

**TABLE OF CHANGES – FORM**  
**Form N-426, Request for Certification of Military or Naval Service**  
**OMB Number: 1615-0053**  
**05/25/2017**

**Reason for Revision: Revision.**

Current Page Number and Section	Current Text	Proposed Text
<b>Page 1, Pre-Part 1. Information</b>	<p>[page 1]</p> <p>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 not authorized to certify this request. <b>Submit this request with Form N-400, Application for Naturalization.</b></p> <p><b>Instructions:</b> Requestors must complete <b>Parts 1. - 4.</b> Certifying officials must complete <b>Parts 5. - 8.</b></p>	<p>[page 1]</p> <p>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 not authorized to certify this request. <b>Submit this request with Form N-400, Application for Naturalization.</b></p> <p><b>Instructions:</b> Requestors must complete <b>Parts 1. - 4.</b> Certifying officials must complete <b>Parts 5. - 8.</b></p>
<b>Page 1, Part 1. Information About You</b>	<p>[page 1]</p> <p><b>Part 1. Information About You</b></p> <p><b>1.</b> Alien Registration Number (A-Number) (if any)</p> <p><b>2.</b> Military Service Number</p> <p><b>3.</b> Names Used During Military Service</p> <p>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></p> <p>Family Name (Last Name)</p> <p>Given Name (First Name)</p> <p>Middle Name</p> <p><b>4.</b> U.S. Social Security Number (if any)</p>	<p>[page 1]</p> <p><b>Part 1. Information About You</b></p> <p><b>1.</b> Alien Registration Number (A-Number) (if any)</p> <p><b>2.</b> Military Service Number</p> <p><b>3.</b> Names Used During Military Service</p> <p>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></p> <p>Family Name (Last Name)</p> <p>Given Name (First Name)</p> <p>Middle Name</p> <p><b>4.</b> U.S. Social Security Number (if any)</p>

	<p>5. USCIS ELIS Account Number (if any)</p> <p>6. Date of Birth (mm/dd/yyyy)</p> <p>7. Place of Birth (city and country)</p> <p>8. Physical Address</p> <p>Street Number and Name</p> <p>[ ] Apt. [ ] Ste. [ ] Flr. Number</p> <p>City or Town</p> <p>County</p> <p>State</p> <p>ZIP Code + 4</p> <p>Province or Region (<i>foreign address only</i>)</p> <p>Country (<i>foreign address only</i>)</p> <p>Postal Code (<i>foreign address only</i>)</p>	<p>5. USCIS ELIS Account Number (if any)</p> <p>6. Date of Birth (mm/dd/yyyy)</p> <p>7. Place of Birth (city and country)</p> <p>8. Physical Address</p> <p>Street Number and Name</p> <p>[ ] Apt. [ ] Ste. [ ] Flr. Number</p> <p>City or Town</p> <p>County</p> <p>State</p> <p>ZIP Code + 4</p> <p>Province or Region (<i>foreign address only</i>)</p> <p>Country (<i>foreign address only</i>)</p> <p>Postal Code (<i>foreign address only</i>)</p>
<p><b>Page 1,</b> <b>Part 2. Enlistment Information</b></p>	<p>[page 1]</p> <p><b>Part 2. Enlistment Information</b></p> <p>1. Where did you enlist?</p> <p>City</p> <p>State</p> <p>Country</p> <p>2. Have you reenlisted? Yes No</p> <p>3. Where did you reenlist?</p> <p>City</p> <p>State</p> <p>Country</p>	<p>[page 1]</p> <p><b>Part 2. Enlistment Information</b></p> <p>1. Where did you enlist?</p> <p>City</p> <p>State</p> <p>Country</p> <p>2. Have you reenlisted? Yes No</p> <p>3. Where did you reenlist?</p> <p>City</p> <p>State</p> <p>Country</p>
<p><b>Page 2,</b> <b>Part 3. Periods of Military Service</b> (To be completed by requestor)</p>	<p>[page 2]</p> <p><b>Part 3. Periods of Military Service</b> (To be completed by requestor)</p> <p>Provide all periods of service. If you need extra</p>	<p>[page 2]</p> <p><b>Part 3. Periods of Military Service</b> (To be completed by requestor)</p> <p>Provide all periods of service. If you need extra</p>

