



# Application for Citizenship and Issuance of Certificate Under Section 322

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form N-600K  
OMB No. 1615-0087  
Expires 12/31/2018

For USCIS Use Only	Date Stamp	Receipt	Action Block
	Remarks		

To be completed by an Attorney or Accredited Representative (if any).	<input type="checkbox"/> 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)
		<input type="text"/>	<input type="text"/>

▶ **START HERE - Type or print in black ink.**

**NOTE:** The applicant on this form is the child's parent, grandparent, or legal guardian.

## Part 1. Information About the Child's Eligibility

Child's A-Number:

▶ A-

1. The application is being filed for a child. The child is under 18 years of age and (select **only one** box):
- The BIOLOGICAL child of a qualifying U.S. citizen (USC) parent filing this application.
  - The ADOPTED child of a qualifying USC parent filing this application.
  - The grandchild of a qualifying USC grandparent or the child ward of a USC legal guardian filing this application within five years of the death of the USC parent.

## Part 2. Information About the Child (for whom this application is being filed)

1. Current Legal Name (do **not** provide a nickname)

Family Name (Last Name)	Given Name (First Name)	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

2. Name Exactly As It Appears on the Permanent Resident Card (if applicable)

Family Name (Last Name)	Given Name (First Name)	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Other Names Used (if applicable)

Provide all other **names ever** used, including nicknames, maiden name, and aliases.

Family Name (Last Name)	Given Name (First Name)	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. U.S. Social Security Number (if applicable)

▶

5. USCIS Online Account Number (if any)

▶

6. Date of Birth (mm/dd/yyyy)

7. Country of Birth

**Part 2. Information About the Child** (for whom this application is being filed)  
(continued)

A-

8. **Country of** Citizenship or Nationality  9. Gender  Male  Female 10. Height Feet  Inches

11. Mailing Address [\(USPS ZIP Code Lookup\)](#)  
In Care Of Name (if any)   
Street Number and Name  Apt.  Ste.  Flr.  Number   
City or Town  State  ZIP Code  -   
Province  Postal Code  Country

12. Physical Address (Do **not** provide a PO Box in this space unless it is the **ONLY** address.)  
Street Number and Name  Apt.  Ste.  Flr.  Number   
City or Town  State  ZIP Code  -   
Province  Postal Code  Country

13. Marital Status  
 Single, Never Married  Married  Divorced  Widowed  Separated  Marriage Annulled  
 Other (Explain):

14. Information About the **Child's** Admission Into the United States and Current Immigration Status  
**NOTE:** Do **NOT** complete this section. The USCIS officer will complete it during the interview.  
A. Arrived in the following manner:  
**Port-of-Entry**  **Date of Entry (mm/dd/yyyy)**   
Exact Name Used at Time of Entry  
Family Name (Last Name)  Given Name (First Name)  Middle Name   
B. Current Immigration Status

15. Was there any prior application for citizenship or for a U.S. passport?  Yes  No

**Part 2. Information About the Child** (for whom this application is being filed)  
(continued)

A- 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

16. Was the child adopted?  Yes  No

A. Date of Adoption  
(mm/dd/yyyy)

B. Date Legal Custody Began  
(mm/dd/yyyy)

C. Date Physical Custody Began  
(mm/dd/yyyy)

17. Were the child's parents married to each other when the child was born (or adopted)?  Yes  No

**Part 3. Information About the Child's U.S. Citizen Biological or Adoptive Parent**

**NOTE: Provide information about the U.S. citizen father or mother applying on behalf of the eligible child. Provide information about the child's U.S. citizen parent in the sections noted if the U.S. citizen grandparent or legal guardian is filing this form.**

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

Family Name (Last Name)

Given Name (First Name)

Middle Name

2. Date of Birth (mm/dd/yyyy)

3. Country of Birth

4. U.S. Social Security Number (if applicable)

▶ 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5. Physical Address

Street Number and Name (Do **not** provide a PO Box in this space unless it is your **ONLY** address.) Apt. Ste. Flr. Number

