

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

	Date Stamp	Receipt	Action Block
For			
USC			
Only			
Rema	rks		
		rint in black ink. Type or print "N/A" if an item is	
		nswer all of the questions may delay U.S. Citizensh must complete Parts 1 15.	ip and Immigration Services (USCIS) processing
•		we mother or father is a U.S. citizen by birth, or was	naturalized before you reached your 19th
		J.S. citizen. Before you consider filing this applicat	
www.	uscis.gov for more informa	ation on this topic and to review the instructions for	Form N-600, Application for Certificate of
Citize	nship, and Form N-600K,	Application for Citizenship and Issuance of Certific	ate Under Section 322.
	• 1	ats a United States citizen? If you answer "Yes," th	*
Paren	ts as part of this application	n. If you answer "No," then skip Part 6. and go to	Part 7. Biographic Information.
D	4 7 6 4 4 4 1		Futon Vous O Dinit A Number
		ut Your Eligibility (Select only one box o	r your Enter Your 9 Digit A-Number: • A-
FOII	n N-400 may be delay	ed)	A.
1.	You are at least 18 years o	f age and:	
	A. Have been a law	ful permanent resident of the United States for at le	ast 5 years.
		ful permanent resident of the United States for at le	•
		he same U.S. citizen spouse for the last 3 years, and	d your spouse has been a U.S. citizen for the last
	•	ne you filed your Form N-400. manent resident of the United States and you are the	a spouse of a U.S. citizen and your U.S. citizen
		rly engaged in specified employment abroad. (See	
	319(b).) If your	residential address is outside the United States and	you are filing under Section 319(b), select the
	USCIS Field Of	fice from the list below where you would like to ha	ve your naturalization interview:
	D. Are applying on	the basis of qualifying military service.	
	E. Other (Explain):		
Part	2. Information Abo	ut You (Person applying for naturalization)
		1100	,
		(do not provide a nickname)	
	Family Name (Last Name)	Given Name (First Nam	e) Middle Name (if applicable)
2.	Your Name Exactly As It	Appears on Your Permanent Resident Card (if appli	cable)
	Family Name (Last Name)	Given Name (First Nam	e) Middle Name (if applicable)

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Pa	rt 2. Information About You (Person applying for naturalization) (continued) A-
3.	Other Names You Have Used Since Birth (include nicknames, aliases, and maiden name, if applicable)
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
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? 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)
5.	U.S. Social Security Number (if applicable) 6. USCIS Online Account Number (if any)
7.	Gender 8. Date of Birth 9. Date You Became a Lawful
	☐ Male ☐ Female (mm/dd/yyyy) Permanent Resident (mm/dd/yyyy)
10.	Country of Birth 11. Country of Citizenship or Nationality
	DEDDOD LIOTION
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?
	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. 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?
	B. 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?
	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.)
Pai	rt 3. Accommodations for Individuals With Disabilities and/or Impairments
NOI	TE: Read the information in the Form N-400 Instructions before completing this part.
1.	Are you requesting an accommodation because of your disabilities and/or impairments?
	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:

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		Accommodations for Individuals With Disabilities and/or ments (continued)	A-
	C.	I have another type of disability and/or impairment (for example, use a wheelchair). disability and/or impairment and the accommodation you are requesting.)	(Describe the nature of your
Pa	rt 4.	Information to Contact You	
1.	Day	time Telephone Number 2. Work Telephone Number (i	if any)
3.	Eve	ning Telephone Number 4. Mobile Telephone Number	(if any)
5.	Ema	nil Address (if any)	
Pa	rt 5.	Information About Your Residence	
1.	A.	ere have you lived during the last five years? Provide your most recent residence and then a lived during the last five years. If you need extra space, use additional sheets of paper. Current Physical Address Street Number and Name City or Town County State Province or Region (foreign address only) Postal Code (foreign address only) To (mm/dd/yyyy) Residence Prom (mm/dd/yyyy) To (mm/dd/yyyy)	Apt. Ste. Flr. Number The state of the stat
	В.	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	te ZIP Code + 4
		Province or Region Postal Code Country (foreign address only) (foreign address only) (foreign address only)	only)

