

## **Application for Naturalization**

## **Department of Homeland Security**

**USCIS** Form N-400 OMB No. 1615-0052 Expires 09/30/2022

U.S. Citizenship and Immigration Services

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Rem	arks						
other	wise	indica	ted. Failure to a	rint in black ink. Type or nswer all of the questions r must complete Parts 1	nay delay U.S. Citizenshi		the answer is none, unless n Services (USCIS) processing
birtho www	day, y .uscis	ou m s.gov	ay already be a Uformater a Uformater a least section of the secti	ve mother or father is a U.S. L.S. citizen. Before you contion on this topic and to re Application for Citizenship	nsider filing this applicatiview the instructions for l	on, please visit th Form N-600, App	e USCIS Website at lication for Certificate of
				nts a United States citizen? on. If you answer "No," the			6. Information About Your nic Information.
		-					Add 0 in front if not
Par	t 1.	Info	rmation Abo	out Your Eligibility (S	elect only one box or	your Ente	er Your 9 Digit A-Number:
1			may be delay	• • •	· .	<b>▶</b> A	7-
1.	You	are a	t least 18 years o	fage and:			
sure	A.		-	vful permanent resident of t	he United States for at lea	ast 5 years.	Refer to dates on memo
one s ked!	В.	<b>✓</b>	and living with		se for the last 3 years, and		dition, you have been married to been a U.S. citizen for the last
attach of age roof ouse's nship.	C.		spouse is regula 319(b).) If your	rly engaged in specified en	nployment abroad. (See to ide the United States and	he Immigration a you are filing und	. citizen and your U.S. citizen nd Nationality Act (INA) section ler Section 319(b), select the tion interview:
	D.		Are applying or	the basis of qualifying mi	litary service.		
	E.		Other (Explain)				
	٠.	<u></u>	( 1)				
Pa	rt 2.	Info	ormation Abo	out You (Person apply			
1.	You	ır Cur	rent Legal Name	(do not provide a nicknam	birth certificate.		pe different from name on green card
	Fan	ily N	ame (Last Name	)	Given Name (First Nam	e)	Middle Name (if applicable)
2.	You	ır Nar	ne Exactly As It	Appears on Your Permane	nt Resident Card (if appli	cable)	
	Farr	nilv N	ame (Last Name	)	Given Name (First Nam	e)	Middle Name (if applicable)
		, - \	(	,			

