N-300, Application to File Declaration of Intention Form Table of Change OMB RIN 1615-0078 03/15/2013

LOCATION	CURRENT VERSION	PROPOSED VERSION
Page 1	OMB No. 1615-0078	OMB No. 1615-0078 <mark>; Expires</mark>
OMB No.		01/31/2012
Page 1	START HERE – please type or	Print or type all your answers
	print in black ink.	fully and accurately in black ink.
		Write "N/A" if an item is not
		applicable. Write "None" if the
		answer is none. Failure to answer
		all of the questions may delay your Form N-300.
		NOTE: You must complete all
		portions of the form (four pages).
Page 1	A # (If any)	Your A-Number:
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		[move from the middle of the first
		page and place above the receipt
		box]
Page 1, For	Returned	[same as N-600K format]
USCIS Use Only	Resubmitted	
	Reloc Sent	Bar Code
	Relo Rec'd	[text box]
	Applicant Interviewed	Date Starra
	Receipt	Date Stamp [text box]
	Action Block	
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	To be Completed by	[text box]
	Attorney or Representative, if any	
		Action
	[text box]	[text box]
	Fill in box if G-28 is attached to	
	represent the applicant.	
	ATTY State License #	
Page 1, Part 1. Information	Information about you.	Part 1. Information About You
About You.	Family Name	1. Current Legal Name (do not
		<mark>provide a nickname)</mark>
	Given Name	
		Family Name (last name)

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[text box] [county [text box] [text box] [text box] [text box] [text box] [text box]		
[text box] State [text box] ZIP Code		
[text box] ZIP Code		

[Γ	
		8. Mailing Address
		<mark>C/O (in care of name)</mark> [text box]
		Street Number and Name [text box]
		Apartment Number [text box]
		<mark>City</mark> [text box]
		State [text box]
		ZIP Code [text box]
		<mark>9. Daytime Phone Number</mark> [text box]
		<mark>Work Phone Number (if any)</mark> [text box]
		Evening Phone Number [text box]
		<mark>Mobile Phone Number (if any)</mark> [text box]
		10. E-Mail Address (if any) [text box]
Page 1, Part 2. Processing	Part 2. Processing Information.	[Merge Part 2 into Part 1. and maintain heading of Information
Information.	Date you became a permanent resident (mm/dd/yyyy) [text box]	About You]
	Since you were admitted to the United States as a permanent resident, have you been absent for a period of six months or longer?	
Page 1, Part 3.	Part 3. Signature.	Part 2. Your Signature (USCIS

Signature	Read the information on penalties in the instructions before completing this section. You must be in the United State when you file this application. You must sign your name below and also sign your name in the appropriate places (Signature of Applicant on Pages 2 and 3) of this form.	<pre>will reject your Form N-300 if it is not signed.) Read the information on penalties in the instructions before completing this section. You must be in the United States when you file this application. You must sign your name below as well as in Part 4 and Part 5. **** Your Signature [text box]</pre>
Deve 1 Deve 4	Devit 4. Structure of monorm	Date (mm/dd/yyyy) [text box]
Page 1, Part 4. Signature of person preparing form, if other	Part 4. Signature of person preparing form, if other than above.	Part 3. Signature of <mark>Person Who</mark> Prepared This Form N-300 for <mark>You (if applicable)</mark>
than above.	I declare that I prepared this application at the request of the above person, and it is based on all information of which I have any knowledge	I declare under the penalty of perjury that I prepared this application at the request of the above person.
	Signature Date	Preparer's Printed Name [text box]
	Print Your Name Firm Name Firm Address	Preparer's Signature [text box]
	Telephone Number E-Mail Address (<i>If any</i>)	Date (<i>mm/dd/yyyy</i>) [text box]
		Preparer's Firm or Organization Name (<i>if applicable</i>) [text box]
		Preparer's Daytime Phone Number [text box]
		Preparer's Address Street Number and Name (<i>do not</i>

		provide a P.O. Box in this space) *** City [text box] County [text box] State [text box] ZIP Code [text box] Preparer's E-Mail Address [text box] Preparer's Fax Number [text box] .
Page 2	Original to be retained by USCIS – Duplicate to be given to:	Part 4. Declaration of Intent
		<mark>1. Current Legal Name (do not</mark>
	Family Name	provide a nickname)
	Given Name	Family Name (<i>last name</i>)
	Middle Name	[text box]
	Address – C/O	Given Name (<i>first name</i>) [text box]
	Street Number and Name	Middle Name (<i>if applicable</i>) [text box]
	Apt. #	
	City	2. U.S. Social Security Number (if any) [text box]
	State or Province	
	Country	<pre>3. Date of Birth (mm/dd/yyyy) [text box]</pre>
	Zip/Postal Code	4. Country of Birth
	Date of Birth (<i>mm/dd/yyyy</i>)	[text box] 5. Date You Became a Permanent
	Country of Birth	Resident (<i>mm/dd/yyyy</i>)

Country of Citizenship	[text box]
U.S. Social Security # (<i>If any</i>)	6. Country of Nationality [text box]
A# (If any)	7. Home Address
Telephone Number ()	Street Number Street Name (do not provide a P.O. Box in this space)
E-Mail Address (If any)	Apartment Number [text box]
I am over the age of 18 years, have been lawfully admitted to the United States as a permanent resident, and am now residing in	<mark>City</mark> [text box]
the United States pursuant to such admission.	County [text box]
Signature of Applicant	State [text box]
Signature of Authorizing Official	ZIP Code [text box]
	8. Mailing Address
Date	<mark>C/O (in care of name)</mark> [text box]
Date	Street Number and Name [text box]
	Apartment Number [text box]
	City [text box]
	State [text box]
	ZIP Code [text box]
	<mark>9. Daytime Phone Number</mark>

		[text box]
		<mark>Work Phone Number (if any)</mark> [text box]
		<mark>Evening Phone Number</mark> [text box]
		<mark>Mobile Phone Number (if any)</mark> [text box]
		10. E-Mail Address (if any) [text box]
		I am over the age of 18 years, have been admitted to the United States as a permanent resident, and am now residing in the United States based on such admission. ***
		Your Signature (USCIS will reject your Form N-300 if it is not signed.) [text box]
		<mark>Date (<i>mm/dd/yyyy</i>)</mark> [text box]
		USCIS Officer's Signature [text box]
		<mark>Date (<i>mm/dd/yyyy</i>)</mark> [text box]
Page 2, bottom of the page	Original Copy /Retained by USCIS	
Page 3	Original to be retained by USCIS	
	 Duplicate to be given to: 	
	Family Name	
	Given Name	
	Middle Name	

Address – C/O
Street Number and Name
Apt. #
City
State or Province
Country
Zip/Postal Code
Date of Birth (<i>mm/dd/yyyy</i>)
Country of Birth
Country of Citizenship
U.S. Social Security # (If any)
A# (If any)
Telephone Number ()
E-Mail Address (If any)
I am over the age of 18 years, have been lawfully admitted to the United States as a permanent resident, and am now residing in the United States pursuant to such admission. ***
Signature of Applicant
Signature of Authorizing Official
Date

	Date	
Page 3, bottom of	Duplicate Copy /Given to	Original Mailed to
the page	Applicant	Applicant/Copy to File