

Application for Citizenship and Issuance of Certificate Under Section 322

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form N-600KOMB No. 1615-0087
Expires 12/31/2018

	Date Stamp		Receipt		Action Block							
For	r											
USC												
Uso Onl	y											
	Remarks											
R	To be completed by an Attorney or Accredited epresentative (if any).	Select this box if Form G-28 is attached.	Attorney State Bar Numbe (if applicable)		or Accredited Representative online Account Number (if any)							
	➤ START HERE - Type or print in black ink. NOTE: The applicant on this form is the child's parent, grandparent, or legal guardian.											
Part	1. Information Abo	out the Child's Elig	ibility		ild's A-Number:							
1.	The application is being f (select only one box):	filed for a child. The chi	ld is under 18 years of age and		A-							
	☐ The BIOLOGICAL of	child of a qualifying U.S	, citizen (USC) parent filing th	his application.								
	The ADOPTED child	d of a qualifying USC pa	arent filing this application.									
			ent or the child ward of a USO	C legal guardia	n filing this application within							
	five years of the deat	th of the USC parent.			711							
Part	2. Information Abo	out the Child (for w	hom this application is b	eing filed)								
1.	Current Legal Name (do	not provide a nickname)										
	Family Name (Last Name	e)	Given Name (First Name)	Middle Name							
		114	0101	04								
2.	Name Exactly As It Appe	ears on the Permanent Re	esident Card (if applicable)									
	Family Name (Last Name	e) ————————————————————————————————————	Given Name (First Name		Middle Name							
	Other Names Used (if app	,	.1									
	Family Name (Last Names e		names, maiden name, and alia Given Name (First Name		Middle Name							
	Tunny Ivanie (Bast Ivanie	<u>., </u>	Given ivanie (i nist ivanie)	<i>)</i>	TVITAGE TVAINE							
4.	U.S. Social Security Num	nber (if applicable) 5.	USCIS Online Account N	umber (if any)								
6.	Date of Birth (mm/dd/yyy	yy) 7. Country	of Birth									

Country of Citizenship or Nationality 9. Gender Male Female Feet Inches
Mailing Address In Care Of Name (if any)
in Care Of Name (if any)
Street Number and Name Apt. Ste. Flr. Number
City or Town State ZIP Code
Province Postal Code Country
Physical Address (Do not provide a PO Box in this space unless it is the ONLY address.)
Street Number and Name Apt. Ste. Flr. Number
City or Town State ZIP Code
Province Postal Code Country
Marital Status
Single, Never Married Divorced Widowed Separated Marriage Annulled
Other (Explain):
Information About the Child's Admission Into the United States and Current Immigration Status
NOTE: Do NOT complete this section. The USCIS officer will complete it during the interview.
A. Arrived in the following manner:
Port-of-Entry
City or Town State Date of Entry (mm/dd/yyyy)
Exact Name Used at Time of Entry
Family Name (Last Name) Given Name (First Name) Middle Name
B. Current Immigration Status

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		Information About the Child (for whom this application is being filed) A- ued)
16.	Wa	s the child adopted?
	A.	Date of Adoption (mm/dd/yyyy) B. Date Legal Custody Began (mm/dd/yyyy) (mm/dd/yyyy) C. Date Physical Custody Began (mm/dd/yyyy)
17.	We	re the child's parents married to each other when the child was born (or adopted)? Yes No
Par	t 3.	Information About the Child's U.S. Citizen Biological or Adoptive Parent
		Provide information about the U.S. citizen father or mother applying on behalf of the eligible child. Provide information e child's U.S. citizen parent in the sections noted if the U.S. citizen grandparent or legal guardian is filing this form.
1.	Cur	rent Legal Name of U.S. Citizen Parent
	Fan	mily Name (Last Name) Given Name (First Name) Middle Name
2.	Dat	te of Birth (mm/dd/yyyy) 3. Country of Birth
4.	U.S ►[S. Social Security Number (if applicable)
5.	Phy	vsical Address
		eet Number and Name (Do not provide a PO Box in this space unless it is your ONLY address.) Apt. Ste. Flr. Number y or Town State ZIP Code
	Pro	vince Postal Code Country
6.	Day	ytime Telephone Number 7. Work Telephone Number (if any)
8.	Eve	ening Telephone Number 9. Mobile Telephone Number (if any)
10.	Em	ail Address (if any)

