

Application for Certificate of Citizenship

Department of Homeland Security

USCIS Form N-600 OMB No. 1615-0057 Expires 02/28/2017

U.S. Citizenship and Immigration Services

	Date Stamp		Receipt	Action Block
For USC Use	IS			
Onl	y Remarks		RAF	
R	To be completed by an Attorney or Accredited epresentative (if any).	Select this box if Form G-28 is attached.	Attorney State Bar Number (if applicable)	Attorney or Accredited Representative USCIS Online Account Number (if any)
► S1	TART HERE - Type or p	orint in black ink.		
Part	1. Information Abo	ut Your <mark>Eligibility</mark>		Enter Your 9 Digit A-Number:
1.	This application is being fi	iled based on the fact th	at: (Select only one box)	► A-
	I am a BIOLOGICAL	child of a U.S. citizen	parent. I am an ADOPT	ED child of a U.S. citizen parent.
	Other (Explain fully):			
	NOTE: If you need extra	space to complete this	section, use the space provided	in Part 11. Additional Information.
Part	2. Information Abo	ut <mark>You</mark>		
				cate of Citizenship. Provide information
	Current Legal Name (do n		ng for a Certificate of Citizensh	ip for your minor child.
	Family Name (Last Name)		Given Name (First Name)	Middle Name
		/		
2.	Your Name Exactly As It .	Appears on Your Perma	unent Resident Card (if differen	from above)
	Family Name (Last Name))	Given Name (First Name)	Middle Name
•••	Other Names You Have U Provide all other names yo		de nicknames, maiden name, ar	d aliases.
	Family Name (Last Name))	Given Name (First Name)	Middle Name
4				[
4.	U.S. Social Security Numb	ber (if any) 5. USC \blacktriangleright	CIS Online Account Number (if	any)
6.	Date of Birth (mm/dd/yyy	y) 7. Country	of Birth	
0		L		
8.	Country of Prior Citizensh	up or Nationality	9. Gender	ale

Part 2. Information About You (continued)

10. Mailing Address

In Care Of Name (if any)

	Stre	et Number and Name	Apt.	Ste.	Flr.	Num	ber
	City	y or Town State		Z	ZIP Cod	e + 4	
						-	
	Pro	vince (foreign address only) Postal Code (foreign address only) Country (foreign addr	ess o	nly)			
11.	Phy	sical Address					
	Stre	et Number and Name (Do not provide a PO Box in this space unless it is your ONLY address.)	Apt.	Ste.	Flr.	Numl	ber
	City	v or Town State		Z	ZIP Cod	e + 4	
] -	
	Pro	vince (foreign address only) Postal Code (foreign address only) Country (foreign addr	ess o	nly)			
2.	Cur	rent Marital Status					
		Single, Never Married Married Divorced Widowed Separated M	larria	ge Ar	nulled		
		Other (Explain):					
13.	U.S	. Armed Forces					
	Are	you a member or veteran of any branch of the U.S. Armed Forces?			∏ Y€	es 🗌] No
14.		ormation About Your Admission into the United States and Current Immigration Status]
		I arrived in the following manner					
	11.	Port-of-Entry					
		City or TownStateDate of Entry (mm/dd/yyy	vv)				
			<u> </u>	7			
		Exact Name Used at Time of Entry					
		Family Name (Last Name) Given Name (First Name) Middle 1	Name	;			
	B.	I used the following travel document to be admitted to the United States					
		Passport Travel Document					
		Passport Number Travel Document Number					
		Country of Issuance for Passport or Date Passport or Travel Document					
		Travel Document Issued (mm/dd/yyyy)					