	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)
4.	Name Change (Optional)  Read the Form N-400 Instru	actions before you de	ecide whether or not you would like	to legally change your name.
	Would you like to legally char	nge your name?	you would like to use in the spaces pro	Check one → Yes N
	•	print the new name		
	Family Name (Last Name)		Given Name (First Name)	Middle Name (if applicable)
_	New Name		New Name	New Name
5. o SSN, e "N/A"	U.S. Social Security Number (	(if applicable) 6.	USCIS Online Account Number (if a	any)
7.	Gender 8.  Male Female	Date of Birth (mm/dd/yyyy)	9. Date You Becar Permanent Resi	me a Lawful ident (mm/dd/yyyy)  Located on permanent resident card.
10.	Country of Birth Name when	applicant was born	11. Country of Citizenship or N	
12.	demonstrating your knowledg		or mental impairment that prevents y of the English language and/or civics r	
	for naturalization?			requirements  Flag for quality control.
		it a completed <u>Form l</u>	N-648, Medical Certification for Disab	Flag for quality control.
13.	If you answered "Yes," submi	•		Flag for quality control.
and exempt	If you answered "Yes," submit Form N-400.  Exemptions from the English  A. Are you 50 years of age of	Language Test or older and have you		Flag for quality control.
and exempt nglish ment	<ul> <li>If you answered "Yes," submit Form N-400.</li> <li>Exemptions from the English</li> <li>A. Are you 50 years of age or resident for periods totaling</li> <li>B. Are you 55 years of age or age of age or age or age.</li> </ul>	Language Test or older and have you ng at least 20 years a or older and have you	N-648, Medical Certification for Disab	Flag for quality control.  Solity Exceptions, when you file your  permanent Yes 1
and exempt nglish	<ul> <li>If you answered "Yes," submit Form N-400.</li> <li>Exemptions from the English</li> <li>A. Are you 50 years of age or resident for periods totali</li> <li>B. Are you 55 years of age or resident for periods totali</li> <li>C. Are you 65 years of age or resident for periods totali</li> </ul>	Language Test or older and have you ng at least 20 years a or older and have you ng at least 15 years a or older and have you ng at least 20 years a	N-648, Medical Certification for Disab I lived in the United States as a lawful It the time you file your Form N-400?	Flag for quality control.  Flag for quality control.  Permanent Yes Management Ye
exempt exempt number of the second se	<ul> <li>If you answered "Yes," submit Form N-400.</li> <li>Exemptions from the English</li> <li>A. Are you 50 years of age or resident for periods totali</li> <li>B. Are you 55 years of age or resident for periods totali</li> <li>C. Are you 65 years of age or resident for periods totali this requirement, you will</li> </ul>	Language Test or older and have you ng at least 20 years a or older and have you ng at least 15 years a or older and have you ng at least 20 years a I also be given a simp	N-648, Medical Certification for Disable I lived in the United States as a lawful to the time you file your Form N-400? I lived in the United States as a lawful to the time you file your Form N-400? I lived in the United States as a lawful to the time you file your Form N-400?	Flag for quality control.  Yes
exempt next next next next next next next nex	If you answered "Yes," submit Form N-400.  Exemptions from the English  A. Are you 50 years of age or resident for periods totali  B. Are you 55 years of age or resident for periods totali  C. Are you 65 years of age or resident for periods totali this requirement, you will  rt 3. Accommodations for	Language Test or older and have you ng at least 20 years a or older and have you ng at least 15 years a or older and have you ng at least 20 years a l also be given a simp	N-648, Medical Certification for Disable of lived in the United States as a lawful to the time you file your Form N-400? I lived in the United States as a lawful to the time you file your Form N-400? I lived in the United States as a lawful to the time you file your Form N-400? Diffied version of the civics test.)	Flag for quality control.  Yes  Permanent  Permanent  Yes  Permanent  (If you meet
exempt next next next next next next next nex	<ul> <li>If you answered "Yes," submit Form N-400.</li> <li>Exemptions from the English</li> <li>A. Are you 50 years of age or resident for periods totaling</li> <li>B. Are you 55 years of age or resident for periods totaling</li> <li>C. Are you 65 years of age or resident for periods totaling this requirement, you will</li> <li>rt 3. Accommodations for the periods in the periods totaling the period totaling the periods tota</li></ul>	Language Test or older and have you ng at least 20 years a or older and have you ng at least 15 years a or older and have you ng at least 20 years a l also be given a simp or Individuals W e Form N-400 Instruc	N-648, Medical Certification for Disable of lived in the United States as a lawful to the time you file your Form N-400? In lived in the United States as a lawful to the time you file your Form N-400? In lived in the United States as a lawful to the time you file your Form N-400? Diffied version of the civics test.)	Flag for quality control.  Yes  Permanent  Permanent  Yes  Permanent  (If you meet
and exempt nglish ment exempt nament nplified est.	<ul> <li>If you answered "Yes," submit Form N-400.</li> <li>Exemptions from the English</li> <li>A. Are you 50 years of age or resident for periods totaling</li> <li>B. Are you 55 years of age or resident for periods totaling</li> <li>C. Are you 65 years of age or resident for periods totaling this requirement, you will</li> <li>rt 3. Accommodations for the periods in the periods totaling the period totaling the periods tota</li></ul>	Language Test or older and have you ng at least 20 years a or older and have you ng at least 15 years a or older and have you ng at least 20 years a l also be given a simp or Individuals W e Form N-400 Instru- modation because of	N-648, Medical Certification for Disable of lived in the United States as a lawful to the time you file your Form N-400? In lived in the United States as a lawful to the time you file your Form N-400? In lived in the United States as a lawful to the time you file your Form N-400? Disabilities and/or Impairations before completing this part.	Flag for quality control.  Flag for quality control.  Flag for quality control.  Flag for quality control.
and exempt nglish ment exempt nament nplified est.	If you answered "Yes," submit Form N-400.  Exemptions from the English  A. Are you 50 years of age or resident for periods totali  B. Are you 55 years of age or resident for periods totali  C. Are you 65 years of age or resident for periods totalithis requirement, you will  rt 3. Accommodations for the Are you requesting an accommodation of the Are you answered "Yes," selection.  I am deaf or hard o	Language Test or older and have you ng at least 20 years a or older and have you ng at least 15 years a or older and have you ng at least 20 years a l also be given a simp or Individuals W e Form N-400 Instru- modation because of any applicable box. f hearing and request	N-648, Medical Certification for Disable of lived in the United States as a lawful to the time you file your Form N-400? In lived in the United States as a lawful to the time you file your Form N-400? In lived in the United States as a lawful to the time you file your Form N-400? Disabilities and/or Impairations before completing this part.	Flag for quality control.  Flag for quality control.  Permanent Yes 1  Per

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		s (continued)	1. 1.1., 1/			1	1 1 1		•• .	1	C
(		have another type of disability and/or impair	•	•				nair). (De	escribe t	the nature	of you
L		rmation to Contac	t You								
1. I	Daytime To	elephone Number			2.	Work T	elephone Num	iber (if an	y)		
2 1	Cronina T	alambana Niyeshan			4	Mobile	Tolombono Nie	mbar (if a			
3. E	Evening 16	elephone Number			4.	Mobile	Telephone Nu	moer (11 a	iny)		
5. E	Email Add	ress (if any)				<u>L</u>				••	
		<b>,</b>									
L											
Part	5. Info	rmation About Yo	ur Residen	ce							
1. \	Where hav	e you lived during the	last five years?	Provide vo	our m	ost recent	residence and	then list	every lo	cation w	here voi
		during the last five year	•	•					every 10	Cation w	nore you
<b>⊿</b> F	A. Currer	nt Physical Address									
al addres	Ctwoot										
		Number and Name							Apt.	Ste. Fla	r. Num
mailing		Number and Name							Apt.	Ste. Fla	r. Num
mailing		r Town		County				State	Apt.		r. Num
mailing					/ to list in	binder		State	Apt.		
mailing	City of Provin	r Town		Refer to	to list in		Country (foreign ad				
mailing	City of Provin	r Town		Refer to	to list in		Country (foreign add				
t mailing s.	City o	r Town  ace or Region gn address only)	(fo	Refer to	ss only		•				
mailing	City of Provin	r Town  ace or Region gn address only)  of From (mm/dd/y	yyyy) To	Refer to	ss only		•				
t mailing	City of Proving (foreign Dates Reside	r Town  ace or Region gn address only)  of From (mm/dd/yence	(fo	Refer to stal Code oreign address (mm/dd/yyy	ss only	y)	•				
t mailing s.	City of Provin (foreig  Dates Reside  B. Currer	r Town  ace or Region gn address only)  of From (mm/dd/y	(fo	Refer to stal Code oreign address (mm/dd/yyy	ss only	y)	•				
t mailing s.	City of Provin (foreig  Dates Reside  B. Currer In Car	r Town  ace or Region gn address only)  of From (mm/dd/y ence	(fo	Refer to stal Code oreign address (mm/dd/yyy	ss only	y)	•				
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applicanceeive mar	City or Proving (foreign)  Dates Resident  B. Current In Cartail I	r Town  ace or Region gn address only)  of From (mm/dd/y ence  nt Mailing Address (if one Of Name (if any)	(fo	Refer to stal Code oreign address (mm/dd/yyy	ss only	y)	•		) ()	ZIP C	ode + 4
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t mailing s.	City o  Provin (foreig  Dates Reside  B. Currer  In Car  ail ne.  Street  City o  Provin	r Town  ace or Region gn address only)  of From (mm/dd/y ence  at Mailing Address (if of the Of Name (if any)  Number and Name	(fo	Refer to stal Code oreign address (mm/dd/yy) cesent the address	ss only  yyy)  above	y) )	•	dress only  State	Apt.	ZIP C	r. Num

