## TABLE OF CHANGES – FORM Form N-426, Request for Certification of Military or Naval Services OMB Number: 1615-0053 02/24/2015

**Reason for Revision:** FOD is requesting that the form instructions for Form N-426 follow the same format at the Form N-400 instructions. We are requesting that the instructions be in a full-page format, with standardized headings. This standardization is in accordance with the customer-friendly full-page format of the N-400 instructions.

FOD is also requesting clarifying verbiage in the form instructions. The Nebraska Service Center (NSC) reviews Form N-426 submitted by a military member, and issues a Request for Evidence (RFE) if the Form N-426 is incomplete. NSC has informed FOD that the main reason for issuing an RFE is when the Certifying Official either fails to select the boxes for honorable service or fails to complete the Certification section at the bottom. The revised instructions clarify this requirement. In addition, NSC rejects a number of forms that are certified by military recruiters, who are not authorized to act as certifiers. The revised instruction includes this prohibition.

Current Page Number and Section	Current Text	Proposed Text
Page 1, For USCIS Use Only	[Page 1] For USICS Use Only Date Returned: To: Initials:	[Delete] [Delete] [Delete] [Delete]
Page 1, Instructions	Comments: [Page 1]	[Delete] [Page 1]
	Persons who are serving or have served under specified conditions in the Armed Forces of the United States are granted certain exemptions from the general requirements for naturalization. To establish eligibility, the law requires the department with custody of the service record to certify whether the service member served honorably, and whether each separation from the service was under honorable conditions. Certification of the service member's military service listed on this form is required. <b>Submit this form with Form</b> <b>N-400, Application for Naturalization.</b> For further assistance, contact the Military Help Line, 1-877-CIS-4MIL (1-877-247-4645) or visit <u>www.uscis.gov/military</u> .	Persons who are serving or have served under specified conditions in the U.S. Armed Forces are granted certain exemptions from the general requirements for naturalization. To establish eligibility, the law requires the department with custody of the service record to certify whether the service member served honorably, and whether each separation from the service was under honorable conditions. USCIS requests certification of the service member's military service. Recruiters are <b>not</b> authorized to certify this request. Submit this request with Form N-400, Application for Naturalization. Instructions: Requestors must complete Parts 1 4. Certifying officials must complete Parts 5 8.
Page 1	[Page 1]	[Page 1]
	Alien Registration Number	<ul><li><b>Part 1. Information About You</b></li><li><b>1.</b> Alien Registration Number (A-Number) (if any)</li></ul>

	Military Service Number	<b>2.</b> Military Service Number
	Name Used During Military Service (Last, First, Middle)	<b>3.</b> Names Used During Military Service
		List all names you have used, including your maiden name (if any). If you need extra space to complete this section, use the space provided in <b>Part 9. Additional Information</b> .
		[2 spaces for names] Family Name (Last Name) Given Name (First Name) Middle Name
	U.S. Social Security Number Date of Birth Place of Birth <i>(Country and City)</i>	<ul> <li>4. U.S. Social Security Number (if any)</li> <li>5. USCIS ELIS Account Number (if any)</li> <li>6. Date of Birth (mm/dd/yyyy)</li> <li>7. Place of Birth (city and country)</li> </ul>
	Present Address:	8. Physical Address Street Number and Name Apt. Ste. Flr. Number City or Town State Zip Code Province or Region <i>(foreign address only)</i> Postal Code Country
NEW	[Page 1]	[Page 1]
		Part 2. Enlistment Information
	<b>1.</b> Where did the applicant enlist (Country, State, and City where the applicant entered service)?	1. Where did you enlist? City *add data collection boxes* State Country
	<b>2.</b> Has the applicant reenlisted? Y/N	<b>2.</b> Have you reenlisted? Y/N
	<b>3.</b> Where did the applicant reenlist?	<b>3.</b> Where did you reenlist? City *add data collection boxes* State Country
Page 1,	[Page 1]	[Page 2]
Military Service	Military Service	<b>Part 3. Periods of Military Service</b> (To be completed by requestor)
	List all periods of service. (attach an additional sheet(s) if you need to provide more information.)	Provide all periods of service. If you need extra space to complete this section, use the space provided in <b>Part 9. Additional Information</b> .
	TO BE COMPLETED BY APPLICANT OR CERTIFYING OFFICIAL	[Delete]
	[Table with 5 columns]	[Table with 5 columns and 4 rows]
		Military Service

