

## **Application for Naturalization**

## **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form N-400 OMB No. 1615-0052 Expires 03/31/2019

For		<b>Date Stamp</b>	Rec	eipt		Action Block			
USC									
Use Only									
Rema	ırks								
► START HERE - Type or print in black ink. Type or print "N/A" if an item is not applicable or the answer is none, unless									
otherwise indicated. Failure to answer all of the questions may delay U.S. Citizenship and Immigration Services (USCIS) processing your Form N-400. <b>NOTE: You must complete Parts 1 15.</b>									
			ve mother or father is a U.						
			J.S. citizen. Before you co			he USCIS Website at plication for Certificate of			
			Application for Citizenship						
	_					t 6. Information About Your			
		• •	n. If you answer "No," the	•	•				
		<b>Formation Abo</b> O may be delayed	ut Your Eligibility (Sed)	Select only one box or	your Ent	er Your 9 Digit A-Number: A-			
1.	You are	at least 18 years of	f age and:						
	A.	•	ful permanent resident of	the United States for at lea	ast 5 years.				
	В. 🗌	and living with t	-	se for the last 3 years, and	•	ddition, you have been married to s been a U.S. citizen for the last			
	С.	•	•		spouse of a U.S	S. citizen and your U.S. citizen			
		1 0			_	and Nationality Act (INA) section			
			residential address is outs fice from the list below wh			der Section 319(b), select the			
				1010 3 00 11 0010 10110 10 1101					
	D.	Are applying on	the basis of qualifying mi	litary service					
	в.	Other (Explain):		inary service.					
•	L	Other (Explain).							
D4	1 1	·	4 <b>V</b> (D	: f1:1:1:1					
Part	2. Ini	ormation Abo	ut You (Person apply	ing for naturalization)					
1.	Your Cu	rrent Legal Name	(do not provide a nicknan	ne)					
	Family N	Name (Last Name)		Given Name (First Name	)	Middle Name (if applicable)			
2.	Your Na	me Exactly As It	Appears on Your Permane	nt Resident Card (if applic	able)				
	Family N	Name (Last Name)		Given Name (First Name	)	Middle Name (if applicable)			
		. ,							

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Pa	rt 2. Information About You (Person applying for naturalization) (continued) A-
3.	Other Names You Have Used Since Birth (include nicknames, aliases, and maiden name, if applicable)
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
4.	Name Change (Optional)
	Read the Form N-400 Instructions before you decide whether or not you would like to legally change your name.
	Would you like to legally change your name?    Yes No
	If you answered "Yes," type or print the new name you would like to use in the spaces provided below.
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
5.	U.S. Social Security Number (if applicable) 6. USCIS Online Account Number (if any)
7.	Gender 8. Date of Birth 9. Date You Became a Lawful
	Male Female (mm/dd/yyyy) Permanent Resident (mm/dd/yyyy)
10.	Country of Birth 11. Country of Citizenship or Nationality
12.	Do you have a physical or developmental disability or mental impairment that prevents you from demonstrating your knowledge and understanding of the English language and/or civics requirements for naturalization?
	If you answered "Yes," submit a completed Form N-648, Medical Certification for Disability Exceptions, when you file your Form N-400.
13.	Exemptions from the English Language Test
	A. Are you <b>50</b> years of age or older <b>and</b> have you lived in the United States as a lawful permanent resident for periods totaling at least <b>20</b> years at the time you file your Form N-400?
	<b>B.</b> Are you <b>55</b> years of age or older <b>and</b> have you lived in the United States as a lawful permanent resident for periods totaling at least <b>15</b> years at the time you file your Form N-400?
	C. Are you 65 years of age or older <b>and</b> have you lived in the United States as a lawful permanent resident for periods totaling at least 20 years at the time you file your Form N-400? (If you meet this requirement, you will also be given a simplified version of the civics test.)
Pa	rt 3. Accommodations for Individuals With Disabilities and/or Impairments
NO	<b>TE:</b> Read the information in the Form N-400 Instructions before completing this part.
1.	Are you requesting an accommodation because of your disabilities and/or impairments?  Yes No
	If you answered "Yes," select any applicable box.
	A.   I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).)
	B.

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		Accommodations for Individements (continued)	uals With Disabilities and/or	A-				
	C.		y and/or impairment (for example, use and the accommodation you are requesting	wheelchair). (Describe the nature of your g.)				
Pa	rt 4.	<b>Information to Contact You</b>						
1.	Day	Daytime Telephone Number 2. Work Telephone Number (if any)						
			201/					
3.	Eve	ning Telephone Number	4. Mobile Teleph	none Number (if any)				
5.	Ema	ail Address (if any)						
Pa	rt 5.	Information About Your Res	sidence					
1.		•	years? Provide your most recent reside ou need extra space, use additional sheet	nce and then list every location where you s of paper.				
	A.	Current Physical Address						
		Street Number and Name	$D_{IJ}$	Apt. Ste. Flr. Number				
			RIHA					
		City or Town	County	State ZIP Code + 4				
		Province or Region		intry				
		(foreign address only)	(foreign address only) (for	eign address only)				
		F ( (11/ )						
		Dates of Residence From (mm/dd/yyyy)	To (mm/dd/yyyy)					
		Residence						
	B.	Current Mailing Address (if different	from the address above)					
		In Care Of Name (if any)						
		Street Number and Name		Apt. Ste. Flr. Number				
		City or Town	County	State ZIP Code + 4				
		Province or Region		intry				
		(foreign address only)	(foreign address only) (for	eign address only)				