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Part :	5. Informati	on About Your Res	sidence (continued)	<b>A</b> -	
	. Physical Add				
	Street Number				Apt. Ste. Flr. Number
	City or Town		County	State	ZIP Code + 4
					-
	Province or R (foreign addr		Postal Code (foreign address only)	Country (foreign address onl	ly)
	Dates of Residence	From (mm/dd/yyyy)	To (mm/dd/yyyy)		
D	. Physical Add	lress 3			
	Street Number	er and Name			Apt. Ste. Flr. Number
	City or Town	1	County	State	ZIP Code + 4
					-
	Province or F (foreign addr		Postal Code (foreign address only)	Country (foreign address onl	1 <sub>12</sub> )
	(10reign addi	ess omy)	(foreign address only)	(foreign address on	19)
	Dates of Residence	From (mm/dd/yyyy)	To (mm/dd/yyyy)		
E	. Physical Add	lress 4			
	Street Number	er and Name			Apt. Ste. Flr. Number
	City or Town	1	County	State	ZIP Code + 4
	Province or F	_	Postal Code (foreign address only)	Country (foreign address on	ly)
	D	From (mm/dd/yyyy)			
	Dates of Residence	Trom (mm/dd/yyyy)	To (min da yyyy)		
				1	
Part	6. Informati	on About Your Pa	rents		
If neith	er one of your	parents is a United Sta	ites citizen, then skip this part	and go to Part 7.	
1. V	Vere your parent	s married before your 1	8th birthday?		Yes No
Infor	mation Abou	t Your Mother	If either parent US citizen, flag		
2. Is	s your mother a	U.S. citizen?	for quality contr		☐ Yes ☐ No
I	f you answered "	'Yes," complete the foll	owing information. If you answ	ered "No," go to Item N	Number 3.

I di t o	Information About Your Parents (continued)	A-
A.	Current Legal Name of U.S. Citizen Mother	
ete if	Family Name (Last Name) Given Name (First Name)	Middle Name (if applicable)
ris a ▶B.	Mother's Country of Birth  C. Mother's Date of Birth (mm	 n/dd/yyyy) 
D.	Date Mother Became a U.S. Citizen E. Mother's A-Number (if known) (mm/dd/yyyy) (if any)	
	► A-	
Inforn	ation About Your Father	
3. Is y	our father a U.S. citizen?	Yes N
Ify	ou answered "Yes," complete the information below. If you answered "No," go to Par	t 7.
A.	Current Legal Name of U.S. Citizen Father	
ete	Family Name (Last Name) Given Name (First Name)	Middle Name (if applicable)
r SC	Estheda Courter of Pisth	(44/)
→B.	Father's Country of Birth  C. Father's Date of Birth (mm	/dd/yyyy)
D.	Date Father Became a U.S. Citizen (if known) (mm/dd/yyyy)  E. Father's A-Number (if any)  A-	
L	Biographic Information	
	USCIS requires you to complete the categories below to conduct background checks. (rmation.)	(See the Form N-400 Instructions for
	nicity (Select only one box)  Hispanic or Latino  Not Hispanic or Latino	
2. Ra		Hawaiian or Pacific Islander
3. He	ght Feet Inches 4. Weight Pounds	
5. Ey	e color (Select only one box)  Black Blue Brown Gray Green Hazel Maroon	n Pink Unknown/
6. Ha	r color (Select <b>only one</b> box)  Bald Black Blond Brown Gray Red Sand (No hair)	

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Par	t 8. Information Abou	t Your Employment and	Schools You	Attended	A-	PROTEIN AND COMMON	andaryk processor	
perio empl unem	<ul> <li>d. Include all military, police, oyment, studies, or unemployn ployed, or have studied for the</li> </ul>	nded school full time or part time and/or intelligence service. Beg ment (if applicable). Provide the e last five years. If you worked need extra space, use additional	gin by providing in e locations and dat for yourself, type	nformation abo es where you v	ut your : vorked,	most rece were self- l." If you	nt or curr employed	ent d, were mployed,
1.	Employer or School Name	Most recent first. If retired or unemplo	oyed, put that here, the	n put most recent jo	ob in #2 if		disqualify	
Include Adult ED, ESOL, Trainings, &	Street Number and Name					Apt. St	e. Flr.	Number
Several/ Part time Employment.	City or Town				State		ZIP Cod	le + 4
	Province or Region (foreign address only)	Postal Code (foreign address o	only)	Country (foreign addre	ess only	)		
Dates can be approximate.	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy)	Your Occupation					
2.	Employer or School Name							
	Street Number and Name					Apt. St	e. Flr.	Number
	City or Town				State		ZIP Cod	le + 4
	Province or Region (foreign address only)	Postal Code (foreign address of	only)	Country (foreign addre	ess only	·)		
	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy)	Your Occupation	1				
3.	Employer or School Name							
	Street Number and Name					Apt. Si	te. Flr.	Number
	City or Town				State		ZIP Coo	de + 4
	Province or Region (foreign address only)	Postal Code (foreign address	only)	Country (foreign addr	ess only	?)		
	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy)	Your Occupation	1				