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						,		_			
		Information About the Child's U (continued)	J.S. Citizen Biological or Ad	optive	A-						
11.	The	parent is a U.S. citizen by:									
		Birth in the United States	Acquisition After Birth Through	Naturalizatio	n of .	Alien	Parent	(s)			
		Birth Abroad to U.S. Citizen Parent(s)									
		Certificate of Citizenship Number (if any)	Alien Registration Number (A-Nu	umber) (if an	v)						
			► A-		•						
		Naturalization									
		Place of Naturalization									
		Name of Court or USCIS Office Location	1								
		Thanks of court of ciscus office Bocardo									
		City or Town	State	Γ							
		Certificate of Naturalization Number	A-Number ▶ A-	Da	ite of	Natu	ıralizati	on (mm/c	d/yy	уу)
12.	Has	the U.S. citizen father or mother ever lost	U.S. citizenship or taken any action	n that would	cause	·			es [— ┐	No
		s of U.S. citizenship?	TIC				L	1	es [10
	If y	ou answered "Yes" to Item Number 12., p	provide a full explanation in the space	e provided in	Part	11.	Additio	nal	Infor	mati	on.
13.	Mai	rital History		/ \							
	A.	How many times has the U.S. citizen fath marriages and marriages to the same pers		ng annulled							
	B.	What is the U.S. citizen father or mother'	s current marital status?	-1/			N I				
		Single, Never Married Married	Divorced Widowed	Separated	ı	Ma	rriage .	Ann	ulled	7	
		Other (Explain):					N				
	C.	Information About the U.S. Citizen Father	er's or Mother's Current Spouse								
		Family Name (Last Name)	Given Name (First Nar	ne)		Mic	idle Na	me			
			1(0)/(2)	11							
		Date of Birth (mm/dd/yyyy) Country	y of Birth	\mathcal{H}		5					
		Country of Citizenship or Nationality									
		Spouse's Physical Address									
		Street Number and Name (Do not provid	e a PO Box in this space unless it is	your spouse	's						
		ONLY address.)	1	7 1		Apt	. Ste.	Fl	r. N	ımbe	r
		City or Town		Sta	ate		Z	IP C	ode		
									-		
		Province	Postal Code	Country							
							_	_			

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		Information About the Child's U.S. Citizen Biological or Adoptive (continued)
		Date of Marriage (mm/dd/yyyy)
		Place of Marriage
		City or Town State Country
		Spouse's Immigration Status
		U.S. Citizen Lawful Permanent Resident Other (Explain):
	D.	Is the U.S. citizen father's or mother's current spouse also the child's biological (or adoptive) parent?
14.	Mei	mber of U.S. Armed Forces
	A.	Is the sponsoring U.S. citizen parent a member of the U.S. Armed Forces?
	В.	If you answered "Yes" to Item A., then are there official orders authorizing the child to accompany and reside with the sponsoring U.S. citizen parent who is a member of the U.S. Armed Forces?
		NOTE: If the U.S. citizen biological or adoptive parent is filing this application AND has the required physical presence in the United States, skip Part 4. and go directly to Part 5.
Par	t 4.	Information About the Child's Qualifying U.S. Citizen Grandparent
citize	enshij h we Cur	Complete this part only if the U.S. citizen parent (or adoptive parent), grandparent, or legal guardian is applying for p for the child, and the U.S. citizen parent has not been physically present in the United States for five years; two years of re after 14 years of age.) The rent Legal Name of U.S. Citizen Grandparent The provided Heavy States for five years; two years of the child, and the U.S. Citizen Grandparent The provided Heavy States for five years; two years of the child, and the U.S. Citizen Grandparent The provided Heavy States for five years; two years of the child, and the U.S. Citizen Grandparent The provided Heavy States for five years; two years of the child, and the U.S. Citizen Grandparent The provided Heavy States for five years; two years of the child, and the U.S. Citizen Grandparent The provided Heavy States for five years; two years of the child, and the U.S. Citizen Grandparent The provided Heavy States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years; two years of the Company States for five years of
2.	Dat	e of Birth (mm/dd/yyyy) 3. Country of Birth
4 •	Dau	e of Birth (mm/dd/yyyy) 3. Country of Birth
 4. 5. 	•	. Social Security Number (if applicable) sical Address
	Stre	tet Number and Name (Do not provide a PO Box in this space unless it is your ONLY address.) Apt. Ste. Flr. Number
	City	y or Town State ZIP Code
	Pro	vince Postal Code Country
6.	Day	rtime Telephone Number 7. Work Telephone Number (if any)