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Part	5. Informat	ion About Your Re	sidence (continued)	A-			
(	C. Physical Ad	dress 2					
	Street Numb	per and Name			Apt. S	Ste. Flr.	Number
	City or Tow	n	County	State		ZIP Co	de + 4
	Province or (foreign add		Postal Code (foreign address only)	Country (foreign address only	)		
	Dates of Residence	From (mm/dd/yyyy)	To (mm/dd/yyyy)	6			
Ι	Street Numb	dress 3 per and Name	Г		Apt. S	Ste. Flr.	Number
	City or Tow	n	County	State		ZIP Co	de + 4
	Province or (foreign add		Postal Code (foreign address only)	Country (foreign address only	)		
	Dates of Residence	From (mm/dd/yyyy)	To (mm/dd/yyyy)				
I	Street Numb	dress 4 per and Name			Apt. S	Ste. Flr.	Number
	City or Tow	n	County	State		ZIP Co	de + 4
	Province or (foreign add	_	Postal Code (foreign address only)	Country (foreign address only	)	J [	
	Dates of Residence	From (mm/dd/yyyy)	To (mm/dd/yyyy)	]			'
Part	6. Informat	ion About Your Pa	rents				
			tes citizen, then skip this part	and go to Part 7.			
1. V	Vere your paren	ts married before your 18	8th birthday?			Y	es No
Infor	mation Abou	ıt Your Mother					
<b>2.</b> I	s your mother a	U.S. citizen?				Y	es No
I	f you answered	"Yes," complete the follo	owing information. If you answ	vered "No," go to <b>Item Nu</b>	mber 3.		

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A. Current Legal Name of U.S. Citizen Mother  Family Name (Last Name)  B. Mother's Country of Birth  C. Mother's Date of Birth (mm/dd/yyyy)  D. Date Mother Became a U.S. Citizen (if any)  A-  Information About Your Father  3. Is your father a U.S. citizen?  If you answered "Yes," complete the information below. If you answered "No," go to Part 7.  A. Current Legal Name of U.S. Citizen Father	] No
B. Mother's Country of Birth  C. Mother's Date of Birth (mm/dd/yyyy)  D. Date Mother Became a U.S. Citizen (if known) (mm/dd/yyyy)  A-  Information About Your Father  3. Is your father a U.S. citizen?  If you answered "Yes," complete the information below. If you answered "No," go to Part 7.	
D. Date Mother Became a U.S. Citizen (if known) (mm/dd/yyyy) (if any)  Information About Your Father  3. Is your father a U.S. citizen? Yes [Yes," complete the information below. If you answered "No," go to Part 7.	] No
D. Date Mother Became a U.S. Citizen (if known) (mm/dd/yyyy) (if any)  Information About Your Father  3. Is your father a U.S. citizen? Yes [Yes," complete the information below. If you answered "No," go to Part 7.	] No
(if known) (mm/dd/yyyy) (if any)  Information About Your Father  3. Is your father a U.S. citizen? Yes [  If you answered "Yes," complete the information below. If you answered "No," go to Part 7.	] No
(if known) (mm/dd/yyyy) (if any)  Information About Your Father  3. Is your father a U.S. citizen? Yes [  If you answered "Yes," complete the information below. If you answered "No," go to Part 7.	] No
Information About Your Father  3. Is your father a U.S. citizen? Yes [  If you answered "Yes," complete the information below. If you answered "No," go to Part 7.	] No
3. Is your father a U.S. citizen?  If you answered "Yes," complete the information below. If you answered "No," go to Part 7.	] No
3. Is your father a U.S. citizen?  If you answered "Yes," complete the information below. If you answered "No," go to Part 7.	] No
If you answered "Yes," complete the information below. If you answered "No," go to <b>Part 7.</b>	] No
A. Current Legal Name of U.S. Citizen Father	
Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)	
B. Father's Country of Birth  C. Father's Date of Birth (mm/dd/yyyy)	
<b>D.</b> Date Father Became a U.S. Citizen <b>E.</b> Father's A-Number	
(if known) (mm/dd/yyyy) (if any)	
► A-	
Part 7. Biographic Information	
<b>NOTE:</b> USCIS requires you to complete the categories below to conduct background checks. (See the Form N-400 Instruction more information.)	for
1. Ethnicity (Select only one box)	
Hispanic or Latino Not Hispanic or Latino	
2. Race (Select all applicable boxes)	
☐ White       ☐ Asian       ☐ Black or       ☐ American Indian       ☐ Native Hawaiian or         African American       or Alaska Native       Other Pacific Islander	
3. Height Feet Inches 4. Weight Pounds	
5. Eye color (Select only one box)	
Black Blue Brown Gray Green Hazel Maroon Pink Unknown/	
6. Hair color (Select only one box)	
Bald Black Blond Brown Gray Red Sandy White Unknown (No hair)	

