Yes  No
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 occupied by, allied with, or 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 police unit, government agency or office, extermination camp, concentration camp, prisoner of war camp, prison, labor camp, or transit camp?  Yes  No

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

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14. Were you **EVER** involved in any way with any of the following If applicant was the victim answer  $\hat{O}$ No.  $\hat{O}$
- 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
16. Were you **EVER** a worker, volunteer, or soldier, or did you **EVER** serve in any of the following:
- A. Prison or jail?  Yes  No
  - B. Prison camp?  Yes  No
  - C. Detention facility (a place where people are forced to stay)?  Yes  No
  - D. 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 **EVER** a part of any group, or did you **EVER** help any group, unit, or organization that used a  Yes  No weapon against any person, or threatened to do so?
- A. If you answered "Yes," when you were part of this group, or when you helped this group, did you  ever Yes  No use a weapon against another person?
  - B. If you answered "Yes," when you were part of this group, or when you helped this group, did you  ever Yes  No tell another person that you would use a weapon against that person?
18. Did you **EVER** sell, give, or provide weapons to any person, or help another person sell, give, or provide  Yes  No weapons to any person?
- A. If you answered "Yes," did you know that this person was going to use the weapons against another  Yes  No person?
  - B. If you answered "Yes," did you know that this person was going to sell or give the weapons to  Yes  No someone who was going to use them against another person?

Pay special a

Cross-reference a

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

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- 19. Did you EVER 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 EVER recruit (ask), enlist (sign up), conscript (require), or use any person under 15 years of age to serve in or help an armed force or group?  Yes  No
- 21. Did you EVER use any person under 15 years of age to do anything that helped or supported people in combat?  Yes  No

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 someone, 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.

- 22. Have you EVER committed, assisted in committing, or attempted to commit, a crime or offense for which you were NOT arrested?  Yes  No  
Includes moving violations, but not parking tickets.
- 23. Have you EVER been arrested, cited, or detained by any law enforcement officer (including any immigration official or any official of 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 (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)?  Yes  No
- 27. A. Have you EVER received a suspended sentence, been placed on probation, or been paroled?  Yes  No  
B. If you answered "Yes," have you completed the probation or parole?  Yes  No
- 28. A. Have you EVER been in jail or prison?  Yes  No  
B. If you answered "Yes," how long were you in jail or prison? Years  Months  Days
- 29. If you answered "No" to ALL questions in Item Numbers 23.- 28., then skip this item and go to Item Number 30.

If you answered "Yes" to any question in Item Numbers 23. - 28., then complete this table. If you need extra space, use additional sheets of paper and provide any evidence to support your answers.

Why were you arrested, cited, detained, or charged?	Date arrested, cited, detained, or charged. (mm/dd/yyyy)	Where were you arrested, cited, detained, or charged? (City or Town, State, Country)	Outcome or disposition of the arrest, citation, detention, or charge (no charges filed, charges dismissed, jail, probation, etc.)

DO NOT FILE

Look at applic

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

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

30. Have you EVER:
- 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
  - F. Helped anyone to enter, or try to enter, the United States illegally?  Yes  No Applies even for family members.
  - G. Gambled illegally or received income from illegal gambling?  Yes  No
  - H. Failed to support your dependents or to pay alimony?  Yes  No
  - I. Made any misrepresentation to obtain any public benefit in the United States?  Yes  No
31. Have you EVER given any U.S. Government official any information or documentation that was false, fraudulent, or misleading?  Yes  No Includes false information on green card, visa, and asylum applications.
32. Have you EVER lied to any U.S. Government officials 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 EVER served in the U.S. armed forces?  Yes  No
38. A. Are you currently a member of the U.S. armed forces?  Yes  No
- B. If you answered "Yes," are you scheduled to deploy overseas, including to a vessel, within the next three months? (Refer to the Address Changes section in the Instructions on how to notify USCIS if you learn of your deployment plans after you file your Form N-400.)  Yes  No
- C. If you answered "Yes," are you currently stationed overseas?  Yes  No
39. Have you EVER been court-martialed, administratively separated, or disciplined, or have you received other than honorable discharge, while in the U.S. armed forces?  Yes  No
40. Have you EVER been discharged from training or service in the U.S. armed forces because you were an alien?  Yes  No
41. Have you EVER left the United States to avoid being drafted in the U.S. armed forces?  Yes  No
42. Have you EVER applied for any kind of exemption from military service in the U.S. armed forces?  Yes  No
43. Have you EVER deserted from the U.S. armed forces?  Yes  No







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

A-

***Interpreter's Contact Information***

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

***Interpreter's Certification***

I certify, under penalty of perjury, that:

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

***Interpreter's Signature***

7. Interpreter's Signature  Date of Signature (mm/dd/yyyy)

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

Provide the following information about the preparer.

If you are NOT an attorney/DOJ representative, complete the Preparer Section, and check Box 7A below. If you ARE an attorney/DOJ representative, and you feel comfortable doing so, complete the Preparer Section, and check Box 7B below.

***Preparer's Full Name***

1. Preparer's Family Name (Last Name)  Preparer's Given Name (First Name)
2. Preparer's Business or Organization Name (if any)

***Preparer's Mailing Address***

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