	Branch of Service	[No change]
	Date Service Began	Date Service Began (mm/dd/yyyy)
	Date Service Ended	Date Service Ended (mm/dd/yyyy)
	Type of Service (includes all active, reserve, and National Guard Service)	<b>Type of Service (include all</b> active, reserve, and National Guard Service)
	[ ] Active Duty [ ] Selected Reserve of the Ready Reserve*	
		[Row 2: <b>Military Service</b> 1/Blank/Blank/Blank/ [] Active Duty/[] Selected Reserve of the Ready Reserve*]
		[Row 3: <b>Military Service</b> <b>2</b> /Blank/Blank/Blank/ [] Active Duty/[] Selected Reserve of the Ready Reserve*]
		[Row 4: <b>Military Service</b> <b>3</b> /Blank/Blank/Blank/ [] Active Duty/[] Selected Reserve of the Ready Reserve*]
	* Selected Reserve of the Ready Reserve Members: (1) participate in at least 48 scheduled drills or training periods during each year and serve on active duty for training at least 14 days a year; or (2) participate in training at encampments, maneuvers, outdoor target practice, or other exercises at least 15 days each year. (10 U.S.C. 10143)	* Selected Reserve of the Ready Reserve Members: (1) participate in at least 48 scheduled drills or training periods during each year and serve on active duty for training at least 14 days a year or (2) participate in training at encampments, maneuvers, outdoor target practice, or other exercises at least 15 days each year. (10 U.S.C. 10143)
NEW	[Page 1]	[Page 2]
And		Part 4. Requestor's Contact Information, Certification, and Signature
Page 1		Requestor's Contact Information [Sub-header]
	Phone Numbers(s):	<ol> <li>Requestor's Daytime Telephone Number</li> <li>Requestor's Mobile Telephone Number (if</li> </ol>
	E-Mail Address(es):	any) <b>3.</b> Requestor's Email Address (if any)
		Requestor's Certification [Sub-header]
		I authorize release of information contained in this request, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.
		I certify, under penalty of perjury, that the information in my request and any document submitted with my request were provided by me and are complete, true, and correct.
		Requestor's Signature [Sub-header]

		<b>4.</b> Requestor's Signature Date of Signature (mm/dd/yyyy)
		<b>NOTE TO ALL REQUESTORS: USCIS</b> may deny your request if you do not completely fill out this request or fail to submit required documents listed in the instructions.
	Date of Request	
Page 1,	[Page 1]	[Page 3]
TO BE COMPLETED BY CERTIFYING OFFICIAL	TO BE COMPLETED BY CERTIFYING OFFICIAL	<b>Part 5. Character of Service</b> (To be completed by Certifying Official)
	Applicant served honorably or is currently serving honorably?	State whether the requestor served honorably or is currently serving honorably for each period of military service the requestor served (refer to <b>Part 3. Periods of Military Service</b> ). If you answer "No," provide details in <b>Part 7.</b> <b>Remarks</b> .
	Yes/No (give details in Remarks)	<b>1.</b> Honorable Period of Military Service 1 Yes/No
	Yes/No (give details in Remarks)	<b>2.</b> Honorable Period of Military Service 2 Yes/No
	Yes/No (give details in Remarks)	<b>3.</b> Honorable Period of Military Service 3 Yes/No
	Where did the Applicant enlist (Country, State, and City where the applicant entered service)?	[Delete]
	Where did the Applicant enlist (Country, State, and City where the applicant entered service)?	[Delete]
	Where did the applicant reenlist?	[Delete]
Page 1,	[Page 1]	[Page 3]
Separation Information	Separation Information	Part 6. Separation Information
	Is the applicant separated? Y/N	<b>1.</b> Is the requestor separated? Y/N
	If separated, select discharge type: Honorable/Other (give details in Remarks section)	<ul> <li>2. If separated, select discharge type: Honorable/Other (provide details in Part 7. Remarks)</li> </ul>
	Was the applicant discharged on account of alienage? If you answer "Yes," provide details in the Remarks section. Y/N	<b>3.</b> Was the requestor discharged on account of alienage? If you answer "Yes," provide details in <b>Part 7. Remarks.</b> Y/N
Page 1,	[Page 1]	[Page 3]
Remarks	Remarks	Part 7. Remarks
	Use for continuation of any of the above items. You should also list in the space below any <b>derogatory information</b> in your records relating to the service member's character,	Provide any derogatory information in your records relating to the service member's character, loyalty to the United States, disciplinary action, convictions, other than

	loyalty to the United States, disciplinary action, convictions, or other matters concerning his or her fitness for citizenship. <b>(Use a blank sheet if more space is needed.)</b>	honorable discharges, or other matters concerning his or her fitness for citizenship. If you need extra space to complete this section, use the space provided in <b>Part 9. Additional</b> <b>Information</b> .
Page 1,	[Page 1]	[Page 3]
Certification	Certification TO BE COMPLETED BY CERTIFYING OFFICIAL	<b>Part 8. Certification</b> (To be completed by Certifying Official)
	I am authorized to certify that the information given here concerning the service of the person named on this form is correct according to the records of the	I am authorized to certify that the information given here concerning the service of the person named on this request is correct according to the records of the
	Name of Department	Name of Department
	Official Signature	[No change]
	Name and Title	[No change]
	Phone Number and E-Mail Address	Daytime Telephone Number
		Email Address (if any)
	[SEAL, <i>if available</i> ] (No State-issued notary Public seals accepted.)	Seal, if available (No state-issued notary public seals accepted.)
	Date,	Date
NEW		[Page 4]
		Part 9. Additional Information
		If you need extra space to provide any additional information within this request, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this request or attach a separate sheet of paper. Include your name and A-Number (if any) at the top of each sheet; indicate the <b>Page Number</b> , <b>Part</b> <b>Number</b> , and <b>Item Number</b> to which your answer refers; and sign and date each sheet.
		<ol> <li>Family Name (Last Name) [Auto-populated field]</li> <li>Given Name (First Name) [Auto-populated field]</li> <li>Middle Name [Auto-populated field]</li> </ol>
		<b>2.</b> A-Number (if any) [Auto-populated field]
		<b>3.A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b>

	<b>4.A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b>
	<b>5.A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b>
	<b>6.A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b>
	7. Requestor's Signature Date of Signature (mm/dd/yyyy)