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Par	rt 8. Information Abou	tt Your Employment and Schools You Attended A-
perio empl unem	d. Include all military, police oyment, studies, or unemploy aployed, or have studied for the	ended school full time or part time during the last five years. Provide information for the complete time, and/or intelligence service. Begin by providing information about your most recent or current ment (if applicable). Provide the locations and dates where you worked, were self-employed, were the last five years. If you worked for yourself, type or print "self-employed." If you were unemployed, a need extra space, use additional sheets of paper.
1.	Employer or School Name	
	Street Number and Name	Apt. Ste. Flr. Number
	City or Town	State ZIP Code + 4
	City of Town	State ZH code 14
	Province or Region (foreign address only)	Postal Code Country (foreign address only) (foreign address only)
	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy) Your Occupation
	E 1 01 1N	
2.	Employer or School Name	
	Street Number and Name	Apt. Ste. Flr. Number
	City or Town	State ZIP Code + 4
	Province or Region (foreign address only)	Postal Code Country (foreign address only) (foreign address only)
	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy) Your Occupation
3.	Employer or School Name	
	Street Number and Name	Apt. Ste. Flr. Number
	City or Town	State ZIP Code + 4
	City of Town	State Zii Code 14
	Duration on Duration	Post 1 Co. 1
	Province or Region (foreign address only)	Postal Code Country (foreign address only) (foreign address only)
	<i>y y y y y y y y y y</i>	
	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy) Your Occupation
	Date From (mm/dd/yyyy)	
		] [] [

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Pa	rt 9.	Time Outside	the United States			A-			
1.	Hov	w many <b>total days</b>	(24 hours or longer)	lid you spend outsid	e the United States du	ring the last 5 yea	rs? days		
2.	Hov	w many trips of <b>24</b>	hours or longer have	you taken outside th	e United States during	g the last 5 years?	trips		
3.	List below all the trips of <b>24 hours or longer</b> that you have taken outside the United States during the last 5 years your most recent trip and work backwards. If you need extra space, use additional sheets of paper.								
	D	Date You Left the United States (mm/dd/yyyy) Date You Returned to the United States (mm/dd/yyyy)		Did Trip Last 6 Months or More?  Countrie Which Y		ich You	Total Days Outside the United States		
				☐ Yes ☐ No	1 /				
				☐ Yes ☐ No					
				☐ Yes ☐ No					
				☐ Yes ☐ No					
				Yes No					
				☐ Yes ☐ No					
				FA					
Pa	rt 1(	). Information	About Your Mar	ital History					
ι.	Wh	at is your current r	narital status?						
		Single, Never Mar	ried Married	Divorced W	idowed Separa	ted Marriage	e Annulled		
	If y	ou are single and h	nave <b>never</b> married, go	to <b>Part 11.</b>					
2.	If y	ou are married, is	your spouse a current n	nember of the U.S. at	rmed forces?		Yes No		
3.		w many times have riages to the same	e you been married (inc person)?	luding annulled mar	riages, marriages to or	ther people, and			
l.	If you are married now, provide the following information about your current spouse.								
	A.	Current Spouse's	Legal Name						
		Family Name (La	ast Name)	Given Nam	e (First Name)	Middle	Name (if applicable)		
	В.	Current Spouse's	Previous Legal Name			, ,			
		Family Name (La	ast Name)	Given Nam	e (First Name)	Middle	Name (if applicable)		
	C.	Other Names Use	ed by Current Spouse (i	nclude nicknames, a	liases, and maiden na	me, if applicable)			
		Family Name (La			e (First Name)		Name (if applicable)		
			,		,				
	D.	Current Spouse's (mm/dd/yyyy)		Date You Entered in with Current Spouse	_				
				-					