	<p>space to complete this section, use the space provided in <b>Part 9. Additional Information.</b></p> <p>(TABLE -5 columns 4 rows)</p> <p><b>Military Service</b></p> <p><b>Branch of Service</b></p> <p><b>Date Service Began</b> (mm/dd/yyyy)</p> <p><b>Date Service Ended</b> (mm/dd/yyyy)</p> <p><b>Type of Service</b> (include <b>all</b> active, reserve, and National Guard Service) [ ] Active Duty [ ] Selected Reserve of the Ready Reserve*</p> <p>[end of table]</p> <p>*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)</p>	<p>space to complete this section, use the space provided in <b>Part 9. Additional Information.</b></p> <p>(TABLE -5 columns 4 rows)</p> <p><b>Military Service</b></p> <p><b>Branch of Service</b></p> <p><b>Date Service Began</b> (mm/dd/yyyy)</p> <p><b>Date Service Ended</b> (mm/dd/yyyy)</p> <p><b>Type of Service</b> (include <b>all</b> active, reserve, and National Guard Service) [ ] Active Duty [ ] Selected Reserve of the Ready Reserve*</p> <p>[end of table]</p> <p>*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)</p>
<p><b>Page 2, Part 4. Requestor's Contact Information, Declaration, Certification, and Signature</b></p>	<p>[page 2]</p> <p><b>Part 4. Requestor's Contact Information, Certification, and Signature</b></p> <p><b><i>Requestor's Contact Information</i></b></p> <p>1. Requestor's Daytime Telephone Number</p> <p>2. Requestor's Mobile Telephone Number (if any)</p> <p>3. Requestor's Email Address (if any)</p> <p><b><i>Requestor's Certification</i></b></p> <p>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.</p> <p>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.</p>	<p>[page 2]</p> <p><b>Part 4. Requestor's Contact Information, Certification, and Signature</b></p> <p><b><i>Requestor's Contact Information</i></b></p> <p>1. Requestor's Daytime Telephone Number</p> <p>2. Requestor's Mobile Telephone Number (if any)</p> <p>3. Requestor's Email Address (if any)</p> <p><b><i>Requestor's Certification</i></b></p> <p>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.</p> <p>I certify, under penalty of perjury, that <b>all of</b> the information in my request and any document submitted with <b>it</b> were provided by me and are complete, true, and correct.</p>