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	r t 4. ntini		he Child's Qualifying U	J.S. Cit	izen Grandparent	A-							
		,		0 1	6 1 1 TO 1 1 NY 1								
8.	Eve	ening Telephone Number		9. N	Mobile Telephone Number	er (II any)							
10.	Em	nail Address (if any)		L									
11.	L The	e grandparent is a U.S. citize	en bv										
		Birth in the United States	•	After Bi	rth Through Naturalization	on of Alien Parent(s)							
	☐ Birth in the United States ☐ Acquisition After Birth Through Naturalization of Alien Parent(s) ☐ Birth Abroad to U.S. Citizen Parent(s)												
	ш	Certificate of Citizenship N		if anv)									
			► A-										
		Naturalization		Λ									
		Place of Naturalization			L I								
		Name of Court or USCIS (Office Location										
		Name of Court of OSCIS (office Location										
		City or Town	State										
		City of Town	State										
		Certificate of Naturalizatio	on Number A-Number	- 1		oto of Noturalization (mm/dd/yyyyy)							
		Certificate of Naturalization	A-Tuniber A-Tuniber	-		ate of Naturalization (mm/dd/yyyy)							
		_											
12.			J.S. citizenship or taken any a			· — —							
		ou answered "Yes" to Item ditional Information.	Number 12., provide a full e	explanati	on in the space provided	in Part 11.							
Pa	rt 5.	Physical Presence in	the United States Fron	Birth	Until Filing of Form	m N-600K							
not	been		ited States for five years, two			es. If the U.S. citizen parent has ars of age, then the child must use							
1.	Ind	icate whether this information	on relates to the U.S. citizen p	oarent or	to the qualifying grandp	arent.							
		U.S. Citizen Parent	U.S. Citizen Grandparent		4 0 1								
2.	Phy	ysical Presence in the United	l States										
	A.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	В.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)							
	C.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	 D.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)							
	E.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	 F.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)							
	G.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	— Н.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)							

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NOTE: If the U.S. citizen biological/adoptive parent is filing this application, skip Part 6. and go directly to Part 7.

	art 6. Information About the Legal Gu		1 1 10 0 1 17	A-
	omplete this part only if the legal guardian is filing	this application on	behalf of a deceased U	J.S. citizen parent.
1.	Current Legal Name of the Legal Guardian			
	Family Name (Last Name)	Given Name	e (First Name)	Middle Name
2.	Date of Birth (mm/dd/yyyy) 3. Cou	ntry of Birth		
4.	U.S. Social Security Number (if applicable)			
	>			
5.	Physical Address			
	Street Number and Name (Do not provide a Po	O Box in this space i	unless it is your ONLY	address.) Apt. Ste. Flr. Number
		DA		
	City or Town	HD/H		State ZIP Code
			\ 	7
	Province Post	al Code	Country	
	Trovince	<u>ar code</u>	Country	
6	Doutime Telephone Number	7 7 7	Work Tolophone Nur	mbor (if any)
6.	Daytime Telephone Number	7.	Work Telephone Nur	noer (ir any)
0	F : WI I V I		V 1 7 7 7 7	
8.	Evening Telephone Number	9.	Mobile Telephone Nu	umber (if any)
10.	. Email Address (if any)		OTI	
		-11	(())
11.	. The legal guardian is a U.S. citizen by:		\	
	Birth in the United States	Acquisition After	Birth Through Natural	ization of Alien Parent(s)
	Birth Abroad to U.S. Citizen Parent(s)			
	Certificate of Citizenship Number (if any)	A-Number (if any		10
		► A-		10
	☐ Naturalization	I()/		
	Place of Naturalization			
	Name of Court or USCIS Office Location	1		
	City or Town	State		
	Certificate of Naturalization Number	A-Number		Date of Naturalization (mm/dd/yyyy)
		► A-		Zate of Futuralization (min/dd/yyyy)