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Pa	art 10	0. Information About Your Marital History (continued)	<b>A-</b>							
	F.	Current Spouse's Present Home Address								
		Street Number and Name		Ap	t. S	Ste.	Flr.	Nu	mber	
					]					
		City or Town County Stat	e e			ZI	P Coo	le +	4	
								-		
		Province or Region Postal Code Country						_		
		(foreign address only) (foreign address only) (foreign address only)	only	)						
	G.	Current Spouse's Current Employer or Company								
		2010								
5.	•	your current spouse a U.S. citizen?					Y	es	No	
	If y	ou answered "Yes," answer <b>Item Number 6.</b> If you answered "No," go to <b>Item Number 7.</b>	•							
6.	•	our current spouse is a U.S. citizen, complete the following information.								
	A.	7								
		At Birth - Go to <b>Item Number 8.</b> Other - Complete the following information	n.							
	В.	a U.S. Citizen (mm/dd/yyyy)								
7.	If y	rour current spouse is not a U.S. citizen, complete the following information.								
	Α.	Current Spouse's Country of Citizenship or Nationality B. Current Spouse's A-Number	r (if	any)	)					
		► A-								
	C.	Current Spouse's Immigration Status								
		Lawful Permanent Resident Other (Explain):								
8.	Ho	w many times has your current spouse been married (including annulled marriages, marriage	es to	)						
		er people, and marriages to the same person)? If your current spouse has been married before	re,							
	-	vide the following information about your current spouse's prior spouse.	1.11	,			c			
	-	our current spouse has had more than one previous marriage, provide that information on ad	laiti(	onai	sne	ets o	f pape	er.		
	Α.	Legal Name of My Current Spouse's Prior Spouse	ve i	11 . N	T		1	1. 1	. `	
		Family Name (Last Name) Given Name (First Name)  N	VIIac	ne N	ame	e (11	applic	cable	e)	
	D	Immigration Status of Mr. Cumont Spaces Drive Spaces (if Impare)								
	ъ.	Immigration Status of My Current Spouse's Prior Spouse (if known)  U.S. Citizen								
	C.	Date of Birth of My Current Spouse's <b>D.</b> Country of Birth of My Current Spouse's								
		Prior Spouse (mm/dd/yyyy) Prior Spouse		7						
	E.	Country of Citizenship or Nationality of My Current Spouse's Prior Spouse								
		Spouse 3 Filor Spouse								

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Pai	rt 10	A-  Information About Your Marital History (continued)  A-					
	F.	My Current Spouse's Date of Marriage with Prior Spouse (mm/dd/yyyy)  G. Date My Current Spouse's Marriage Ended with Prior Spouse (mm/dd/yyyy)  with Prior Spouse (mm/dd/yyyy)					
	Н.	How My Current Spouse's Marriage Ended with Prior Spouse					
		Annulled Divorced Spouse Deceased Other (Explain):					
9.	•	ou were married before, provide the following information about your prior spouse. If you have more than one previous riage, provide that information on additional sheets of paper.					
	A.	My Prior Spouse's Legal Name					
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
	В.	My Prior Spouse's Immigration Status When My Marriage Ended (if known)					
		U.S. Citizen Lawful Permanent Resident Other (Explain):					
	C. My Prior Spouse's Date of Birth (mm/dd/yyyy)  D. My Prior Spouse's Country of Birth						
	E.	My Prior Spouse's Country of Citizenship or Nationality  F. Date of Marriage with My Prior Spouse (mm/dd/yyyy)					
	G.	Date Marriage Ended with My Prior Spouse (mm/dd/yyyy)					
	н.	How Marriage Ended with My Prior Spouse					
		Annulled Divorced Spouse Deceased Other (Explain):					
Par	rt 11	. Information About Your Children					
1.	Indicate your total number of children. (You must indicate <b>ALL</b> children, including: children who are alive, missing, or deceased; children born in the United States or in other countries; children under 18 years of age or older; children who are currently married or unmarried; children living with you or elsewhere; current stepchildren; legally adopted children; <b>and</b> children born when you were not married.)						
2.		vide the following information about all your children (sons and daughters) listed in <b>Item Number 1.</b> , regardless of age. list any additional children, use additional sheets of paper.					
	A.	Child 1					
		Current Legal Name					
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)					
		A-Number (if any)  Date of Birth (mm/dd/yyyy)  Country of Birth					
		► A-					

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Part 1	l. Information About Your Cl	hildren (continued)	A-	
	Current Address			
	Street Number and Name			Apt. Ste. Flr. Number
	City or Town	County	State	ZIP Code + 4
				-
	Province or Region	Postal Code	Country	
	(foreign address only)	(foreign address only)	(foreign address only	y)
	What is your child's relationship to yo stepchild, legally adopted child)	ou? (for example, biological child,		
В.	Child 2			
	Current Legal Name			
	Family Name (Last Name)	Given Name (First Nar	ne) <u>M</u>	Middle Name (if applicable)
		$H \square \square$		
	A-Number (if any)	Date of Birth (mm/dd/yyyy)	Country of Birth	
	► A-			
	Current Address			
	Street Number and Name	$D_{11}$		Apt. Ste. Flr. Number
		KIIIE		
	City or Town	County	State	ZIP Code + 4
				-
	Province or Region	Postal Code	Country	
	(foreign address only)	(foreign address only)	(foreign address only	<u>y)</u>
	What is your child's relationship to yo stepchild, legally adopted child)	ou? (for example, biological child,		
C.	Child 3			
	Current Legal Name			
	Family Name (Last Name)	Given Name (First Nar	ne) N	Middle Name (if applicable)
	A-Number (if any)	Date of Birth (mm/dd/yyyy)	Country of Birth	
	► A-			