	<p><i>Requestor's Signature</i></p> <p>4. Requestor's Signature</p> <p>5. Date of Signature (mm/dd/yyyy)</p> <p><b>NOTE TO ALL REQUESTORS:</b> USCIS may deny your request if you do not completely fill out this request or fail to submit required documents listed in the instructions.</p>	<p><i>Requestor's Signature</i></p> <p>4. Requestor's Signature</p> <p>5. Date of Signature (mm/dd/yyyy)</p> <p><b>NOTE TO ALL REQUESTORS:</b> USCIS may deny your request if you do not completely fill out this request or fail to submit required documents listed in the <a href="#">Instructions</a>.</p>
<p><b>Page 2, Part 5. Character of Service</b> (To be completed by Certifying Official)</p>	<p>[page 2]</p> <p><b>Part 5. Character of Service</b> (To be completed by Certifying Official)</p> <p>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. Remarks</b>.</p> <p>1. Honorable Period of Military Service 1 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Honorable Period of Military Service 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Honorable Period of Military Service 3 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>[page 2]</p> <p><b>Part 5. Character of Service</b> (To be completed by Certifying Official)</p> <p>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. Remarks</b>.</p> <p>1. Honorable Period of Military Service 1 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Honorable Period of Military Service 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Honorable Period of Military Service 3 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Page 3, Part 6. Separation Information</b></p>	<p>[page 3]</p> <p><b>Part 6. Separation Information</b></p> <p>1. Is the requestor separated? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. If separated, select discharge type: <input type="checkbox"/> Honorable <input type="checkbox"/> Other (provide details in <b>Part 7. Remarks</b>)</p> <p>3. Was the requestor discharged on account of alienage? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If you answer "Yes," provide details in <b>Part 7. Remarks</b>.</p>	<p>[page 3]</p> <p><b>Part 6. Separation Information</b></p> <p>1. Is the requestor separated? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. If separated, select discharge type: <input type="checkbox"/> Honorable <input type="checkbox"/> Other (provide details in <b>Part 7. Remarks</b>)</p> <p>3. Was the requestor discharged on account of alienage? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If you answer "Yes," provide details in <b>Part 7. Remarks</b>.</p>
<p><b>Page 3, Part 7. Remarks</b></p>	<p>[page 3]</p> <p><b>Part 7. Remarks</b></p> <p>Provide any <b>derogatory information</b> in your records relating to the service member's character, loyalty to the United States, disciplinary action, convictions, other than</p>	<p>[page 3]</p> <p><b>Part 7. Remarks</b></p> <p>Provide any <b>derogatory information</b> in your records relating to the service member's character, loyalty to the United States, disciplinary action, convictions, other than</p>

	<p>honorably 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 Information.</b></p>	<p>honorably 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 Information.</b></p>
<p><b>Page 3, Part 8. Certification</b> (To be completed by Certifying Official)</p>	<p>[page 3]</p> <p><b>Part 8. Certification</b> (To be completed by Certifying Official)</p> <p>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 [fillable field]</p> <p>Name of Department</p> <p>Official Signature</p> <p>Name and Title</p> <p>Daytime Telephone Number</p> <p>Email Address (if any)</p> <p>Date (mm/dd/yyyy)</p> <p>Seal, if available (No state-issued notary public seals accepted.)</p>	<p>[page 3]</p> <p><b>Part 8. Certification</b> (To be completed by Certifying Official)</p> <p>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 [fillable field]</p> <p>Name of Department</p> <p>Official Signature</p> <p>Name and Title</p> <p>Daytime Telephone Number</p> <p>Email Address (if any)</p> <p>Date (mm/dd/yyyy)</p> <p>Seal, if available (No state-issued notary public seals accepted.)</p>
<p><b>Page 4, Part 9. Additional Information</b></p>	<p>[page 4]</p> <p><b>Part 9. Additional Information</b></p> <p>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, Part Number, and Item Number</b> to which your answer refers; and sign and date each sheet.</p> <p><b>1. Family Name (Last Name)</b></p> <p>Given Name (First Name)</p> <p>Middle Name</p> <p><b>2. A-Number (if any)</b></p> <p><b>3. A. Page Number</b> <b>B. Part Number</b> <b>C. Item Number</b></p>	<p>[page 4]</p> <p><b>Part 9. Additional Information</b></p> <p>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, Part Number, and Item Number</b> to which your answer refers; and sign and date each sheet.</p> <p><b>1. Family Name (Last Name)</b></p> <p>Given Name (First Name)</p> <p>Middle Name</p> <p><b>2. A-Number (if any)</b></p> <p><b>3. A. Page Number</b> <b>B. Part Number</b> <b>C. Item Number</b></p>

	<p><b>D.</b> [Text]</p> <p><b>4. A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b> [Text]</p> <p><b>5. A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b> [Text]</p> <p><b>6. A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b> [Text]</p>	<p><b>D.</b> [Text]</p> <p><b>4. A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b> [Text]</p> <p><b>5. A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b> [Text]</p> <p><b>6. A.</b> Page Number <b>B.</b> Part Number <b>C.</b> Item Number <b>D.</b> [Text]</p>
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