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1.	How many total days	(24 hours or longer)	did vou spend outside th	e United States during the	last 5 years?	days
	•	,	•	· ·	•	
2.	• •	_		nited States during the last	•	trips
3.				tside the United States dur use additional sheets of pa		ars. Start with
	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
			Yes No			
	7		☐ Yes ☐ No			
t a est			☐ Yes ☐ No			
n be			☐ Yes ☐ No			
ate.			☐ Yes ☐ No			
			☐ Yes ☐ No			1
1.	What is your current i	rried Married	Divorced Wide	for quality control if using three	7 - 1 - 1	
1. 2.	Single, Never Man	rried  Married  have <b>never</b> married, go	Divorced Wide	owed Separated		
	Single, Never Mar If you are single and I If you are married, is	rried Married have never married, go your spouse a current ne you been married (inc	Divorced Wide to Part 11.	owed Separated	] Marriage Ann	ulled
2.	Single, Never Man If you are single and I If you are married, is How many times have marriages to the same If you are married no	have never married, go your spouse a current ne you been married (ince person)?	Divorced Wide to Part 11.	Separated	Marriage Ann	ulled
2. 3.	Single, Never Man If you are single and I If you are married, is How many times have marriages to the same	have never married, go your spouse a current n e you been married (ince person)? w, provide the followin Legal Name	Divorced Wide to Part 11.  member of the U.S. armoduding annulled marria	Separated	Marriage Ann	ulled  Yes No
2. 3.	Single, Never Man If you are single and I If you are married, is How many times have marriages to the same If you are married no A. Current Spouse's	have never married, go your spouse a current n e you been married (ince person)? w, provide the followin Legal Name	Divorced Wide to Part 11.  member of the U.S. armoduling annulled marriages information about you	Separated	Marriage Ann	Yes No
2. 3.	Single, Never Man If you are single and I If you are married, is How many times have marriages to the same If you are married not A. Current Spouse's Family Name (La	have never married, go your spouse a current n e you been married (ince person)? w, provide the followin Legal Name	Divorced Wide to Part 11.  member of the U.S. armoduling annulled marriages information about you	Separated	Marriage Ann	Yes No
2. 3.	Single, Never Man If you are single and I If you are married, is How many times have marriages to the same If you are married not A. Current Spouse's Family Name (La	have never married, go your spouse a current n e you been married (ince e person)? w, provide the followin Legal Name ast Name)	Divorced Wide to Part 11.  member of the U.S. armoduling annulled marriages information about you	Separated [ ed forces? ges, marriages to other peour current spouse.  First Name)	Marriage Ann	Yes No
2. 3.	If you are single and I If you are married, is How many times have marriages to the same If you are married not A. Current Spouse's Family Name (La	have never married, go your spouse a current n e you been married (ince e person)? w, provide the followin Legal Name ast Name)	Divorced Wide to Part 11.  member of the U.S. armoduding annulled marriage information about you Given Name (	Separated [ ed forces? ges, marriages to other peour current spouse.  First Name)	Marriage Ann	Yes No
2. 3.	If you are single and I If you are married, is How many times have marriages to the same If you are married not A. Current Spouse's Family Name (La  B. Current Spouse's Family Name (La	have never married, go your spouse a current n e you been married (ince person)? w, provide the followin Legal Name ast Name)  Previous Legal Name ast Name)	Divorced Wide to Part 11.  member of the U.S. armoduling annulled marria ag information about you  Given Name (	Separated [ ed forces? ges, marriages to other peour current spouse.  First Name)	Marriage Ann ple, and  Middle Name  Middle Name	Yes No
2. 3.	If you are single and I If you are married, is How many times have marriages to the same If you are married not A. Current Spouse's Family Name (La  B. Current Spouse's Family Name (La	have never married, go your spouse a current n e you been married (ince person)? w, provide the followin Legal Name ast Name)  Previous Legal Name ast Name)	Divorced Wide to Part 11.  member of the U.S. armoduling annulled marria ag information about you  Given Name (	Separated [  ed forces?  ges, marriages to other peo  ur current spouse.  First Name)  First Name)	Marriage Ann pple, and  Middle Name  Middle Name	Yes No