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Part	11. Information About Your Children (continued)  A-							
	Current Address							
	Street Number and Name Apt. Ste. Flr. Number							
	City or Town County State	ZIP Code + 4						
		]-						
	Province or Region Postal Code Country							
	(foreign address only) (foreign address only) (foreign address only)							
	001/							
	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)							
I	D. Child 4							
	Current Legal Name							
	Family Name (Last Name) Given Name (First Name) Middle N	Jame (if applicable)						
	A-Number (if any)  Date of Birth (mm/dd/yyyy) Country of Birth							
	► A-							
	Current Address							
	Street Number and Name Apt.	Ste. Flr. Number						
	RIII(-							
	City or Town County State	ZIP Code + 4						
		] -						
	Province or Region Postal Code Country							
	(foreign address only) (foreign address only) (foreign address only)							
	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)							
	stepenna, regard adopted childy							
Part	12. Additional Information About You (Person Applying for Naturalization)							
	r <b>Item Numbers 1 21.</b> If you answer "Yes" to any of these questions, include a typed or printed explan of paper.	ation on additional						
<b>1.</b> I	Have you <b>EVER</b> claimed to be a U.S. citizen (in writing or any other way)?	Yes No						
2. I	Have you <b>EVER</b> registered to vote in any Federal, state, or local election in the United States?	Yes No						
3. I	Have you <b>EVER</b> voted in any Federal, state, or local election in the United States?	Yes No						
<b>4.</b> A	• Do you now have, or did you <b>EVER</b> have, a hereditary title or an order of nobility in any foreign country?	Yes No						
I	If you answered "Yes," are you willing to give up any inherited titles or orders of nobility that you have in a foreign country at your naturalization ceremony?	Yes No						
5. I	Have you <b>EVER</b> been declared legally incompetent or been confined to a mental institution?	Yes No						

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		2. Additional Information About You lization) (continued)	ou (Person Applying for	A-		
6.	Do	you owe any overdue Federal, state, or local t	taxes?		Yes No	
7.	A.	Have you <b>EVER</b> not filed a Federal, state, o resident?	r local tax return since you became a lawful pe	ermanent [	Yes No	
	B.	If you answered "Yes," did you consider you	urself to be a "non-U.S. resident"?		Yes No	
8.		we you called yourself a "non-U.S. resident" of ful permanent resident?	n a Federal, state, or local tax return since you	became a	Yes No	
9.	A. Have you <b>EVER</b> been a member of, involved in, or in any way associated with, any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world?					
	В.	If you answered "Yes," provide the informat additional sheets of paper and provide any ev	ion below. If you need extra space, attach the vidence to support your answers.	names of the oth	er groups on	
				Membership		
		of the	of the	From	To	
		Group	Group	(mm/dd/yyyy)	(mm/dd/yyyy)	
			Rule			
		_				
10.	Ha	we you <b>EVER</b> been a member of, or in any wa	ay associated (either directly or indirectly) with	1:		
	A.	The Communist Party?	•		Yes No	
	B.	Any other totalitarian party?			Yes No	
	C.	A terrorist organization?			Yes No	
11.		we you <b>EVER</b> advocated (either directly or inclence?	directly) the overthrow of any government by	force or	Yes No	
12.		we you <b>EVER</b> persecuted (either directly or in gin, membership in a particular social group, or	adirectly) any person because of race, religion, or political opinion?	national [	Yes No	
13.		ween March 23, 1933 and May 8, 1945, did y irectly) with:	ou work for or associate in any way (either dir	rectly or		
	A.	The Nazi government of Germany?			Yes No	
	В.	Any government in any area occupied by, all government of Germany?	lied with, or established with the help of the N	azi [	Yes No	
	C.	• •	amilitary unit, self-defense unit, vigilante unit, termination camp, concentration camp, prisone	_	Yes No	