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Part	5. Information About Your Re	sidence (continued)	A-	
•	C. Physical Address 2 Street Number and Name		Ar	ot. 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)	
		*DAE		
	Dates of Residence From (mm/dd/yyyy)	To (mm/dd/yyyy)		
]	D. Physical Address 3			
	Street Number and Name	\circ τ	Aŗ	ot. Ste. Flr. Number
	City or Town	County	State	ZIP Code + 4
	City of Town	County	Dutc	
	Province or Region	Postal Code	Country (foreign address only)	
	(foreign address only)	(foreign address only)	(Toreign address only)	
	Dates of Residence From (mm/dd/yyyy)	To (mm/dd/yyyy)		
]	E. Physical Address 4			
	Street Number and Name	117/0	Ar	ot. Ste. Flr. Number
	City or Town	County	State	ZIP Code + 4
	Province or Region	Postal Code	Country	
	(foreign address only)	(foreign address only)	(foreign address only)	
	F (/11/)			
	Dates of Residence From (mm/dd/yyyy)	To (mm/dd/yyyy)		
Part	6. Information About Your Pa	rents		
If neit	her one of your parents is a United Sta	ntes citizen, then skip this part an	d go to Part 7.	
1.	Were your parents married before your 1	8th birthday?		Yes No
Info	rmation About Your Mother			
2.	Is your mother a U.S. citizen?			Yes No
]	If you answered "Yes," complete the follo	owing information. If you answere	ed "No," go to Item Numbe	er 3.

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Part	6.	Information About Your Parents (co	ntinued)	A-						
	A.	Current Legal Name of U.S. Citizen Mother								
			Given Name (First Name)	Middle	Name	e (if	applic	able)		
:	В.	Mother's Country of Birth	C. Mother's Date of Birth (mm/	dd/yyyy	y)					
			her's A-Number							
		(if known) (mm/dd/yyyy) (if a								
			A-							
Info	rmo	ation About Your Father								
v			*/ *					Vac		NI.
	•	our father a U.S. citizen?	1. IC	-				Yes	Ш	No
	•	ou answered "Yes," complete the information be	low. If you answered "No," go to Part	7.						
		Current Legal Name of U.S. Citizen Father								
		Family Name (Last Name)	Given Name (First Name)	Middle	Name	e (if	applic	able)		
		140								
	В.	Father's Country of Birth	C. Father's Date of Birth (mm/d	ld/yyyy))					
		Date Father Became a U.S. Citizen (if known) (mm/dd/yyyy) E. Fath (if a								
Part	7.	Biographic Information								
		USCIS requires you to complete the categories b	elow to conduct background checks. (S	ee the I	orm :	N-4(00 Inst	ructio	ns fo	or
more i	nfo	rmation.)								
1.		nicity (Select only one box)	1/20							
		Hispanic or Latino Not Hispanic or Lati	no							
2.		e (Select all applicable boxes)								
		White Asian Black or African American	American Indian Native H or Alaska Native Other Pac							
3.	Heig	ght Feet Inches 4. Weig	ht Pounds							
5.	•	color (Select only one box)				_				
		Black Blue Brown Gray	Green Hazel Maroon	P	ink		Unkn Other			
6.	Hair	r color (Select only one box)					Juici			
		Bald Black Blond Brow	wn Gray Red Sandy		White	; [nknow	n/	
		(No hair)					Ot	her		

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Pai	rt 8. Information Abo	ut Your Employment and Schools Yo	ou Attended	A-					
erio empl inen	od. Include all military, police loyment, studies, or unemploy aployed, or have studied for t	tended school full time or part time during the last, and/or intelligence service. Begin by providing ment (if applicable). Provide the locations and the last five years. If you worked for yourself, typu need extra space, use additional sheets of pape	g information about dates where you wor pe or print "self-emp	your n ked, w	nost 1 vere s	ecent of	or curr ployed	ent d, we	re
l .	Employer or School Name								
	Street Number and Name		-		Apt.	Ste.	Flr.	Nun	nber
	City or Town	UKA F	Sta	ite		ZI	P Cod	le + 4	ļ
	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 Occupat	ion						
2.	Employer or School Name								
	Street Number and Name City or Town	RODU	Sta		Apt.	Ste.	Flr. Cod	Nun	
	Province or Region (foreign address only)	Postal Code (foreign address only)	Country (foreign address	only)	7] - [
	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy) Your Occupati	ion						
3.	Employer or School Name								
	Street Number and Name				Apt.	Ste.	Flr.	Nun	nber
	City or Town		Sta	ite			P Cod	le + 4	ļ
	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 Occupati	ion						