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------	--------------------------

City or Town

State

ZIP Code

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Province

Postal Code

Country

6. Daytime Telephone Number

7. Work Telephone Number (if any)

8. Evening Telephone Number

9. Mobile Telephone Number (if any)

10. Email Address (if any)

**Part 3. Information About the Child's U.S. Citizen Biological or Adoptive Parent** (continued)

A-

11. The parent is a U.S. citizen by:

- Birth in the United States
- Acquisition After **Birth Through Naturalization of Alien Parent(s)**
- Birth **Abroad to U.S. Citizen Parent(s)**

Certificate of Citizenship Number (if any) 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

▶ A-

Date of Naturalization (mm/dd/yyyy)

12. Has the U.S. citizen father or mother ever lost U.S. citizenship or taken any action that would cause loss of U.S. citizenship?  Yes  No

If you answered "Yes" to Item Number 12., provide a full explanation in the space provided in Part 11. Additional Information.

13. Marital History

A. How many times has the U.S. citizen father or mother been married (including annulled marriages and marriages to the same person)?

B. What is the U.S. citizen father or mother's current marital status?

- Single, Never Married
- Married
- Divorced
- Widowed
- Separated
- Marriage Annulled

Other (Explain):

C. Information About the U.S. Citizen Father's or Mother's **Current Spouse**

Family Name (Last Name)

Given Name (First Name)

Middle Name

Date of Birth (mm/dd/yyyy)

Country of Birth

Country of Citizenship or Nationality

Spouse's Physical Address

Street Number and Name (Do **not** provide a PO Box in this space unless it is your spouse's **ONLY** address.)

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

-

Province

Postal Code

Country

**Part 3. Information About the Child's U.S. Citizen Biological or Adoptive Parent** (continued)

A- 

--	--	--	--	--	--	--	--	--	--	--	--

Date of Marriage (mm/dd/yyyy)

Place of Marriage

City or Town

State

Country

Spouse's Immigration Status

U.S. Citizen     Lawful Permanent Resident     Other (Explain):

**D.** Is the U.S. citizen father's or mother's current spouse also the child's biological (or adoptive) parent?     Yes     No

**14.** Member of U.S. Armed Forces

**A.** Is the sponsoring U.S. citizen parent a member of the U.S. Armed Forces?     Yes     No

**B.** If you answered "Yes" to **Item A.**, then are there official orders authorizing the child to accompany and reside with the sponsoring U.S. citizen parent who is a member of the U.S. Armed Forces?     Yes     No

**NOTE:** If the U.S. citizen biological or adoptive parent is filing this application AND has the required physical presence in the United States, skip Part 4. and go directly to Part 5.

**Part 4. Information About the Child's Qualifying U.S. Citizen Grandparent**

**NOTE:** Complete this part **only** if the U.S. citizen parent (or adoptive parent), grandparent, or legal guardian is applying for citizenship for the child, and the U.S. citizen parent **has not** been physically present in the United States for five years; two years of which were after 14 years of age.

**1.** Current Legal Name of U.S. Citizen Grandparent

Family Name (Last Name)

Given Name (First Name)

Middle Name

**2.** Date of Birth (mm/dd/yyyy)

**3.** Country of Birth

**4.** U.S. Social Security Number (if applicable)

▶ 

--	--	--	--	--	--	--	--	--	--	--	--

**5.** Physical Address

Street Number and Name (Do **not** provide a PO Box in this space unless it is your **ONLY** address.)    Apt.    Ste.    Flr.    Number

              

City or Town

State

ZIP Code

-

Province

Postal Code

Country

**6.** Daytime Telephone Number

**7.** Work Telephone Number (if any)

**Part 4. Information About the Child's Qualifying U.S. Citizen Grandparent**  
(continued)

A-

8. Evening Telephone Number  9. Mobile Telephone Number (if any)

10. Email Address (if any)

11. The grandparent is a U.S. citizen by:

- Birth in the United States  Acquisition **After Birth Through Naturalization of Alien Parent(s)**  
 Birth **Abroad to U.S. Citizen Parent(s)**