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		A-dditional Information About You (Person Applying for lization) (continued)			
14.	We	re you <b>EVER</b> involved in any way with any of the following:			
	A.	Genocide?		Yes	No
	В.	Torture?		Yes	No
	C.	Killing, or trying to kill, someone?		Yes	No
	D.	Badly hurting, or trying to hurt, a person on purpose?		Yes	No
	E.	Forcing, or trying to force, someone to have any kind of sexual contact or relations?		Yes	No
	F.	Not letting someone practice his or her religion?		Yes	No
15.		re you <b>EVER</b> a member of, or did you <b>EVER</b> serve in, help, or otherwise participate in, any of owing groups:	the		
	A.	Military unit?		Yes	No
	В.	Paramilitary unit (a group of people who act like a military group but are not part of the official military)?	.1	Yes	No
	C.	Police unit?		Yes	No
	D.	Self-defense unit?		Yes	No
	E.	Vigilante unit (a group of people who act like the police, but are not part of the official police)	?	Yes	No
	F.	Rebel group?		Yes	No
	G.	Guerrilla group (a group of people who use weapons against or otherwise physically attack the military, police, government, or other people)?	:	Yes	No
	H.	Militia (an army of people, not part of the official military)?		Yes	No
	I.	Insurgent organization (a group that uses weapons and fights against a government)?		Yes	No
16.	We	re you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the fo	ollowing:		
	A.	Prison or jail?		Yes	No
	B.	Prison camp?		Yes	No
	C.	Detention facility (a place where people are forced to stay)?		Yes	No
	D.	Labor camp (a place where people are forced to work)?		Yes	No
	E.	Any other place where people were forced to stay?		Yes	No
17.		are you <b>EVER</b> a part of any group, or did you <b>EVER</b> help any group, unit, or organization that unapon against any person, or threatened to do so?	ised a	Yes	No
	A.	If you answered "Yes," when you were part of this group, or when you helped this group, did y use a weapon against another person?	ou ever	Yes	No
	В.	If you answered "Yes," when you were part of this group, or when you helped this group, did y tell another person that you would use a weapon against that person?	ou ever	Yes	No
18.		I you <b>EVER</b> sell, give, or provide weapons to any person, or help another person sell, give, or papons to any person?	rovide	Yes	No
	A.	If you answered "Yes," did you know that this person was going to use the weapons against an person?	other	Yes	No
	В.	If you answered "Yes," did you know that this person was going to sell or give the weapons to someone who was going to use them against another person?		Yes	No

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	rt 12. Additional Information About You (Person Applying for turalization) (continued)					
19.	Did you <b>EVER</b> receive any type of military, paramilitary (a group of people who act like a military group but are not part of the official military), or weapons training?	Yes No				
20.	Did you <b>EVER</b> recruit (ask), enlist (sign up), conscript (require), or use any person under 15 years of age to serve in or help an armed force or group?	Yes No				
21.	Did you <b>EVER</b> use any person under 15 years of age to do anything that helped or supported people in combat?	Yes No				
othe	ny of Item Numbers 22 28. apply to you, you must answer "Yes" even if your records have been sealed rwise cleared. You must disclose this information even if someone, including a judge, law enforcement office that it no longer constitutes a record or told you that you do not have to disclose the information.					
22.	Have you <b>EVER</b> committed, assisted in committing, or attempted to commit, a crime or offense for which you were <b>NOT</b> arrested?	Yes No				
23.	Have you <b>EVER</b> been arrested, cited, or detained by any law enforcement officer (including any immigration official or any official of the U.S. armed forces) for any reason?	Yes No				
24.	Have you <b>EVER</b> been charged with committing, attempting to commit, or assisting in committing a crime or offense?	Yes No				
25.	Have you <b>EVER</b> been convicted of a crime or offense?	Yes No				
26.	Have you <b>EVER</b> been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)?	Yes No				
27.	<b>A.</b> Have you <b>EVER</b> received a suspended sentence, been placed on probation, or been paroled?	Yes No				
	<b>B.</b> If you answered "Yes," have you completed the probation or parole?	Yes No				
28.	A. Have you EVER been in jail or prison?	Yes No				
	B. If you answered "Yes," how long were you in jail or prison? Years Months	Days				
29.	If you answered "No" to ALL questions in Item Numbers 23 28., then skip this item and go to Item Num	ber 30.				
	If you answered "Yes" to any question in <b>Item Numbers 23 28.</b> , then complete this table. If you need extra space, use additional sheets of paper and provide any evidence to support your answers.					

Why were you arrested, cited, detained, or charged?	Date arrested, cited, detained, or charged. (mm/dd/yyyy)	Where were you arrested, cited, detained, or charged? (City or Town, State, Country)	Outcome or disposition of the arrest, citation, detention, or charge (no charges filed, charges dismissed, jail, probation, etc.)