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Pa	rt 9. Time Outsid	le the United States			A-		
1.	How many total day	rs (24 hours or longer)	did you spend outsid	e the United States of	during the last 5	years?	days
2.	How many trips of 2	4 hours or longer have	you taken outside the	e United States duri	ng the last 5 year	ars?	trips
3.		ps of 24 hours or longe and work backwards. I				e last 5 years	. 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?	W	ountries to Thich You Traveled		Total Days Outside the United States
			☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	FI			
			Yes No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
				\vdash ()	K		
Pa	rt 10. Information	n About Your Mar	ital History				
1. 2. 3.	If you are married, is	have never married, go s your spouse a current never you been married (income).	to Part 11. nember of the U.S. ar			riage Annulle	Yes No
4.	A. Current Spouse's Family Name (L		17/	your current spouse. e (First Name)	1 4	ddle Name (i	f applicable)
	B. Current Spouse's	s Previous Legal Name					
	Family Name (L	ast Name)	Given Nam	e (First Name)	Mic	ddle Name (it	f applicable)
	C. Other Names Us	sed by Current Spouse (i	nclude nicknames, a	liases, and maiden n	ame, if applicat	ole)	_
	Family Name (L	Last Name)	Given Nam	e (First Name)	Mic	ddle Name (i	f applicable)
	D. Current Spouse's (mm/dd/yyyy)		Date You Entered in with Current Spouse	-			

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Part	10. Information About Y	our Marital History (continue	d) A-				
F	. Current Spouse's Present Ho	me Address					
	Street Number and Name			Apt. Ste. Flr. Number			
	City or Town	County	State	ZIP Code + 4			
				-			
	Province or Region	Postal Code	Country				
	(foreign address only)	(foreign address only)	(foreign address only	7)			
G	Current Spouse's Current En	nployer or Company					
5. Is	s your current spouse a U.S. citiz	zen?		Yes No			
If	you answered "Yes," answer It	em Number 6. If you answered "No,"	go to Item Number 7.				
6. If	your current spouse is a U.S. ci	tizen, complete the following informat	tion.				
A	A. When did your current spouse become a U.S. citizen?						
	At Birth - Go to Item N ı	Imber 8. Other - Complete the	ne following information.				
В	 Date Your Current Spouse B a U.S. Citizen (mm/dd/yyyy) 						
	DEDI						
7. If	your current spouse is not a U.	S. citizen, complete the following info	rmation.	() \			
		Citizenship or Nationality B. Curr		any)			
		>					
C	Current Spouse's Immigration	n Status					
	Lawful Permanent Reside	_ / / /	101				
8. H	low many times has your curren	t spouse been married (including annu	lled marriages, marriages to				
		e same person)? If your current spouse					
•	Č	about your current spouse's prior spo					
		ore than one previous marriage, provid	e that information on additi	onal sheets of paper.			
A	Legal Name of My Current S	•					
	Family Name (Last Name)	Given Name (First	Name) Mid	dle Name (if applicable)			
В	•	arrent Spouse's Prior Spouse (if known					
	U.S. Citizen Lawf	_	Explain):				
C	Date of Birth of My Current Prior Spouse (mm/dd/yyyy)	Spouse's D. Country of Birth of M Prior Spouse	y Current Spouse's				
	That spouse (mini da jijij)	Therefore					
E	Country of Citizenship or Na	utionality of My Current					
L	. Country of Chizchship of Ive						
	Spouse's Prior Spouse	unonanty of Mry Current					

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Pai	rt 10	D. Information About Your Marital History (continued) A-			
	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.		ou were married before, provide the following information about your prior spouse. If you have more than one previous riage, 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			
	Е.	My Prior Spouse's Country of Citizenship or Nationality F. Date of Marriage with My Prior Spouse (mm/dd/yyyy)			
	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):			
Par	rt 11	1. Information About Your Children			
1.	Indicate your total number of children. (You must indicate 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.		vide 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.			
	A.	Child 1			
		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			
		► A-			