А-

Par	rt 2.	rt 2. Information About You (continued)		A-				
	C.	C. I am						
		A Lawful Permanent Resident (LPR) A Nonimmigrant] A Refuge	ee/Asylee				
		Other (Explain):						
		NOTE: If you select "Other" and you need extra space to complete this Additional Information .	s section, u	se the space	provide	ed in Pa	rt 11.	
	D.	D. I obtained LPR status through adjustment of status in the United States of	or admissic	on as a LPR	(if appl	icable)		
		Date I became a LPR U.S. Citizenship and Immigration Set Status or Location Where I Was Adres (mm/dd/yyyy) Immigration Set Status or Location Where I Was Adres		SCIS) Office	• That C	Granted	My LI	?R
15.	Har	Have you previously applied for a Certificate of Citizenship or U.S. Passport	t?				Yes	□ No
13.		If you answered "Yes" to Item Number 15. , provide an explanation below.		d extra space	e to cor	nplete tł		
		the space provided in Part 11. Additional Information.	-			<u> </u>		
16.	Ha	Have you ever abandoned or lost your LPR status?					Yes	No
		If you answered "Yes" to Item Number 16. , provide an explanation below.	If you nee	d extra space	e to cor	nplete th	iis sec	tion, use
	the	the space provided in Part 11. Additional Information .						
			-					
17.		Were you adopted? If you answered "Yes" to Item Number 17. , complete Items A D.			/		Yes	
		A. Place of Final Adoption						
	А.		untry					
	R	B. Date of Adoption C. Date Legal Custody Began	D. D	ate Physical	Custor	ly Rega	 n	
	р.	(mm/dd/yyyy) (mm/dd/yyyy)		nm/dd/yyyy			.1	
18.	Dic	Did you have to be re-adopted in the United States?					Yes	No
	If y	If you answered "Yes" to Item Number 18., complete Items A D.						
	А.	A. Place of Final Adoption						
		City or Town State Cou	untry					
	B.	B. Date of Final Adoption (mm/dd/yyyy) C. Date Legal Custody Begar (mm/dd/yyyy)	n]	D. Date Ph (mm/dd	•	Custody	Begar	1
19.	We	Were your parents married to each other when you were born (or adopted)?					Yes	
20.	Dic	Did your parents marry after you were born?					Yes	No
21.		Do you regularly reside in the United States in the legal and physical custody	u of your L	S citizon n	arantal		Yes	

Par	rt 2.	Information About You (continued)			A-		
22.	Hav	ve you been absent from the United States since yo	ou fi	rst arrived?			Yes No
		mplete the following information only if you are c tober 10, 1952. If you need extra space to complete		č .		•	
	A.	Date You Left the United States (mm/dd/yyyy)	B.	Date You Returned to the United States (mm/dd/yyyy)			
	C.	Place of Entry Upon Return to the United States City or Town	Stat				
	D.	Date You Left the United States (mm/dd/yyyy)	E.	Date You Returned to the United States (mm/dd/yyyy)			
	F.	Place of Entry Upon Return to the United States City or Town	Stat				
Par	:t 3.	Biographic Information					
1.	Eth	nnicity (Select only one box) Hispanic or Latino 🔲 Not Hispanic or Lating	C		7		
2.		ce (Select all applicable boxes) White Asian Black or African American		American Indian Native Hawa or Alaska Native Other Pacific			r
3.	Hei	ight Feet Inches 4. Weight		Pounds			
5.	Eye	e color (Select only one box) Black Blue Brown Gray	G	reen Hazel Maroon] Pi	nk	Unknown/ Other
6.	Hai	ir color (Select only one box) Bald Black Blond Brown (No hair)	n [Gray Red Sandy [_	Whit	e Unknown/ Other

Part 4. Information About Your U.S. Citizen Biological Father (or Adoptive Father)

NOTE: Complete this section if you are claiming citizenship through a U.S. biological father (of adoptive father). **Provide information about yourself** if you are a U.S. citizen father applying for a Certificate of Citizenship on behalf of your minor biological or adopted child.

1. Current Legal Name of U.S. Citizen Father

Family Name (Last Name)	Given Name (First Name)	Middle Name

		Information About Your U.S. Citizen Biological Father optive Father) (continued)
2.	Dat	te of Birth (mm/dd/yyyy) 3. Country of Birth 4. Country of Citizenship or Nationality
5.		ysical Address eet Number and Name (Type or print "Deceased" and the date of death if your father has passed away.) Apt. Ste. Flr. Number
	Cit	y or Town State ZIP Code + 4
	Pro	wince (foreign address only) Postal Code (foreign address only) Country (foreign address only)
6.	My	father is a U.S. citizen by Birth in the United States Acquisition after birth through naturalization of alien parents Birth abroad to U.S. citizen parents Certificate of Citizenship Number Alien Registration Number (A-Number) (if any) A- Naturalization Place of Naturalization (Name of Court or USCIS Office Location) City or Town State Certificate of Naturalization Number A-Number (if any) Date of Naturalization (mm/dd/yyyy)
7.	Ha	s your father ever lost U.S. citizenship or taken any action that would cause loss of U.S. citizenship?
		you answered "Yes" to Item Number 7., provide an explanation in Part 11. Additional Information.
8.	-	arital History
		How many times has your U.S. citizen father been married (including annulled marriages and marriages to the same person)?
	B.	What is your U.S. citizen father's current marital status?
		Single, Never Married Married Divorced Widowed Separated Marriage Annulled
		Other (Explain):
		If you selected "Other," provide an explanation. If you need extra space to complete this section, use the space provided in