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	rt 12. Additional Information About You (Person Applying for turalization) (continued)				
	wer <b>Item Numbers 30 46.</b> If you answer "Yes" to any of these questions, except <b>Item Numbers 37.</b> and seed explanation on additional sheets of paper and provide any evidence to support your answers.	<b>38</b> ., incl	ude a	typeo	d or
30.	Have you <b>EVER</b> :				
	A. Been a habitual drunkard?		Yes		No
	<b>B.</b> Been a prostitute, or procured anyone for prostitution?		Yes		No
	C. Sold or smuggled controlled substances, illegal drugs, or narcotics?		Yes		No
	<b>D.</b> Been married to more than one person at the same time?		Yes		No
	E. Married someone in order to obtain an immigration benefit?		Yes		No
	F. Helped anyone to enter, or try to enter, the United States illegally?		Yes		No
	<b>G.</b> Gambled illegally or received income from illegal gambling?		Yes		No
	<b>H.</b> Failed to support your dependents or to pay alimony?		Yes		No
	I. Made any misrepresentation to obtain any public benefit in the United States?		Yes		No
31.	Have you <b>EVER</b> given any U.S. Government officials <b>any</b> information or documentation that was false, fraudulent, or misleading?		Yes		No
32.	Have you <b>EVER</b> lied to any U.S. Government officials to gain entry or admission into the United States of to gain immigration benefits while in the United States?	r 🗌	Yes		No
33.	Have you <b>EVER</b> been removed, excluded, or deported from the United States?		Yes		No
34.	Have you EVER been ordered removed, excluded, or deported from the United States?		Yes		No
35.	Have you <b>EVER</b> been placed in removal, exclusion, rescission, or deportation proceedings?		Yes		No
36.	Are removal, exclusion, rescission, or deportation proceedings (including administratively closed proceedings) <b>currently</b> pending against you?		Yes		No
37.	Have you <b>EVER</b> served in the U.S. armed forces?		Yes		No
38.	<b>A.</b> Are you <b>currently</b> a member of the U.S. armed forces?		Yes		No
	<b>B.</b> If you answered "Yes," are you scheduled to deploy overseas, including to a vessel, within the next three months? (Refer to the <b>Address Change</b> section in the Instructions on how to notify USCIS if you learn of your deployment plans after you file your Form N-400.)		Yes		No
	C. If you answered "Yes," are you currently stationed overseas?		Yes		No
39.	Have you <b>EVER</b> been court-martialed, administratively separated, or disciplined, or have you received an other than honorable discharge, while in the U.S. armed forces?		Yes		No
40.	Have you <b>EVER</b> been discharged from training or service in the U.S. armed forces because you were an alien?		Yes		No
41.	Have you <b>EVER</b> left the United States to avoid being drafted in the U.S. armed forces?		Yes		No
42.	Have you <b>EVER</b> applied for any kind of exemption from military service in the U.S. armed forces?		Yes		No
43.	Have you <b>EVER</b> deserted from the U.S. armed forces?		Yes		No

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		2. Additional Information About You (Person Applying for lization) (continued)  A-	
44.	A.	Are you a male who lived in the United States at any time between your 18th and 26th birthdays? (This does not include living in the United States as a lawful nonimmigrant.)	Yes No
	В.	7.	
	C.	If you answered "Yes," but you <b>did not register</b> with the Selective Service System and you are:	
		1. Still under 26 years of age, you must register before you apply for naturalization, and complete the information above; <b>OR</b>	e Selective Service
		2. Now 26 to 31 years of age (29 years of age if you are filing under INA section 319(a)), but you did Selective Service, you must attach a statement explaining why you did not register, and provide a letter from the Selective Service.	
		tem Numbers 45 50. If you answer "No" to any of these questions, include a typed or printed explanation paper and provide any evidence to support your answers.	ation on additional
45.	Do	you support the Constitution and form of Government of the United States?	Yes No
46.	Do	you understand the full Oath of Allegiance to the United States?	Yes No
47.	Are	you willing to take the full Oath of Allegiance to the United States?	Yes No
48.	If the	ne law requires it, are you willing to bear arms on behalf of the United States?	Yes No
49.	If the	ne law requires it, are you willing to perform noncombatant services in the U.S. armed forces?	Yes No
50.	If tl	ne law requires it, are you willing to perform work of national importance under civilian direction?	Yes No
Pa	rt 1.	3. Applicant's Statement, Certification, and Signature	
NO.	ΓE:	Read the <b>Penalties</b> section of the Form N-400 Instructions before completing this part.	
$Ap_{j}$	plice	ant's Statement	
NO	ſE:	Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item Numb	er 2.
1.	Ap	plicant's Statement Regarding the Interpreter	
	A.	I can read and understand English, and I have read and understand every question and instruction and my answer to every question.	on this application
	В.	The interpreter named in <b>Part 14.</b> read to me every question and instruction on this application and question in a language in which I am fluent, and I used to the contract of the contract	
2.	Λn	plicant's Statement Regarding the Preparer	incorproductory uning.
4.	<b>A</b> p		
		At my request, the preparer named in <b>Part 15.</b> , prepared this application for me based only upon information I provided or authorized.	

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Pa	rt 13. Applicant's Statement, Certifica	tion, and Sign	nature (continu	ned) A-
Ap	plicant's Certification			
requ	ies of any documents I have submitted are exact prize that I submit original documents to USCIS at records that USCIS may need to determine my eli	a later date. Furt	thermore, I authori	ze the release of any information from any of
	ther authorize release of information contained in ies and persons where necessary for the administration			
	derstand that USCIS will require me to appear for ature) and, at that time, I will be required to sign a		•	rics (fingerprints, photograph, and/or
	1) I reviewed and provided or authorized all o	f the information	n in my application	ı;
	2) I understood all of the information contained	ed in, and submit	ted with, my appli	cation; and
	3) All of this information was complete, true,	and correct at the	e time of filing.	
	tify, under penalty of perjury, that I provided or a mation contained in, and submitted with, my app			• ••
Ap	plicant's Signature			
3. <b>→</b>	Applicant's Signature			Date of Signature (mm/dd/yyyy)
	TE TO ALL APPLICANTS: If you do not comuctions, USCIS may deny your application.	pletely fill out th	is application or fa	ail to submit required documents listed in the
Pa	rt 14. Interpreter's Contact Information	on, Certificat	ion, and Signa	ture
Prov	ride the following information about the interprete	er.		
Int	erpreter's Full Name			
1.	Interpreter's Family Name (Last Name)		Interpreter's Giv	en Name (First Name)
2.	Interpreter's Business or Organization Name (if	any)	]	
Int	erpreter's Mailing Address			
3.	Street Number and Name			Apt. Ste. Flr. Number
	City or Town			State ZIP Code + 4
	Province	Postal Code	Country	

