

U. S. Department of State BUREAU OF CONSULAR AFFAIRS OMB NO. 1405-0178 EXPIRES: Estimated Burden - 15 minutes

REQUEST FOR DETERMINATION OF POSSIBLE LOSS OF UNITED STATES CITIZENSHIP

The following information is needed to determine your present citizenship status and possible loss of U.S. citizenship. You cannot lose U.S. citizenship unless you VOLUNTARILY perform an act designated by U.S. statute and do so with the intent to relinquish U.S. citizenship. You are advised to consult an attorney before completing this form. If you have any questions about the form, you should discuss them with a member of our consular staff before completing the form. You are requested to complete this form carefully. Use extra paper as needed and attach any supporting documents to this form.

PARTI							
1. Name (Last, First, MI)			2. Date of Birth	3. Place of Birth	3irth		
4. (a) Last U.S. Passport Number	(b)	Issued at (P			(c) Issued on ((Data)	
4. (a) Last U.S. Passport Number (b) Issue					(mm-dd-yyy)		
 5. If not born in the United States, did you acquire citizenship by birth outside the United States to U. S. citizen parent(s): Yes No; or Naturalization. (Naturalization petitions prior to 11/29/1990 were submitted to and adjudicated by a court. After that date they were);	
submitted to and adjudicated by INS/USCIS.) Yes No (a) Name of Naturalizing Court/Office (b) Date of Naturalization (<i>mm-dd-yyyy</i>)							
	ates and Countries of Resi Date (To) (mm-dd-yyyy)		ide the United States Si	ince Birth Country			
	Dute (10) (1111 22)))))						
6. When did you first become aware that	6. When did you first become aware that you might be a United States citizen (Give Approximate Date)?						
]	
 How did you find out that you are a citizen of the United States? (For example, did you always know you were a U.S. citizen? If not, when did you learn about your citizenship? Did someone tell you that you are a U.S. citizen?) 							
8. Are you a national or citizen of any c	other country other than th	he United St	ates?		Yes	No	
(a) If yes, of what country?							
(b) If yes, did you acquire that citize	enship in the foreign count	itry by:			_		
(i) Birth?					Yes	No No	
(ii) Marriage?					Yes	No	
(iii) Naturalization or registration; if yes, please provide a date (mm-dd-yyyy)						No No	

(c) If other, explain.							
(d) If you checked YES to question 8 (B) part (iii) by what means, or in what kind of proceeding, were you naturalized as a citizen of a foreign state?							
9. Have you taken an oath or made an affirmation or other formal declaration of allegiance to a foreign state?	Yes No						
If yes, please provide a date (mm-dd-yyyy) and country							
(a) If you checked YES to question 8 or 9 or both, what was the nature of the oath you took? What were the wor the oath please attach it.	rds used? If you have a copy of						
10. Have you served in the armed forces of a foreign state?	Yes No						
(a) If so, what country?							
(b) In which branch of the armed forces did you serve?							
(c) Dates of Service (mm-dd-yyyy)							
(d) What ranks did you hold?							
(e) What was your highest rank?							
(f) What responsibilities did you have and what functions and activities were you engaged in?							
(g) Did you take an oath? If so, describe the oath.	Yes No						
 Have you accepted, served in, or performed the duties of any office, post or employment with the government o foreign state? 	f a Yes No						
(a) If yes, please provide dates of service, country and the job title							
(b) What were your duties and responsiblities for each of the foreign government jobs you held?							

(c)	Did you take an oath, affirmation, declaration or allegiance in connection with the job? If yes, describe the oath, affirmation, declaration or allegiance.	Yes	No					
	12. What ties did you have to the country where you performed the act or acts indicated in Questions 8-11? For example:							
(a)	Did you maintain a residence? If yes, please explain.	Yes	No					
(b)	Did you own property? If yes, please explain.	Yes	No					
(c)	Do you have family or social ties? If yes, please explain.	Yes	No					
(d)	Do you vote? If yes, please explain.	Yes	No					
(e)	What other ties did you have to the country where you performed the act or acts indicated in Questions 8-11?							
	/hat ties do you retain with the United States? For example: Do you maintain a residence? If yes, please explain.	Yes						
(u)								
(b)	Do you own property? If yes, please explain.	Yes	No					
(c)	Do you have family or social ties? If yes, please explain.	Yes	No					
(d)	Do you vote? If yes, please explain.	Yes	No					
(e)	Do you file U.S. income or other tax returns? If yes, please explain.	Yes	No					

(f	b) Do you maintain a profession, occupation, or license in the United States? If yes, please explain.	Yes	No		
(ç	g) Have you registered your children as citizens of the United States?	Yes	No		
14.	What passport do you use to travel to and from the United States?				
15.	What passport do you use to travel to and from other countries?				
16.	Have you renounced your U.S. nationality at a U.S. Consulate or Embassy? If yes, provide a date and place.	Yes	No		
17.	Describe in detail the circumstances under which you performed the act or acts indicated in Questions 8-16.				
18.	Did you perform the act or acts voluntarily?	Yes	No		
(a) If not, in what sense was your performance of the act or acts involuntary?				
(1	b) Did you perform the acts with the intent to relinquish U.S. citizenship? If so, please explain your answer.	Yes	No No		
19.	. Did you know that by performing the act described in Questions 8-18 you might lose U.S. citizenship? Please ex	blain your an	swer.		
20. Your answers on this form will become part of the official record in your case. Before signing this form, you are advised to consider consulting with an attorney, and to read over your answers to make certain that they are as complete and accurate as possible. If you would like to provide additional information you believe relevant to a determination of your citizenship status, and in particular to your intention or lack of intention to relinquish U.S. citizenship, you may attach separate sheets with that information.					
If your answer to each of the questions above is "No," please sign below before a Consular Officer at a U.S. Embassy or Consulate. If you answered "Yes", to one or more of questions 8-19 and your intent was completely VOLUNTARY, please continue with PART II.					
Subscribed and Sworn					
	[SEAL] Signature				
	Signature of Consular Officer				

Signature of Consular Officer

Date (mm-dd-yyyy)

PRIVACY ACT STATEMENT

AUTHORITIES: The information on this form is requested under the authority of 8 U.S.C. 1104, 1481, 1483, 1488, and 1501, and 22 U.S.C. 212. Although furnishing the information is voluntary, applicants may not be eligible for a U.S. passport or for relinquishment or renunciation of U.S. nationality if they do not provide the required information.

PURPOSE: The principal purpose of gathering this information is to determine if the individual performed a potentially expatriating act as defined in 8 U.S.C. 1481 voluntarily and with the intention of relinquishing U.S. nationality.

ROUTINE USES: The information solicited on this form may be made available to foreign government agencies to fulfill passport control and immigration duties, to investigate or prosecute violations of law, or when a request for information is made pursuant to customary international practice. In the event a finding of loss of nationality is made, the information solicited on this form may be made available to other federal entities with law enforcement responsibilities relating to or affected by nationality, including but not limited to the U.S. Citizenship and Immigration Service, the Internal Revenue Service, and the Federal Bureau of Investigation. The information provided also may be released to federal, state or local agencies for law enforcement, counter-terrorism and homeland security purposes; to Congress and courts within their sphere of jurisdiction; and to other federal agencies for certain personnel and records management matters.

PAPERWORK REDUCTION ACT (PRA) STATEMENT

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time required for searching existing data sources, gather the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: U.S. Department of State, A/ISS/DIR, 1800 G St. N.W., Washington, D.C. 20520.