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art 1	. 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 Postal Code Country
	(foreign address only) (foreign address only) (foreign address only)
	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)
В.	Child 2
	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
	► A-
	Current Address
- 1	Street Number and Name Apt. Ste. Flr. Number
- 1	
	City or Town County State ZIP Code + 4
	Province or Region Postal Code Country
	(foreign address only) (foreign address only) (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) Date of Birth (mm/dd/yyyy) Country of Birth
	► A-

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Par	t 11	. Information About Your Chile	dren (continued)	A-	
		Current Address			
		Street Number and Name		Apt.	Ste. Flr. Number
		City or Town	County	State	ZIP Code + 4
					-
		\mathcal{E}	Postal Code	Country	
		(foreign address only)	(foreign address only)	(foreign address only)	
		What is your child's relationship to you? stepchild, legally adopted child)	(for example, biological child,		
	D.	Child 4			
		Current Legal Name			
		Family Name (Last Name)	Given Name (First Nam	me) Middle N	Name (if applicable)
		A-Number (if any)	Date of Birth (mm/dd/yyyy)	Country of Birth	
		► A-			
		Current Address		OTI 6	
		Street Number and Name		Apt.	Ste. Flr. Number
		KEPKL	$\mathcal{I}\mathcal{I}\mathcal{I}\mathcal{I}\mathcal{I}\mathcal{I}\mathcal{I}\mathcal{I}\mathcal{I}\mathcal{I}$		
		City or Town	County	State	ZIP Code + 4
		Ÿ	Postal Code (foreign address only)	Country (foreign address only)	
		(Toleign address only)	(Torcigir address only)	(Totelgii address omy)	
		What is your child's relationship to you?	(for example, biological child	V I V	
		stepchild, legally adopted child)	(101 example, biological clind,		
Par	t 12	2. Additional Information About	t You (Person Applying for	r Naturalization)	
		tem Numbers 1 21. If you answer "Ye paper.	s" to any of these questions, incl	lude a typed or printed explan	ation on additional
1.	Hav	re you EVER claimed to be a U.S. citizen	(in writing or any other way)?		Yes No
2.	Hav	re you EVER registered to vote in any Fe	deral, state, or local election in t	he United States?	Yes No
3.	Hav	re you EVER voted in any Federal, state,	or local election in the United S	tates?	Yes No
4.	A.	Do you now have, or did you EVER have country?	ve, a hereditary title or an order of	of nobility in any foreign	Yes No
	В.	If you answered "Yes," are you willing to have in a foreign country at your natural		orders of nobility that you	Yes No
5.	Hav	re you EVER been declared legally incon	npetent or been confined to a me	ental institution?	Yes No

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		2. Additional Information About You lization) (continued)	ou (Person Applying for	A -		
6.	Do	you owe any overdue Federal, state, or local to	axes?		Yes	No
7.	A.	Have you EVER not filed a Federal, state, or resident?	r local tax return since you became a lawful per	rmanent	Yes	No
	В.	If you answered "Yes," did you consider you	rself to be a "non-U.S. resident"?		Yes	No
8.		ve you called yourself a "non-U.S. resident" or rful permanent resident?	a Federal, state, or local tax return since you	pecame a	Yes	No
9.	A.		d in, or in any way associated with, any organizatety, or similar group in the United States or in		Yes	No
	В.	If you answered "Yes," provide the informati additional sheets of paper and provide any ev	on below. If you need extra space, attach the ridence to support your answers.	names of the oth	ner groups on	
		Name of the Group	Purpose of the Group	Dates of I From (mm/dd/yyyy)	Membership To (mm/dd/yyy	уу)
		REPRO	DUCT		N	
10.	A. B.	we you EVER been a member of, or in any wa The Communist Party? Any other totalitarian party? A terrorist organization?	y associated (either directly or indirectly) with	6	Yes	No No No
11.		we you EVER advocated (either directly or independence?	lirectly) the overthrow of any government by for	orce or	Yes	No
12.		we you EVER persecuted (either directly or inc gin, membership in a particular social group, o	directly) any person because of race, religion, r political opinion?	national	Yes	No
13.		tween March 23, 1933 and May 8, 1945, did your irectly) with:	ou work for or associate in any way (either dire	ectly or		
	A.	The Nazi government of Germany?			Yes	No
	В.	Any government in any area occupied by, all government of Germany?	ied with, or established with the help of the Na	zi [Yes	No
	C.		amilitary unit, self-defense unit, vigilante unit, remination camp, concentration camp, prisone		Yes	No