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	rt 14. Interpreter's Contact Information, Certificat ntinued)	tion, and Signature	A-
Inte	erpreter's Contact Information		
4.	Interpreter's Daytime Telephone Number 5	5. Interpreter's Mobile Teleph	none Number (if any)
6.	Interpreter's Email Address (if any)		
Inte	erpreter's Certification		
	ify, under penalty of perjury, that: fluent in English and	, which is the same languag	ge specified in <b>Part 13.</b> , <b>Item B.</b> in
or he	<b>Number 1.</b> , and I have read to this applicant in the identified lar ranswer to every question. The applicant informed me that he o cation, including the <b>Applicant's Certification</b> and has verified	or she understands every instruc	
Inte	erpreter's Signature		
7.	Interpreter's Signature		Date of Signature (mm/dd/yyyy)
<b>→</b>			
Oth	et 15. Contact Information, Declaration, and Signa ner Than the Applicant  de the following information about the preparer.	ature of the Person Prepa	aring This Application, if
	parer's Full Name		
1.	Preparer's Family Name (Last Name)	Preparer's Given Name (Firs	st Name)
2.	Preparer's Business or Organization Name (if any)		
Pre	parer's Mailing Address		
3.	Street Number and Name	Apt. S	te. Flr. Number
	City or Town	State	ZIP Code + 4
	Province Postal Code	Country	

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	reparing This Application, if Other Than the Applicant (continued)  A-  A-  A-  A-  A-  A-  A-  A-  A-  A
Pr	eparer's Contact Information
4.	Preparer's Daytime Telephone Number  5. Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)
Pr	eparer's Statement
7.	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.
	<b>B.</b> 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.
	<b>NOTE:</b> If you are an attorney or accredited representative whose representation extends beyond preparation of this application, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.
Pr	eparer's Certification
revi witl	my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then ewed this completed application and informed me that he or she understands all of the information contained in, and submitted n, his or her application, including the <b>Applicant's Certification</b> , and that all of this information is complete, true, and correct. I applied this application based only on information that the applicant provided to me or authorized me to obtain or use.
	eparer's Signature
8.	Preparer's Signature  Date of Signature (mm/dd/yyyy)
	NOTE: Do not complete Parts 16., 17., or 18. until the USCIS Officer instructs you to do so at the interview.
Pa	ort 16. Signature at Interview
this con	rear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of Form N-400, Application for Naturalization, subscribed by me, including corrections number 1 through, are applete, true, and correct. The evidence submitted by me on numbered pages 1 through are complete, true, and rect.
Sub	scribed to and sworn to (affirmed) before me
	USCIS Officer's Printed Name or Stamp  Date of Signature (mm/dd/yyyy)
Anı	olicant's Signature USCIS Officer's Signature
r1	

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Part 17. Renunciation of Foreign Titles		A-		
If you answered "Yes" to Part 12., Items A. and B. in Ite	em Number 4., then you m	ust affirm the follow	ving before a US	CIS officer:
I further renounce the title of		which I have here	tofore held; or	
(list	titles)			
I further renounce the order of nobility of	(list order of nobility)	to which	I have heretofo	re belonged.
Applicant's Printed Name	Applicant's Sign	ature		
Typricant's Timed Ivanic	7 Applicant's Sign	iture		
USCIS Officer's Printed Name	USCIS Officer's	Signature		
Date of Signature (mm/dd/yyyy)	_	,		
Part 18. Oath of Allegiance				
If your application is approved, you will be scheduled for following Oath of Allegiance immediately prior to become willingness and ability to take this oath:		_	-	
I hereby declare on oath, that I absolutely and entirely renstate, or sovereignty, of whom or which I have heretofore		ance and fidelity to a	any foreign princ	e, potentate,
that I will support and defend the Constitution and laws o	f the United States of Ame	rica against all enem	nies, foreign, and	domestic;
that I will bear true faith and allegiance to the same;	MUIU			
that I will bear arms on behalf of the United States when i	required by the law;			
that I will perform noncombatant service in the armed for	ces of the United States wh	nen required by the la	aw;	
that I will perform work of national importance under civi	ilian direction when requir	ed by the law; and		
that I take this obligation freely, without any mental reser	vation or purpose of evasion	on; so help me God.		
Applicant's Printed Name				
Family Name (Last Name)	Given Name (First Name)	Mi	iddle Name (if ap	oplicable)
Applicant's Signature		Date of S	Signature (mm/c	dd/yyyy)

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