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F.	Current Spouse's Present Home Addr	ress			
	Street Number and Name			Apt.	Ste. Flr. Number
	"Same as applicant"				
	City or Town	County	St	ate	ZIP Code + 4
					-
	Province or Region	Postal Code	Country		
	(foreign address only)	(foreign address only)	(foreign addres	s only)	
G.	Current Spouse's Current Employer of	or Company			
				<del></del>	
Is	your current spouse a U.S. citizen?				Yes N
If	you answered "Yes," answer Item Nun	nber 6. If you answered "No," g	go to <b>Item Number</b>	7.	
If	your current spouse is a U.S. citizen, co	omplete the following information	on.		
A.	. When did your current spouse becom	ne a U.S. citizen?			
	At Birth - Go to Item Number 8		following informat	ion.	
В.	. Date Your Current Spouse Became				
	a U.S. Citizen (mm/dd/yyyy)		If spouse is	undocumented	d check
			"other" and v	write "non-LPF	R." If I-130 is
If	your current spouse is not a U.S. citizer	n, complete the following inform		te "adjustment	application
A.	. Current Spouse's Country of Citizens	ship or Nationality <b>B.</b> Curre	nt Spouse's A-Num	ber (if any)	
		▶ A	-		•
C.	Current Spouse's Immigration Status		<u> </u>		
	· -	Other (Explain):			
Н	ow many times has your current spouse	been married (including annull	ed marriages, marria	ages to	
ot	her people, and marriages to the same p	person)? If your current spouse	has been married be		
pr	rovide the following information about	your current spouse's prior spou	se.		If no other marriages,
If	your current spouse has had more than	one previous marriage, provide	that information on	additional sl	heets of paper.
A.	. Legal Name of My Current Spouse's	Prior Spouse			
	Family Name (Last Name)	Given Name (First N	Jame)	Middle Na	me (if applicable)
В.	. Immigration Status of My Current Sp	pouse's Prior Spouse (if known)			
	U.S. Citizen Lawful Perm	anent Resident   Other (E	xplain):		
	. Date of Birth of My Current Spouse'	s <b>D.</b> Country of Birth of My	Current Spouse's		
C.	•	Prior Spouse	•		
C.	Prior Spouse (mm/dd/yyyy)	1			
C.	Prior Spouse (mm/dd/yyyy)				

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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)
	Н.	How My Current Spouse's Marriage Ended with Prior Spouse  Annulled Divorced Spouse Deceased Other (Explain):
9.		you were married before, provide the following information about your prior spouse. If you have more than one previous rriage, 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)
	В.	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)
	××	
	н.	How Marriage Ended with My Prior Spouse
		LAnnilled   Divorced   I Spoilse Deceased   Other (Explain):
		Annulled Divorced Spouse Deceased Other (Explain):
Pa	art 1	
L		1. Information About Your Children
L	Inc mi:	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or
Pa	Inc mis old	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current
1.	Inc mis old ste	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current epchildren; legally adopted children; and children born when you were not married.)
1.	Incomis old ste	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current epchildren; legally adopted children; and children born when you were not married.)
L	Incomis old stee	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current pechildren; legally adopted children; and children born when you were not married.)  Evide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. I list any additional children, use additional sheets of paper.
1.	Incomis old stee	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current spechildren; legally adopted children; and children born when you were not married.)  Evide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. Item and additional children, use additional sheets of paper.  Child 1
1.	Incomis old stee	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current epchildren; legally adopted children; and children born when you were not married.)  Devide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. It is any additional children, use additional sheets of paper.  Child 1  Current Legal Name
1.	Incomis old stee	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current epchildren; legally adopted children; and children born when you were not married.)  Devide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. It is any additional children, use additional sheets of paper.  Child 1  Current Legal Name
1.	Incomis old stee	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or ler; children who are currently married or unmarried; children living with you or elsewhere; current pechildren; legally adopted children; and children born when you were not married.)  Evide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. I list any additional children, use additional sheets of paper.  Child 1  Current Legal Name  Family Name (Last Name)  Given Name (First Name)  Middle Name (if applicable)
1.	Incomis old stee	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or der; children who are currently married or unmarried; children living with you or elsewhere; current epchildren; legally adopted children; and children born when you were not married.)  Devide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. It is any additional children, use additional sheets of paper.  Child 1  Current Legal Name
2.	Incomis old stee	1. Information About Your Children  dicate your total number of children. (You must indicate ALL children, including: children who are alive, ssing, or deceased; children born in the United States or in other countries; children under 18 years of age or ler; children who are currently married or unmarried; children living with you or elsewhere; current pechildren; legally adopted children; and children born when you were not married.)  ovide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. list any additional children, use additional sheets of paper.  Child 1  Current Legal Name  Family Name (Last Name) Given Name (First Name) Middle Name (if applicab A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth

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	Current Address		
	Street Number and Name		Apt. Ste. Flr. Number
	Ex: "Child residing with me;" "child deceased;		
	City or Town	County	State ZIP Code + 4
	$\boldsymbol{\mathcal{E}}$	Ostal Code foreign address only)	Country (foreign address only)
	What is your child's relationship to you? (stepchild, legally adopted child)	(for example, biological child,	Must be completed
В.	Child 2 Current Legal Name		
	Family Name (Last Name)	Given Name (First Na	mme) Middle Name (if applicable)
	A-Number (if any)  ▶ 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
		Postal Code foreign address only)	Country (foreign address only)
	What is your child's relationship to you? (stepchild, legally adopted child)	(for example, biological child,	
C.	Child 3		
	Current Legal Name		
	Family Name (Last Name)	Given Name (First Na	mme) Middle Name (if applicable)
		1 1	
	A-Number (if any)	l LDate of Birth (mm/dd/yyyy)	