		Information About Your U.S. (optive Father) (continued)	Citizen Biological Father	A-
9.	Infe	ormation About U.S. Citizen Father's Cur	rent Spouse	
	А.	Family Name (Last Name)	Given Name (First Name) Mi	ddle Name
	B.	Date of Birth (mm/dd/yyyy) C.	Country of Birth	
	D.	Country of Citizenship or Nationality	KAFI	
	E.	Spouse's Physical Address		
		Street Number and Name		Apt. Ste. Flr. Number
		City or Town	Sta	ate ZIP Code + 4
		Province (foreign address only)	Postal Code Country (foreign address only) (foreign address	only)
	F.	Date of Marriage (mm/dd/yyyy)	JUCHC	JN
	G.	Place of Marriage		
	H.	City or Town Spouse's Immigration Status U.S. Citizen Lawful Permaner	State Country	6
		Other (Explain):		
		If you selected "Other," provide an explanation Part 11. Additional Information.	anation. If you need extra space to complete this	section, use the space provided in
	I.	Is your U.S. citizen father's current spou	se also your biological (or adopted) mother?	Yes No

Part 5. Information About Your U.S. Citizen Biological Mother (or Adoptive Mother)

NOTE: Complete this section if you are claiming citizenship through a U.S. citizen biological mother (or adoptive mother). **Provide information about yourself** if you are a U.S. citizen mother applying for a Certificate of Citizenship on behalf of your minor biological or adopted child.

1. Current Legal Name of U.S. Citizen Mother

	Family Name (Last Name)		Given Name (First Name)		Middle Name
2.	Date of Birth (mm/dd/yyyy)	3.	Country of Birth	4.	Country of Citizenship or Nationality

		Information About Your U.S. Citizen Biological Mother optive Mother) (continued)						
5.		vsical Address						
		eet Number and Name (Type or print "Deceased" and the date of death if your mother has passed away.) Apt. Ste. Flr. Number						
	City	y or Town State ZIP Code + 4						
	Pro	wince (foreign address only) Postal Code (foreign address only) Country (foreign address only)						
6.	My	mother is a U.S. citizen by						
		Birth in the United States Acquisition after birth through naturalization of alien parents						
		Birth abroad to U.S. citizen parents						
		Certificate of Citizenship Number A-Number (if any)						
		A-						
		Naturalization						
		Place of Naturalization (Name of Court or USCIS Office Location)						
		City or Town State						
		Certificate of Naturalization Number A-Number (if any) Date of Naturalization (mm/dd/yyyy)						
		A-						
7.	Has	s your mother ever lost U.S. citizenship or taken any action that would cause loss of U.S. citizenship? [Yes] No						
	If y	you answered "Yes" to Item Number 7., provide an explanation in Part 11. Additional Information.						
8.	Ma	arital History						
	A.	How many times has your U.S. citizen mother been married (including annulled marriages and marriages to the same person)?						
	B. What is your U.S. citizen mother's current marital status?							
		Single, Never Married Married Divorced Widowed Separated Marriage Annulled						
		Other (Explain):						
		If you selected "Other," provide an explanation. If you need extra space to complete this section, use the space provided in Part 11. Additional Information.						
9.	Info	ormation About U.S. Citizen Mother's Current Spouse						
	A.	Family Name (Last Name) Given Name (First Name) Middle Name						
	B.	Date of Birth (mm/dd/yyyy) C. Country of Birth						