Certificate of Citizenship Number (if any)  A-Number (if any)

Naturalization  **A-**

Place of Naturalization

Name of Court or USCIS Office Location

City or Town

State

Certificate of Naturalization Number

**A-Number**

Date of Naturalization (mm/dd/yyyy)

**A-**

12. Has the grandparent ever lost U.S. citizenship or taken any action that would cause loss of U.S. citizenship?  Yes  No

If you answered "Yes" to Item Number 12., provide a full explanation in the space provided in Part 11.  
**Additional Information.**

**Part 5. Physical Presence in the United States From Birth Until Filing of Form N-600K**

**NOTE:** Provide the dates that the U.S. citizen parent or grandparent was present in the United States. If the U.S. citizen parent **has not** been physically present in the United States for five years, two years of which were after 14 years of age, then the child must use the physical presence of the U.S. citizen grandparent.

1. Indicate whether this information relates to the U.S. citizen parent or to the qualifying grandparent.

- U.S. Citizen Parent  U.S. Citizen Grandparent

2. Physical Presence in the United States

A. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

B. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

C. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

D. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

E. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

F. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

G. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

H. From (mm/dd/yyyy)  Until (mm/dd/yyyy)

**NOTE:** If the U.S. citizen biological/adoptive parent is filing this application, skip Part 6. and go directly to Part 7.

**Part 6. Information About the Legal Guardian**

A-

Complete this part **only** if the legal guardian is filing this application **on behalf** of a deceased U.S. citizen parent.

**1. Current Legal Name of the Legal Guardian**

Family Name (Last Name)	Given Name (First Name)	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**2. Date of Birth (mm/dd/yyyy)**

**3. Country of Birth**

**4. U.S. Social Security Number (if applicable)**

▶

**5. Physical Address**

Street Number and Name (Do **not** provide a PO Box in this space unless it is your **ONLY** address.) Apt. Ste. Flr. Number

City or Town State ZIP Code

-

Province Postal Code Country

**6. Daytime Telephone Number**

**7. Work Telephone Number (if any)**

**8. Evening Telephone Number**

**9. Mobile Telephone Number (if any)**

**10. Email Address (if any)**

**11. The legal guardian is a U.S. citizen by:**

- Birth in the United States  Acquisition **After Birth Through Naturalization of Alien Parent(s)**
- Birth **Abroad to U.S. Citizen Parent(s)**

Certificate of Citizenship Number (if any) 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**

▶ A-

Date of Naturalization (mm/dd/yyyy)

**Part 6. Information About the Legal Guardian** (continued)

A-

--	--	--	--	--	--	--	--	--	--	--	--

12. Date of Legal Guardianship (mm/dd/yyyy)

13. Name of Authority that Granted Legal Guardianship

14. Address of Authority that Granted Legal Guardianship

Street Number and Name (Do **not** provide a PO Box in this space unless it is your **ONLY** address.) Apt. Ste. Flr. Number

    

City or Town State ZIP Code

   - 

Province Postal Code Country

  

**Part 7. Preferred Location and Date for Interview**

1. USCIS Office Location

City or Town State

 

2. Preferred Date (mm/dd/yyyy)

USCIS will attempt to accommodate the requested preferences.

**NOTE:** The **interview** date should be at least 90 days after filing Form N-600K and before the child's 18th birthday.

**Part 8. Applicant's Statement, Certification, and Signature**

**NOTE:** Read the **Penalties** section of the Form N-600K Instructions before completing this section.

**Applicant's Statement**

**NOTE:** Select the box for either **Item A.** or **B.** in **Item Number 1.** If applicable, select the box for **Item Number 2.**

1. Applicant's Statement Regarding the Interpreter

- A.  I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 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.



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

A-

--	--	--	--	--	--	--	--	--	--

**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 **and all** 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 **law**.