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Pai	rt 6. Information About the	e Legal	Guardian (continued)		A-						
12.	Date of Legal Guardianship (mm/dd/yyyy)	13.	Name of Authority that Granted Legal Guardianship								
14.	Address of Authority that Grante	d Legal (Guardianship								
	•	•	a PO Box in this space unless it is	your ONLY add	lress.)	Apt.	Ste.	Flr.	Nur	nber	
	City or Town			S	tate		ZI	P Cod	le		
] - [
	Province		Postal Code	Country							
Pai	rt 7. Preferred Location an	d Date	for Interview								
1.	USCIS Office Location		JKAF								
	City or Town			S	tate						
2.	Preferred Date (mm/dd/yyyy)	VI (()k							
	USCIS will attempt to accommo	date the r	requested preferences.								
	NOTE: The interview date sho	uld be a	t least 90 days after filing Form	N-600K and bef	fore th	e chile	d's 18t	h bir	thda	y .	
	BB										
Par	t 8. Applicant's Statement	, Decla	ration, Certification, and S	Signature							
NO	TE: Read the Penalties section of	the Form	n N-600K Instructions before com	pleting this section	on.		V				
App	plicant's Statement										
NOT	TE: Select the box for either Item	A. or B.	in Item Number 1. If applicable	, select the box fo	or Item	ı Num	ıber 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.										
	B. The interpreter named in question in	Part 9.	read to me every question and ins	struction on this a lage in which I an						•	
2.	Applicant's Statement Regarding	the Prepa	arer				1				
	At my request, the preparer application for me based only		Part 10.,	ed.			, r	prepar	ed th	is	

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	rt 8. Applicant's Statement, Declaration, Certification, and Signature entinued)	A-						
Ap_{I}	plicant's Declaration and Certification							
requ	ies of any documents I have submitted are exact photocopies of unaltered, original documents, a tire that I submit original documents to USCIS at a later date. Furthermore, I authorize the release all of my records that USCIS may need to determine my eligibility for the immigration benefit I	se of	f any					
	ther authorize release of information contained in this application, in supporting documents, and ties and persons where necessary for the administration and enforcement of U.S. immigration law		ny I	JSCIS	recor	ds, to	othe	r
auth	rtify, under penalty of perjury, that all of the information in my application, and any document su orized by me, that I reviewed and understand all of the information contained in, and submitted his information is complete, true, and correct.							
Ap	plicant's Signature							
3.	Applicant's Signature (sign in ink)	Dε	ate o	f Sign	ature ((mm/c	ld/yy	yyy)
\rightarrow	URALL							
	TE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit ructions, USCIS may deny your application.	req	uire	d docu	ments	listed	l in t	he
Pa	rt 9. Interpreter's Contact Information, Certification, and Signature							
Prov	vide the following information about the interpreter.							
Int	erpreter's Full Name	`						
1.	Interpreter's Family Name (Last Name) Interpreter's Given Name (F	irst l	Nam	le)	t			
2.	Interpreter's Business or Organization Name (if any)							
Int	erpreter's Mailing Address							
3.	Street Number and Name Apt. S	te.	Flr.	Nui	mber			$\overline{}$
		+(5		- C 1			
	City or Town State				Code	: 		
	Province Postal Code Country							
Int	erpreter's Contact Information							
4.	Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Teleph	ione	Nu	mber (if any)		
6	Interpretaris Email Address (if any)							
6.	Interpreter's Email Address (if any)							