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Part	11	. Information About You	ur Children (continued)		<b>A-</b>		
		Current Address					
		Street Number and Name			A	pt. Ste.	Flr. Number
		City or Town	County		State	Z	ZIP Code + 4
		Province or Region (foreign address only)	Postal Code (foreign address only)	Cour	ntry eign address only)		
		What is your child's relationship stepchild, legally adopted child)	to you? (for example, biological child)				
-	— D.	Child 4					
		Current Legal Name					
		Family Name (Last Name)	Given Name (First N	lame)	Mide	dle Nam	e (if applicable)
		A-Number (if any)	Date of Birth (mm/dd/yyyy	v) Cou	ntry of Birth		
		► A-					
		Current Address				,	
		Street Number and Name			A	Apt. Ste	. Flr. Number
		City or Town	County		State	2	ZIP Code + 4
							-
		Province or Region	Postal Code	Cou	ntry		
		(foreign address only)	(foreign address only)	(for	eign address only)		
		What is your child's relationship stepchild, legally adopted child)	p to you? (for example, biological child)	d,			
Par	t 12	2. Additional Information	n About You (Person Applying	for Na	turalization)		
		•	swer "Yes" to any of these questions, i	nclude	a typed or printed ex	xplanatio	on on additional
		paper. ve you <b>EVER</b> claimed to be a U.	.S. citizen (in writing or any other way	)?	Flag for quality contr the answer to any of questions is "Yes."		Yes No
2.	Hav	ve you EVER registered to vote i	in any Federal, state, or local election	in the U	nited States?		Yes No
3.	Hav	ve you EVER voted in any Feder	eral, state, or local election in the United	d States	?		Yes No
4.	A.	Do you now have, or did you E country?	EVER have, a hereditary title or an order	er of no	bility in any foreign	ı	Yes No
	В.	If you answered "Yes," are you have in a foreign country at you	willing to give up any inherited titles ur naturalization ceremony?	or ordei	rs of nobility that yo	ou	Yes No
5.	Hav	ve you EVER been declared lega	ally incompetent or been confined to a	mental	institution?		Yes No

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		2. Additional Information About Yo	u (Person Applying for	A-	All Advances and the second sec
Na	tura	ization) (continued)			ality control if the answerse questions is "Yes
6.	Do	you owe any overdue Federal, state, or local ta	Answer "yes" even if tax return was not required then make a note for quality control.		Yes No
7.	A.	Have you <b>EVER</b> not filed a Federal, state, or resident?		rmanent	Yes No
	В.	If you answered "Yes," did you consider your	rself to be a "non-U.S. resident"?	Γ	Yes No
8.		ve you called yourself a "non-U.S. resident" on ful permanent resident?	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 association, fund, foundation, party, club, socilocation in the world?	I in, or in any way associated with, any organi iety, or similar group in the United States or i		Yes No
	В.	If you answered "Yes," provide the informatic additional sheets of paper and provide any ev		names of the oth	ner groups on
		Name	Purpose	Dates of N	<b>Aembership</b>
		of the	of the	From	To
		Group	Group	(mm/dd/yyyy)	(mm/dd/yyyy)
		Includes church groups, parent teacher organizations, etc.			
10.	Ha	ve you EVER been a member of, or in any wa	y associated (either directly or indirectly) with	h:	
	A.	The Communist Party?		[	Yes No
	В.	Any other totalitarian party?		ſ	Yes No
	C.	A terrorist organization?		-	Yes No
11.		ve you EVER advocated (either directly or independence?	lirectly) the overthrow of any government by	force or [	Yes No
12.		ve you EVER persecuted (either directly or incigin, membership in a particular social group, o		national [	Yes No
13.		ween March 23, 1933 and May 8, 1945, did yo irectly) with:	ou work for or associate in any way (either dir	rectly or	
	A.	The Nazi government of Germany?		ļ	Yes No
	В.	Any government in any area occupied by, all government of Germany?	ied with, or established with the help of the N	lazi [	Yes No
	C.	Any German, Nazi, or S.S. military unit, para police unit, government agency or office, ext camp, prison, labor camp, or transit camp?	amilitary unit, self-defense unit, vigilante unit, ermination camp, concentration camp, prisono		Yes No

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1		2. Additional Information About You (Person Apply ization) (continued)	ing for	A-	
L			If applicant was the victim		ality control if the ny of these questions is "Ye
14. <mark>↑</mark>		re you EVER involved in any way with any of the following:	answer "No."		□ v □ v.
ecial		Genocide?			☐ Yes ☐ No
n for	_	Torture?			☐ Yes ☐ No
, and s.	C.	<i>5, 7</i>			☐ Yes ☐ No
<u> </u>	JD.	Badly hurting, or trying to hurt, a person on purpose?	1		☐ Yes ☐ No
	E.	Forcing, or trying to force, someone to have any kind of sexual c	ontact or relations?		☐ Yes ☐ No
ļ	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 o owing groups:	therwise participate in, an	y of the	
	A.	Military unit?			Yes No
	В.	Paramilitary unit (a group of people who act like a military group military)?	p but are not part of the o	fficial	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 po	lice)?	Yes No
	F.	Rebel group?	•		Yes No
	G.	Guerrilla group (a group of people who use weapons against or omilitary, police, government, or other people)?	otherwise physically attac	k the	Yes No
	Н.	Militia (an army of people, not part of the official military)?			Yes No
	I.	Insurgent organization (a group that uses weapons and fights aga	ninst a government)?		Yes No
6.	We	re you EVER a worker, volunteer, or soldier, or did you otherwis	e EVER serve in any of	the following:	
	A.	Prison or jail?			Yes No
	В.	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
7.		re you EVER a part of any group, or did you EVER help any groapon against any person, or threatened to do so?	oup, unit, or organization	that used a	Yes No
	A.	If you answered "Yes," when you were part of this group, or wh use a weapon against another person?	en you helped this group,	did you ever	Yes No
	B.	If you answered "Yes," when you were part of this group, or wh tell another person that you would use a weapon against that per		did you ever	Yes No
8.		I you EVER sell, give, or provide weapons to any person, or help apons to any person?	another person sell, give	, or provide	Yes No
e t's	A.	If you answered "Yes," did you know that this person was going person?	to use the weapons again	nst another	Yes No
l	В.	If you answered "Yes," did you know that this person was going someone who was going to use them against another person?	to sell or give the weapo	ons to	Yes No

