

**TABLE OF CHANGES – FORM**  
**Form N-25, Request for Verification of Naturalization**  
**OMB Number: 1615-0049**  
**11/14/2014**

**Reason for Revision:** The form is being revised in order to remove data fields from the form that requests information USCIS no longer provides to U.S. Federal Courts as part of naturalization proceedings.

Current Section and Page Number	Current Text	Proposed Text
<b>Page 1</b>	<p>[Information about Court Clerk’s Office]</p> <p>Date  File No.  Name of Applicant  Name of Subject  Approximate Date of Naturalization  Native of</p> <p>The person named above may have been naturalized in your court. If your records show that this person was naturalized, please fill in the blocks as completely as your records permit. If no naturalization record is found, write "No Record" above your signature. However, if a Declaration of Intention was filed, please fill in the lower block. If the subject's signature is available, please make one tracing on thin paper and return it with this report. The information is requested for the official use of U.S. Citizenship and Immigration Services (USCIS).</p> <p>Sincerely, [USCIS Employee]</p> <p>Name of Naturalized Person as Shown in Court Records  Date of Naturalization  Application Number  Certificate Number  Court (Title and Location)  Date and Place of Birth (or Age)  Former Allegiance  Place of Residence  Occupation  Date, Place, and Manner of Arrival in the United States  Marital Status  Name of Spouse  Names of Children, Dates and Places of Birth</p>	<p>[Information about Court Clerk’s Office]</p> <p>Date  [Deleted]  Applicant’s Name  [Deleted]  Approximate Date of Naturalization  Native <b>Country</b></p> <p>The person named above may have been naturalized in your court. If your records show that this person was naturalized, please fill in the blocks as completely as your records permit. If no naturalization record is found, <b>select the box for "No Record Found" above your signature.</b> If the subject's signature is available, please make <b>a copy</b> and return it with this request to <b>U.S. Citizenship and Immigration Services (USCIS)</b> located at: <b>[Fillable Field]</b>. The information is requested for the official use by <b>USCIS</b>.</p> <p>Sincerely, [USCIS Employee]  <b>Printed Name of USCIS Employee Executing This Request</b>  <b>Title of USCIS Employee Executing This Request</b></p> <p>Name of Naturalized Person as Shown in Court Records  Date of Naturalization  <b>Alien Registration Number (A-Number)</b>  Certificate Number  Court (Title and Location)  [Deleted]  <b>Country of Former Nationality</b>  [Deleted]  [Deleted]  [Deleted]  [Deleted]  [Deleted]  [Deleted]  [Deleted]  [Deleted]  [Deleted]  [Deleted]  [Deleted]</p>

	<p>Other Information Appearing in Record</p> <p>Declaration of Intention Filed (Date) Age or Date of Birth</p> <p>Signature and Title of Person Verifying Report Date</p>	<p>Other Information appearing in Record (for example, previous name, name change, date of birth) No Record Found</p> <p>[Deleted] [Deleted]</p> <p>Date of Signature (mm/dd/yyyy) Signature of Person Verifying This Request Title of Person Verifying This Request Printed Name of Person Verifying This Request</p>
<p><b>Page 2</b></p>	<p><b>Reporting Burden.</b></p> <p>A person is not required to respond to a collection of information unless it displays a currently valid OMB control number. This collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data</p>	<p><b>USCIS Privacy Act Statement</b></p> <p><b>AUTHORITIES:</b> The information requested on this request, and the associated evidence, is collected under the Immigration and Nationality Act, section 101.</p> <p><b>PURPOSE:</b> The primary purpose for providing the requested information on this request is to determine if the applicant has established eligibility for the immigration benefit for which he or she is filing. DHS will use the information you provide to grant or deny the immigration benefit the applicant seeks.</p> <p><b>DISCLOSURE:</b> The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision in the applicant's case or result in denial of the applicant's request.</p> <p><b>ROUTINE USES:</b> DHS may share the information you provide on this request with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-007 - Benefits Information System and DHS-USCIS-001 - Alien File, Index, and National File Tracking System of Records ] which you can find at <a href="http://www.dhs.gov/privacy">www.dhs.gov/privacy</a>. DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.</p> <p><b>Paperwork Reduction Act</b></p> <p>An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is</p>

	<p>sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2020. OMB No. 1615-0049. Do not mail your completed application to this address.</p>	<p>estimated at 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140. OMB No. 1615-0049. Do not mail your completed Form N-25 to this address.</p>
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