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Part 12. Additional Information About You (Person Applying for Naturalization) (continued) A-					
14.	We	re you EVER involved in any way with any of the following:			
		Genocide?		Yes	☐ No
	В.	Torture?		Yes	_ No
	C.	Killing, or trying to kill, someone?		Yes	_ No
	D.	Badly hurting, or trying to hurt, a person on purpose?		Yes	☐ No
	E.	Forcing, or trying to force, someone to have any kind of sexual contact or relations?		Yes	☐ No
	F.	Not letting someone practice his or her religion?		Yes	☐ No
15.		re you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of owing groups:	the		
	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)?	al	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)?	2	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.	We	re you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the fo	ollowing:		
		Prison or jail? Prison camp?		Yes Yes	 No 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.		re you EVER a part of any group, or did you EVER help any group, unit, or organization that appen against any person, or threatened to do so?	used a	Yes	☐ No
	A.	If you answered "Yes," when you were part of this group, or when you helped this group, did use a weapon against another person?	you ever	Yes	☐ No
	В.	If you answered "Yes," when you were part of this group, or when you helped this group, did tell another person that you would use a weapon against that person?	you ever	Yes	☐ No
18.		I you EVER sell, give, or provide weapons to any person, or help another person sell, give, or papons to any person?	provide	Yes	☐ No
	A.	If you answered "Yes," did you know that this person was going to use the weapons against ar person?	other	Yes	☐ No
	В.	If you answered "Yes," did you know that this person was going to sell or give the weapons to someone who was going to use them against another person?	1	Yes	☐ No

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Part 12. Additional Information About You (Person Applying for Naturalization) (continued) A-				
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		
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		
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 Num	iber 30.		
	If you answered "Yes" to any question in Item Numbers 23 28. , then complete this table. If you need ext additional sheets of paper and provide any evidence to support your answers.	ra space, use		

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.)

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	A- Late 12. Additional Information About You (Person Applying for auralization) (continued)	
	ver 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.	3., include a typed or
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
	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 officials any information or documentation that was false, fraudulent, or misleading?	Yes No
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 Change 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 an 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

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		2. Additional Information About You (Person Applying for lization) (continued) A-			
44. A. Are you a male who lived in the United States at any time between your 18th and 26th birthdays? Yes (This does not include living in the United States as a lawful nonimmigrant.)					
	В.	If you answered "Yes," when did you register for the Selective Service? Provide the information below. Date Registered Selective Service (mm/dd/yyyy) Number			
	C.	If you answered "Yes," but you did not register with the Selective Service System and you are:			
	1. Still under 26 years of age, you must register before you apply for naturalization, and complete the Selective Service information above; OR				
A	2. Now 26 to 31 years of age (29 years of age if you are filing under INA section 319(a)), but you did not register with the Selective Service, you must attach a statement explaining why you did not register, and provide a status information letter from the Selective Service.				
		tem Numbers 45 50. If you answer "No" to any of these questions, include a typed or printed explanation on additional paper and provide any evidence to support your answers.			
45.	Do	you support the Constitution and form of Government of the United States? Yes No			
46.	Do	you understand the full Oath of Allegiance to the United States?			
47.	Are you willing to take the full Oath of Allegiance to the United States?				
48.	If tl	ne law requires it, are you willing to bear arms on behalf of the United States?			
49.	If tl	ne law requires it, are you willing to perform noncombatant services in the U.S. armed forces? Yes No			
50.	If tl	ne law requires it, are you willing to perform work of national importance under civilian direction? Yes No			
Pa	rt 13	3. Applicant's Statement, Certification, and Signature			
NO	Γ E :]	Read the Penalties section of the Form N-400 Instructions before completing this part.			
Ap_{I}	plica	ant's Statement			
NO	ГЕ:	Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item Number 2.			
1.	Applicant's Statement Regarding the Interpreter				
	A. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.				
	В.	The interpreter named in Part 14. read to me every question and instruction on this application and my answer to every question in a language in which I am fluent, and I understood everything.			
2					
2.					
	At my request, the preparer named in Part 15. , prepared this application for me based only upon information I provided or authorized.				