	Information About Your U.S. optive Mother) (continued)	. Citizen Biological Mo	ther	A-			
D.	Country of Citizenship or Nationality			-			
Е.	Spouse's Physical Address						
	Street Number and Name			Aŗ	ot. Ste.	Flr.	Number
	City or Town	\mathbf{H}	Sta	ate	Z	IP Code	e + 4
							-
	Province	Postal Code	Country				
	(foreign address only)	(foreign address only)	(foreign address	only)			
F.	Date of Marriage (mm/dd/yyyy)	JIF	UR				
G.	Place of Marriage						
	City or Town	State	Country				
H.	Spouse's Immigration Status						
	U.S. Citizen Lawful Perman	nent Resident			$ \rangle$		
							1
	Other						
	If you selected "Other," provide an ex	planation. If you need extra s	pace to complete this s	section, u	se the sp	bace pro	ovided in
	Part 11. Additional Information.			6			
I.	Is your U.S. citizen mother's current s	pouse also your biological (o	r adopted) father?	\mathbf{O}	[Ye	s 🗌 No
	4						

Part 6. Physical Presence in the United States From Birth Until Filing of Form N-600

NOTE: Only applicants born outside the United States claiming to have been born U.S. citizens are required to provide all the dates when your U.S. citizen biological father or U.S. citizen biological mother resided in the United States. **Include all dates from your birth until the date you file your Form N-600**.

1. Indicate whether this information relates to your U.S. citizen father or mother

U.S. Citizen Father U.S. Citizen Mother

2. Physical Presence in the United States

From (mm/dd/yyyy)	To (mm/dd/yyyy)	В.	From (mm/dd/yyyy)	To (mm/dd/yyyy)
From (mm/dd/vvvv)	To (mm/dd/vvvv)	D	From (mm/dd/yyyyy)	To (mm/dd/yyyy)
		р.		
From (mm/dd/yyyy)	To (mm/dd/yyyy)	F.	From (mm/dd/yyyy)	To (mm/dd/yyyy)
Erom (mm/dd/curu)	To (mm/dd/mm)	п	Enorm (mmm (dd (mmm))	To (mm/dd/mm)
		п.		To (mm/dd/yyyy)
	From (mm/dd/yyyy)	From (mm/dd/yyyy) To (mm/dd/yyyy) From (mm/dd/yyyy) To (mm/dd/yyyy) Image: Constraint of the second	From (mm/dd/yyyy) To (mm/dd/yyyy) D. From (mm/dd/yyyy) To (mm/dd/yyyy) F. Image: Contract of the second s	Image: Street of the street

Par	t 7. Information About Military Service of U. S. Citizen Parents A-
NOT	E: Complete this only if you are an applicant claiming U.S. citizenship at time of birth abroad.
1.	Has your U.S. citizen parent served in the U.S. Armed Forces?
2.	If you answered "Yes" to Item Number 1., which parent served in the U.S. Armed Forces?
	U.S. Citizen Father U.S. Citizen Mother
3. 4.	Dates of Service (mm/dd/yyyy) (If time of service fulfills any of the required physical presence, submit evidence of the service.) A. From (mm/dd/yyyy) To (mm/dd/yyyy) B. From (mm/dd/yyyy) To (mm/dd/yyyy) Type of Discharge To (mm/dd/yyyy) To (mm/dd/yyyy) To (mm/dd/yyyy)
	Honorable Other than Honorable Dishonorable
Par	t 8. Applicant's Statement, Contact Information, Certification, and Signature
NOT	E: Read the Penalties section of the Form N-600 Instructions before completing this part.
App	licant's Statement
NOT 1.	 E: Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item Number 2. Applicant's Statement Regarding the Interpreter A. I can read and understand English, and Lhave read and understand every question and instruction on this application and my answer to every question.
2	 B. The interpreter named in Part 9. read to me every question and instruction on this application and my answer to every question, in, a language in which I am fluent and I understood everything.
2.	Applicant's Statement Regarding the Preparer At my request, the preparer named in Part 10. , prepared this application for me based only upon information I provided or authorized.
App	licant's Contact Information
3.	Applicant's Daytime Telephone Number 4. Applicant's Mobile Telephone Number (if any)
5.	Applicant's Email Address (if any)

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I further authorize release of information contained in this application, 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.