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	rt 9. Interpreter's Contact Information, Certification, and Signature ntinued)
Inte	erpreter's Certification
I cert	tify, under penalty of perjury, that:
Item appli	fluent in English and, which is the same language specified in Part 8. , B. in Item Number 1. , and I have read to this applicant in the identified language every question and instruction on this cation and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, answer on the application, including the Applicant's Declaration and Certification , and has verified the accuracy of every err.
Inte	erpreter's Signature
7.	Interpreter's Signature (sign in ink) Date of Signature (mm/dd/yyyy)
	et 10. Contact Information, Declaration, and Signature of the Person Preparing this Application, if ner Than the Applicant
Prov	ide the following information about the preparer.
Pre	parer's Full Name
1.	Preparer's Family Name (Last Name) Preparer's Given Name (First Name)
2.	Preparer's Business or Organization Name (if any)
	DDANHCTIAN
Pre	parer's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number
	City or Town State ZIP Code Province Postal Code Country The control of the country of the
Pre	parer's Contact Information
4.	Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)

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		. Contact Information, Declaration, and Signature of the Person ing this Application, if Other Than the Applicant (continued)
Pro	epare	r's Statement
•	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.
	В.	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 also need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or Form G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature (sign in ink)

Date of Signature (mm/dd/yyyy)

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Par	t 11	1. Additional Information	A-					
than print	what the c	ed extra space to provide any additional information within this application, use the space t is provided, make copies of this page to complete and file with this application or attach child's name and A-Number (if any) at the top of each sheet; indicate the Page Number , the answer refers; and sign and date each sheet.	a sepa	rate	sheet of	pape	r. Ty	pe or
1.	Fan	mily Name (Last Name) Given Name (First Name) M	ddle N	lame				
2.	A-N	Number (if any) ► A-						
3.	A.	Page Number B. Part Number C. Item Number						
	D.							
		DDAET						
4.	A.	Page Number B. Part Number C. Item Number						
	D.							
		NIOT FOR						
5.	A.	Page Number B. Part Number C. Item Number						
	D.							
		PR()H(;H(M			
6.	A.	Page Number B. Part Number C. Item Number						
	D.	0//19/201	_	2				
		- 04/ 10/ 20 1						
7.	A.	Page Number B. Part Number C. Item Number						
	D.							
	υ.							

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Part 12. Affidavit (At the time of Interview)	A-
I, the parent/grandparent/legal guardian, penalty of perjury under the laws of the United States, that I know and understand the contents of the attached supplementary pages number to inclusive, that the same are true and and that corrections number to were made by me or at my request. Parent's, Grandparent's, or Legal Guardian's Signature (sign in ink) Subscribed and sworn or affirmed before me upon examination of the applicant (U.S. citizen parent)	Date of Signature (mm/dd/yyyy)
Date (mm/dd/yyyy) (Location) Interviewing USCIS Officer's Name Interviewing USCIS Officer	
Interviewing USCIS Officer's Signature (sign in ink)	Date of Signature (mm/dd/yyyy)
Part 13. USCIS Officer Report and Recommendation	
On the basis of the documents, records and the testimony of person examined, and the identification upon personal appearance of the underage beneficiary, I find that all the facts and conclusions set forth under oath in this application are: 1.	
C. Other I recommend that this Form N-600K be: Approved Denied Issue Certificate of Citizenship in the Name of Family Name (Last Name) Given Name (First Name) Middle Name	
USCIS Officer's Printed Name USCIS Officer's Title	
USCIS Officer's Signature (sign in ink) Da	ate of Signature (mm/dd/yyyy)
☐ I do ☐ do not concur with the USCIS officer's recommendation of the Form N-600K. USCIS Field Office Director's Signature (sign in ink) Date of the Form N-600K.	ate of Signature (mm/dd/yyyy)

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