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Part 13. Applicant's Statement, Certification, and Signature (continued) A-			
Applicant's Certification			
Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.	•		
I further authorize release of information contained in this application, in supporting documents, and in my USCIS records to of entities and persons where necessary for the administration and enforcement of U.S. immigration laws.	ther		
I understand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) 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.			
I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.			
Applicant's Signature			
3. Applicant's Signature Date of Signature (mm/do	d/yyyy)		
NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed Instructions, USCIS may deny your application.	in the		
Part 14. Interpreter's Contact Information, Certification, and Signature			
Provide the following information about the interpreter.			
Interpreter'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)			
Interpreter's Mailing Address			
3. Street Number and Name Apt. Ste. Flr. Number			
City or Town State ZIP Code + 4			
Province Postal Code Country			
1 Tovinec Tostal Code Country			

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	rt 14. Interpreter's Contact Information, Certification, and Signature ntinued)
Int	erpreter's Contact Information
4.	Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Telephone Number (if any)
6.	Interpreter's Email Address (if any)
Int	erpreter's Certification
I cer	tify, under penalty of perjury, that:
Item or he appli	fluent in English and, which is the same language specified in Part 13. , Item B. in Number 1. , and I have read to this applicant in the identified language every question and instruction on this application and his er answer to every question. The applicant informed me that he or she understands every instruction, question and answer on the ideation, including the Applicant's Certification and has verified the accuracy of every answer.
Int	erpreter's Signature
7.	Interpreter's Signature Date of Signature (mm/dd/yyyy)
Otl	rt 15. Contact Information, Declaration, and Signature of the Person Preparing This Application, if her Than the Applicant ide the following information about the preparer.
Pre	eparer's Full Name
 2. 	Preparer's Family Name (Last Name) Preparer's Given Name (First Name) Preparer's Business or Organization Name (if any)
Pre	eparer'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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	art 15. Contact Information, Declaration, and Signature of the Person reparing This Application, if Other Than the Applicant (continued)					
	eparer's Contact Information					
4.	Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)					
••	Treparer's Payanne Tempore Trainer (Ir any)					
6.	Preparer's Email Address (if any)					
Pr	eparer's Statement					
7.	A. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.					
	B. I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.					
	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					
with com	ewed this completed application and informed me that he or she understands all of the information contained in, and submitted in, his or her application, including the Applicant's Certification , and that all of this information is complete, true, and correct. I appleted this application based only on information that the applicant provided to me or authorized me to obtain or use. **Expansion of the information contained in, and submitted in, his or her application, including the Applicant's Certification , and that all of this information is complete, true, and correct. I appleted this application based only on information that the applicant provided to me or authorized me to obtain or use. **Expansion of the information contained in, and submitted in, his or her application, including the Applicant's Certification , and that all of this information is complete, true, and correct. I appleted this application based only on information that the applicant provided to me or authorized me to obtain or use.					
8.	Preparer's Signature Date of Signature (mm/dd/yyyy)					
→	NOTE: Do not complete Parts 16., 17., or 18. until the USCIS Officer instructs you to do so at the interview.					
Pa	art 16. Signature at Interview					
I sw	rear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of Form N-400, Application for Naturalization, subscribed by me, including corrections number 1 through, are applete, true, and correct. The evidence submitted by me on numbered pages 1 through are complete, true, and					
Sub	scribed to and sworn to (affirmed) before me					
	USCIS Officer's Printed Name or Stamp Date of Signature (mm/dd/yyyy)					
App	olicant's Signature USCIS Officer's Signature					

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Part 17. Renunciation of Foreign Titles		A-		
If you answered "Yes" to Part 12., Items A. and B. in	n Item Number 4., then you r	nust affirm the following before a USCIS officer:		
I further renounce the title of		which I have heretofore held; or		
	(list titles)	_		
I further renounce the order of nobility of to which I have heretofore belonge (list order of nobility)				
Applicant's Printed Name	Applicant's Sign	nature		
USCIS Officer's Printed Name	USCIS Officer's	s Signature		
Date of Signature (mm/dd/yyyy)				
	TE	30		
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				
Family Name (Last Name)	Given Name (First Name	e) Middle Name (if applicable)		
Applicant's Signature (mm/dd/yyyy)				

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