I certify, under penalty of perjury, that **all** of the information in my application, **and any document submitted with it were provided or authorized by me, that I reviewed and** 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**

3. Applicant's Signature (sign in ink)

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**

3. Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

-

Province

Postal Code

Country

**Interpreter's Contact Information**

4. Interpreter's Daytime Telephone Number

5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

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

A- 

--	--	--	--	--	--	--	--	--	--

**Interpreter's Certification**

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in **Part 8.**

**Item B. in Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Certification**, and has verified the accuracy of every answer.

**Interpreter's Signature**

7. Interpreter's Signature (sign in ink)  Date of Signature (mm/dd/yyyy)

**Part 10. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant**

Provide the following information about the preparer.

**Preparer'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)

**Preparer's Mailing Address**

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

**Preparer's Contact Information**

4. Preparer's Daytime Telephone Number  5. Preparer's Mobile Telephone Number (if any)

6. Preparer's Email Address (if any)



**Part 11. Additional Information**

A- 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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, make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print the **child's** name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which the answer refers; and sign and date each sheet.

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

2. A-Number (if any) ▶ A- 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3. A. Page Number  B. Part Number  C. Item Number

D. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. A. Page Number  B. Part Number  C. Item Number

D. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. A. Page Number  B. Part Number  C. Item Number

D. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. A. Page Number  B. Part Number  C. Item Number

D. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. A. Page Number  B. Part Number  C. Item Number

D. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DRAFT  
NOT FOR  
PRODUCTION  
10/30/2018

**Part 12. Affidavit (At the time of Interview)**

A- 

--	--	--	--	--	--	--	--	--	--

I, the parent/grandparent/legal guardian, \_\_\_\_\_ do swear or affirm, under penalty of perjury under the laws of the United States, that I know and understand the contents of this application signed by me, and the attached supplementary pages number \_\_\_\_ to \_\_\_\_ inclusive, that the same are true and correct to the best of my knowledge, and that corrections number \_\_\_\_ to \_\_\_\_ were made by me or at my request.

Parent's, Grandparent's, or Legal Guardian's Signature (sign in ink) \_\_\_\_\_ Date of Signature (mm/dd/yyyy) \_\_\_\_\_

Subscribed and sworn or affirmed before me upon examination of the applicant (U.S. citizen parent, grandparent, or legal guardian) on \_\_\_\_\_ at \_\_\_\_\_ Date (mm/dd/yyyy) (Location)

Interviewing USCIS Officer's Name \_\_\_\_\_ Interviewing USCIS Officer's Title \_\_\_\_\_

Interviewing USCIS Officer's Signature (sign in ink) \_\_\_\_\_ Date of Signature (mm/dd/yyyy) \_\_\_\_\_

**Part 13. USCIS Officer Report and Recommendation**

On the basis of the documents, records and the testimony of person examined, and the identification upon personal appearance of the underage beneficiary, I find that all the facts and conclusions set forth under oath in this application are:

1.  True and correct;
2.  The applicant derived or acquired U.S. citizenship on \_\_\_\_\_ Date (mm/dd/yyyy)
3.  The applicant derived or acquired U.S. citizenship through (Select the box next to the appropriate section of law or, if the section of law is not reflected, type or print the applicable section of law in the space next to "Other.")
  - A.  INA Section 322(a)(2)(A) of the (Parent residence);
  - B.  INA Section 322(a)(2)(B) of the (Grandparent residence); or
  - C.  Other \_\_\_\_\_

I recommend that this Form N-600K be:  Approved  Denied

Issue Certificate of Citizenship in the Name of  
Family Name (Last Name) \_\_\_\_\_ Given Name (First Name) \_\_\_\_\_ Middle Name \_\_\_\_\_

USCIS Officer's Printed Name \_\_\_\_\_ USCIS Officer's Title \_\_\_\_\_

USCIS Officer's Signature (sign in ink) \_\_\_\_\_ Date of Signature (mm/dd/yyyy) \_\_\_\_\_

I do  do not concur with the USCIS officer's recommendation of the Form N-600K.

USCIS Field Office Director's Signature (sign in ink) \_\_\_\_\_ Date of Signature (mm/dd/yyyy) \_\_\_\_\_