Part 8. Applicant's Statement, Contact Information, Certification, and Signature (continued)

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

A-

- 1) I reviewed and provided or authorized all of the information in my application;
- 2) I understood all of the information contained in, and submitted with, my application; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

Applicant's Signature

6. Applicant's Signature Date of Signature (mm/dd/yyyy)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 9. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

- 1. Interpreter's Family Name (Last Name)
 Interpreter's Given Name (First Name)
- 2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

Street Number and Name			Apt. Ste. Flr.	Number
City or Town			State	ZIP Code + 4
				-
Province	Postal Code	Country		

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number
6. Interpreter's Email Address (if any)

Part 9. Interpreter's Contact Information, **Certification**, **and Signature** (continued)

|--|

Interpreter's Certification

I cert	tify, under penalty of perjury, that:		
Item appli	fluent in English and, which is the same language specified in Part 8. , B. in Item Number 1. , and I have read to this applicant in the identified language every question and instruction on this cation and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, answer on the application, including the Applicant's Certification , and has verified the accuracy of every answer.		
Inte	erpreter's Signature		
7.	Interpreter's Signature Date of Signature (mm/dd/yyyy)		
	et 10. Contact Information, Declaration, and Signature of the Person Preparing this Application, if her Than the Applicant		
Provi	ide the following information about the preparer.		
Pre	parer's Full Name		
1.	Preparer's Family Name (Last Name) Preparer's Given Name (First Name)		
2.	Preparer's Business or Organization Name (if any)		
Pre	parer's Mailing Address		
3.	Street Number and Name Apt. Ste. Flr. Number Image:		
	City or Town State ZIP Code + 4		
	Province Postal Code Country		
Pre	parer's Contact Information		
4.	Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)		

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6.

Preparer's Email Address (if any)

Part 10.	Contact Information	Declaration, and	d Signature of the Person
Preparin	ng this Application, if	Other Than the A	Applicant (continued)

|--|

Preparer'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.** 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.

NOTE: 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.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the Applicant's Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature Date of Signature (mm/dd/yyyy)

11/20/2016

Part 11. Additional Information

If you need extra space to provide any additional information within this application, 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 application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

A-

1.	Family Name (Last Name)	Given Name (First Name)	Middle Name
2. 3.	 A-Number (if any) ► A- A. Page Number B. Part Number 	C. Item Number	
	D.		
		OT FOI	2
4.	A. Page Number B. Part Number	C. Item Number	
	D. PRO	DHCTI	
5.	A. Page Number B. Part Number D.	C. Item Number	16
6.	A. Page Number B. Part Number	C. Item Number	
	D.		

NOTE: Do not complete Parts 12. and 13. unless the USCIS officer instructs you to do so at the interview.

	t 12. Affidavit (do NOT complete this part unless instructed to do so THE INTERVIEW)	A-
penalt the att and th	(applicant, parent, or legal guardian) ty of perjury under the laws of the United States, that I know and understand the contents of this tached supplementary pages number to inclusive, that the same are true and corr hat corrections number to were made by me or at my request.	
at	cribed and sworn or affirmed before me upon examination of the applicant (parent, legal, guardi (Location) IS Officer's Printed Name	an) on Date (mm/dd/yyyy)
Part	IS Officer's Signature	Date of Signature (mm/dd/yyyy)
under 1. 2. 3.	 a basis of the documents, records, the testimony of persons examined, and the identification up rage beneficiary, I find that all the facts and conclusions set forth under oath in this application a True and correct The applicant derived or acquired U.S. citizenship on Date (mm/dd/yyyy) The applicant derived or acquired U.S. citizenship through (Select the box next to the appr section of law is not reflected, type or print the applicable section of law in the space next 	opriate section of law, or if the
	 A. INA Section 301 B. INA Section 309 C. INA Section 320 D. INA Section 321 E. Other The applicant has not been expatriated since that time 	

Part 13. Officer Report and Recommendation on Application for A- Certificate of Citizenship (for USCIS use ONLY) (continued) A-			
I recommend that this Form N-600 be:	Approved Denied		
Issue Certificate of Citizenship in the nam	e of		
Family Name (Last Name)	Given Name (First Name)	Middle Name	
USCIS Officer's Printed Name	USCIS Officer's	Title	
USCIS Officer's Signature		Date of Signature (mm/dd/yyyy)	
I do do not concur with the USC USCIS District Director's or Field Office	CIS Officer's recommendation of Form N-600 Director's Signature	Date of Signature (mm/dd/yyyy)	

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