ı	t 12. Additional Informati	on About You (Pe	rson Applying for		A-		
Nan	uralization) (continued)				Flag for	quality control if "yes.	
	Did you EVER receive any type but are not part of the official mil			vho act like a m	ilitary group	Yes 1	
	Did you <b>EVER</b> recruit (ask), enli to serve in or help an armed force		(require), or use any p	erson under 15	years of age	Yes 1	
	Did you EVER use any person use combat?	nder 15 years of age to	do anything that help	ed or supported	people in	Yes 1	
	y of Item Numbers 22 28. appl	y to you, <u>you must an</u>	swer "Yes" even if y	our records ha	ve been sealed	l, expunged, or	
	wise cleared. You must disclose		-			er, or attorney, tol	
you th	nat it no longer constitutes a recor-	d or told you that you o	do not have to disclose	the information	n. Flag fo	or quality control if "ye	
22.	Have you EVER committed, assi	sted in committing, or	attempted to commit,	a crime or offer	nse for which	Yes I	
	you were <b>NOT</b> arrested?	Includes moving vi	iolations, but not parking	tickets.			
	Have you <b>EVER</b> been arrested, <u>c</u> immigration official or any offici		<del>-</del>	icer (including	any	Yes 1	
25.	Have you <b>EVER</b> been convicted of a crime or offense?						
	Have you <b>EVER</b> been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)?						
27.	A. Have you EVER received a suspended sentence, been placed on probation, or been paroled?						
	B. If you answered "Yes," have	•	-			Yes T	
28.	A. Have you EVER been in jail or prison?						
	B. If you answered "Yes," how long were you in jail or prison? Years Months						
29.	If you answered "No" to ALL qu	estions in Item Numb	ers 23 28., then skip	this item and g	go to Item Nun	nber 30.	
	If you answered "Yes" to any question in <b>Item Numbers 23 28.</b> , then complete this table. If you need extra space, use additional sheets of paper and provide any evidence to support your answers.						
ant is	Why were you	Date arrested, cited,	Where wer			disposition of the	
tly on ion or	arrested, cited,	detained, or	arrested, cited, d			ion, detention, or	
	detained, or	charged.	<b>charged?</b> (City State, Cou			narges filed, charge ail, probation, etc.)	
	charged?	(mm/dd/yyyy)	State, Cou	nu y j	dishiissed, ja	an, probation, etc.,	
			*				

	rt 12. Additional Information About You (Person Applying for turalization) (continued)	
	wer Item Numbers 30 46. If you answer "Yes" to any of these questions, except Item Numbers 37. and 38 ed explanation on additional sheets of paper and provide any evidence to support your answers.	., include a typed or
30.	Have you EVER:	or 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
	<b>D.</b> 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?   Applies even for family members.	Yes No
	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 <b>EVER</b> given any U.S. Government officials <b>any</b> information or documentation that was false, fraudulent, or misleading? Includes false information on green card, visa, and asylum applications.	Yes No
32.	Have you <b>EVER</b> 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) <b>currently</b> 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>B.</b> If you answered "Yes," are you scheduled to deploy overseas, including to a vessel, within the next three months? (Refer to the <b>Address Change</b> 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 <b>EVER</b> been court-martialed, administratively separated, or disciplined, or have you received an other than honorable discharge, while in the U.S. armed forces?	Yes No
40.	Have you <b>EVER</b> 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

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i .		2. Additional Information ization) (continued)	on About You (Person Applying	for A-	
44.	Α.	•	he United States at any time between y n the United States as a lawful nonimn		Yes N
ation gov	В.	Date Registered	did you register for the Selective Service Selective Service Number	ce? Provide the information below	<i>N</i> .
	C.	If you answered "Yes," but yo	ou did not register with the Selective S	Service System and you are:	
		1. Still under 26 years of ag information above; <b>OR</b>	e, you must register before you apply for Register at sss.gov	or naturalization, and complete th	e Selective Service
		Selective Service, you mi	e (29 years of age if you are filing undoust attach a statement explaining why you service.  Use attached explanation letter.		
		tem Numbers 45 50. If you paper and provide any evidenc	answer "No" to any of these questions, e to support your answers.		nation on additional
45.	Do	you support the Constitution a	nd form of Government of the United S	Flag for quality control if "no"	Yes N
46.	Do	you understand the full Oath o	f Allegiance to the United States?		Yes N
47.	Are	you willing to take the full Oa	ath of Allegiance to the United States?		Yes N
48.	If t	ne law requires it, are you willi	ng to bear arms on behalf of the United	d States?	Yes N
49.	Ift	ne law requires it, are you willi	ng to perform noncombatant services i	n the U.S. armed forces?	Yes N
50.	If t	ne law requires it, are you willi	ng to perform work of national importa	ance under civilian direction?	Yes N
Pa	rt 1:	3. Applicant's Statemen	t, Certification, and Signature	USCIS will reject your Form N-400 if it is not signed	
NO	ге:	Read the <b>Penalties</b> section of t	he Form N-400 Instructions before con		
$Ap_{I}$	plic	ant's Statement			
NO	ГЕ:	Select the box for either Item A	A. or B. in Item Number 1. If applica	ble, select the box for Item Num	ber 2.
1.	Ap	plicant's Statement Regarding	the Interpreter		
	A.	I can read and understand and my answer to every	d English, and I have read and understa question.	and every question and instruction	on this application
	В.	The interpreter named in question in	Part 14. read to me every question and, a lar	d instruction on this application a nguage in which I am fluent, and I	
2.	Аp	plicant's Statement Regarding	the Preparer		
		At my request, the preparer n		ided or authorized.	,

