

Request for a Hearing on a Decision in Naturalization **Proceedings Under Section 336**

Department of Homeland Security

USCIS Form N-336 OMB No. 1615-0050 Expires 08/31/2024

U.S. Citizenship and Immigration Services

For USCIS Use Only					
Barcode	KAFI	Date Stamp			
Remarks					
Re-Affirm N-400 Denial Re-Determine N-400 Denial					
To be completed by an Attorney or Accredited Representative (if any). Select this box if Form G-28 is attached.		Attorney or Accredited Representative USCIS Online Account Number (if any)			
► START HERE - Type or print in black ink. NOTE: Type or print "N/A" if an item is not applicable. Type or print "None" if the answer is none. Failure to answer all of the questions may delay your Form N-336. Enter Your 9 Digit A-Number:					
Part 1. Information About You, the Natura	alization Applicant	► A-			
1. Current Legal Name (do not provide a nickname)					
Family Name (Last Name)	Given Name (First Name)	Middle Name			
2. Other Names Used (if any)	1/20				
Provide all other names you have ever used, include this section, use the space provided in Part 8. Addi	•	names. If you need extra space to complete			
Family Name (Last Name)	Given Name (First Name)	Middle Name			
3. Date of Birth (mm/dd/yyyy) 4. USCIS On ▶	line Account Number (if any)				
5. Physical Address (do not provide a PO Box in this	space unless it is your only addres	s)			
Street Number and Name		Apt. Ste. Flr. Number			
City or Town C	ounty	State ZIP Code			
Province or Region Postal Co	de Country				

	ontinued)
6.	Mailing Address
	In Care Of Name (if any)
	DDAFT
	Street Number and Name Apt. Ste. Flr. Number
	City or Town County State ZIP Code
	Province or Region Postal Code Country
7.	Contact Information
/٠	A. Work Telephone Number B. Evening Telephone Number
	2. 2 daining 101 photo 1 dained 1
Pa	art 2. Information About Form N-400 Denial On Which You (the Naturalization Applicant) Are
	equesting a Hearing
1.	Form N-400 Receipt 2. Date of Form N-400 Denial 3. USCIS Office That Issued Form N-400
	Number Notice (mm/dd/yyyy) Denial Notice
4.	Did you file your Form N-400 on the basis of qualifying military service?
	0//11/2022
Pa	rt 3. Biographic Information
1.	Ethnicity (Select only one box)
	Hispanic or Latino Not Hispanic or Latino
2.	Race (Select all applicable boxes)
	American Indian or Asian Black or African Native Hawaiian or Alaska Native American Other Pacific Islander
3.	Height Feet Inches Inches
4.	Weight Pounds
5.	Eye Color (Select only one box)
	Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other
6.	Hair Color (Select only one box)
	Bald Black Blond Brown Gray Red Sandy White Unknown/ (No hair)

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Part 4. Reason You Are Requesting a Hearing ► A-		
Provide the reasons you are requesting a hearing on your denied Form N-400. If you need extra space to complete this section, use the space provided in Part 8. Additional Information .		
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PRODUCTION		
07/11/2022		

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Part 5. Naturalization Applicant's Statement, Contact Information, Certification, and Signature			
NOTE: Read the Penalties section of the Form N-336 Instructions before completing this section.			
Naturalization 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. Naturalization 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 request and my answer to every question.			
 B.			
prepared this request for me based only upon information I provided or authorized.			
Naturalization Applicant's Contact Information			
3. Naturalization Applicant's Daytime Telephone Number 4. Naturalization Applicant's Mobile Telephone Number (if any)			
Naturalization Applicant's Email Address (if any)			
Naturalization 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 and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.			
I furthermore 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 law.			
I understand that USCIS may require me to appear for an appointment to take my biometrics and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:			
1) I reviewed and provided or authorized all of the information in my request;			
2) I understood all of the information contained in, and submitted with, my request; 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 request, I understand all of the information contained in, and submitted with, my request, and that all of this information is complete, true, and correct.			
Naturalization Applicant's Signature			
6. Naturalization Applicant's Signature Date of Signature (mm/dd/yyyy)			

NOTE TO ALL NATURALIZATION APPLICANTS: If you do not completely fill out this request, USCIS may deny your request.

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Part 6. Interpreter's Contact Information, Certification, and Signature ► A-			
	ide the following information about the interpreter.		
Int	erpreter's Full Name		
	Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name) Interpreter's Business or Organization Name (if any)		
Int	erpreter's Mailing Address		
	Street Number and Name Apt. Ste. Flr. Number City or Town State ZIP Code		
	Province or Region Postal Code Country erpreter's Contact Information		
	Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Telephone Number (if any)		
•	interpreter's Buyunne Telephone Tunnber		
6.	Interpreter's Email Address (if any)		
Int	erpreter's Certification		
I cer	tify, under penalty of perjury, that:		
Item on th instr	fluent in English and , which is the same language specified in Part 5. , a B. , in Item Number 1. ; and I have read to this naturalization applicant in the identified language every question and instruction his request and his or her answer to every question. The naturalization applicant informed me that he or she understands every uction, question, and answer on the request, including the Naturalization Applicant's Certification , and has verified the racy of every answer.		
Interpreter's Signature			
7.	Interpreter's Signature Date of Signature (mm/dd/yyyy)		

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	art 7. Contact Information, Declaration, and Signature of the Person reparing this Request, if Other Than the Naturalization Applicant
Pro	ovide the following information about the preparer.
Pı	reparer'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)
	RIOT EOD
Pi	reparer's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number
	City or Town State ZIP Code
	DDODIIOTIONI
	Province or Region Postal Code Country
Pr	reparer's Contact Information
4.	Preparer's Daytime Telephone Number (if any)
6.	Preparer's Email Address (if any)
Pr	reparer's Statement
7.	A. I am not an attorney or accredited representative but have prepared this request on behalf of the naturalization applicant and with the naturalization applicant's consent.
	B. I am an attorney or accredited representative and my representation of the naturalization applicant in this case extends does not extend beyond the preparation of this request.
	NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this request.
Pr	reparer's Certification
nat cor info	my signature, I certify, under penalty of perjury, that I prepared this request at the request of the naturalization applicant. The uralization applicant then reviewed this completed request and informed me that he or she understands all of the information nation in the naturalization applicant that all of this formation is complete, true, and correct. I completed this request based only on information that the naturalization applicant evided to me or authorized me to obtain or use.
Pı	reparer's Signature
8.	Preparer's Signature Date of Signature (mm/dd/yyyy)

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Part 8. Additional Information

If you need extra space to provide any additional information within this request, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this request or attach a separate sheet of paper. 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.

1.	Family Name (Last Name)	Given Name (First Name) Middle Name
2.	A-Number (if any) ► A-	
3.	A. Page Number B. Part Number D.	Der C. Item Number
4.	A. Page Number B. Part Num D.	ber C. Item Number
5.	A. Page Number B. Part Number D.	ber C. Item Number
6.	A. Page Number B. Part Number D.	per C. Item Number

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