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Pa	rt 13. Applicant's Statement, Certification, and Signature (continued)
$Ap_{I}$	plicant's Certification
requ	ies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may ire that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of records that USCIS may need to determine my eligibility for the immigration benefit that I seek.
	ther authorize release of information contained in this application, in supporting documents, and in my USCIS records to other ies and persons where necessary for the administration and enforcement of U.S. immigration laws.
	derstand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or ature) and, at that time, I will be required to sign an oath reaffirming that:
	1) I reviewed and provided or authorized all of the information in my application;
	2) I understood all of the information contained in, and submitted with, my application; and
	3) All of this information was complete, true, and correct at the time of filing.
	tify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the rmation contained in, and submitted with, my application, and that all of this information is complete, true, and correct.
$Ap_{j}$	plicant's Signature
3.	Applicant's Signature Will be signed at quality control.  Date of Signature (mm/dd/yyyy)
	Don't forget to sign!
Instr	TE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the fuctions, USCIS may deny your application.  rt 14. Interpreter's Contact Information, Certification, and Signature
Prov	ride the following information about the interpreter.  Complete only if applicant is exempt or has an N-648.
Int	terpreter's Full Name
1.	Interpreter's Family Name (Last Name)  Interpreter's Given Name (First Name)
2.	Interpreter's Business or Organization Name (if any)
Int	terpreter's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number
	City or Town State ZIP Code + 4
	-
	Province Postal Code Country

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1	t 14. Interpreter's Contact Information, Continued)	Certificatio	n, and Signatur	·e	A-	To a series of the series of t
Inte	erpreter's Contact Information					
4.	Interpreter's Daytime Telephone Number	5.	Interpreter's Mobil	e Telepho	one Number (if any)	
6.	Interpreter's Email Address (if any)	<del></del>				
	<u></u>					
Int	erpreter's Certification					
I cert	tify, under penalty of perjury, that:		· ¬			
	fluent in English and		<b>≓</b>		ge specified in Part 13., Item	
or he	Number 1., and I have read to this applicant in the ider answer to every question. The applicant informed metation, including the <b>Applicant's Certification</b> and have	ne that he or s	he understands ever	y instruct		
Int	erpreter's Signature					
7.	Interpreter's Signature				Date of Signature (mm/dd/	уууу)
<b>→</b>			., ., ., .,			
	rt 15. Contact Information, Declaration, a	nd Signatu	re of the Person	n Prepa	aring This Application	, if
Prov		•	•	-	edited representative,	
Pre	enarer's ruu Name	•	•		on. If you ARE an attor fortable doing so, com	•
1.		•	er Section, and		<u> </u>	piete
2.	Preparer's Business or Organization Name (if any)					
Pre	eparer's Mailing Address					f.
3.	Street Number and Name			Apt. St	te. Flr. Number	<del></del> 1
	City or Town			State	ZIP Code + 4	
	Province Pos	stal Code	Country			

1	art 15. Contact Information, Declaration, and Sign reparing This Application, if Other Than the Appli					
Pr	eparer's Contact Information					
4.	Preparer's Daytime Telephone Number	5. Preparer's Mobile Telephone Number (if any)				
6.	Preparer's Email Address (if any)	7				
Pr	reparer's Statement					
7.	A.  I am not an attorney or accredited representative but the applicant and with the applicant's consent.	actorney of				
	B. I am an attorney or accredited representative and my	accredited representation of the applicant in this case representative	e vour			
	extends does not extend beyond the preparat		• •			
	NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this application, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.					
Pr	eparer's Certification					
com	reparer's Signature  Preparer's Signature	on, and that all of this information is complete, true, and correct. licant provided to me or authorized me to obtain or use.  Date of Signature (mm/dd/yy				
<b>→</b>	• I	Bate of Signature (Immutally)	<u>'yy)</u>			
		ntil the USCIS Officer instructs you to do so at the rview.	•			
Pa	rt 16. Signature at Interview					
this com corr	Form N-400, Application for Naturalization, subscribed by me, aplete, true, and correct. The evidence submitted by me on number 1.					
540	scribed to and sworn to (armined) before the					
<u></u>	USCIS Officer's Printed Name or Stamp	Date of Signature (mm/dd/yyyy	·)			
App	olicant's Signature	USCIS Officer's Signature				
<u></u>						

Part 17. Renunciation of Foreign Titles					
If you answered "Yes" to Part 12., Items A. and B. in Item Number 4., then you must affirm the following before a USCIS officer:					
I further renounce the title of	which I have heretofore held; or				
(list tit	tles)				
I further renounce the order of nobility of	to which I have heretofore belonged.				
	(list order of nobility)				
Applicant's Printed Name	Applicant's Signature				
USCIS Officer's Printed Name	USCIS Officer's Signature				
Date of Signature (mm/dd/yyyy)	·				
Part 18. Oath of Allegiance					
If your application is approved, you will be scheduled for a public oath ceremony at which time you will be required to take the following Oath of Allegiance immediately prior to becoming a naturalized citizen. By signing below you acknowledge your willingness and ability to take this oath:					
I hereby declare on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty, of whom or which I have heretofore been a subject or citizen;					
that I will support and defend the Constitution and laws of the United States of America against all enemies, foreign, and domestic;					
that I will bear true faith and allegiance to the same;					
that I will bear arms on behalf of the United States when required by the law;					
that I will perform noncombatant service in the armed forces of the United States when required by the law;					
that I will perform work of national importance under civilian direction when required by the law; and					
that I take this obligation freely, without any mental reservation or purpose of evasion; so help me God.					
Applicant's Printed Name					
	Given Name (First Name) Middle Name (if applicable)				
Applicant's Signature	Date of Signature (mm/dd/yyyy)				
apparent o Mightonia	Date of Signature (min/dd/yyyy)				