

Application for Naturalization

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form N-400 OMB No. 1615-0052 Expires 02/28/2027

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Rem	arks						
			• • •	rint in black ink. If you described in the second second in the second second in the s	-	estions, it may ta	ake longer for U.S. Citizenship
your 1	18th	birth	day, you may not		s you may already be a U.	S. citizen. Befo	naturalized before you reached re you file this application, please zenship.
				ut Your Eligibility (S or your Form N-400		identity	rer Your 9 Digit A-Number:
1.	Rea	son fo	or Filing (Please s	see Instructions for eligibil	ty requirements under eac	ch provision.):	
	A.		General Provis	ion. See Instructions: Lis	t of General Eligibility R	equirements	
	B.		Spouse of U.S.	Citizen. See Instructions:	Eligibility Based on Mar	riage to a U.S.	Citizen
	C.		VAWA. See In Against Women		he Spouse, Former Spou	se, or Child of a	U.S. Citizen under the Violence
	D.		-	Citizen in Qualified Emp '. <i>Citizen Working for a Q</i>	•		Instructions: Eligibility for the tes
			(INA) section 3		ld office where you would		gration and Nationality Act ur naturalization interview. You
	E.		•	e During Period of Hostil U.S. Armed Forces	ities. See Instructions: E	ligibility and E	vidence for Current and Former
	F.			ear of Honorable Militan rmer Members of the U.S.		See Instructions	Eligibility and Evidence for
	G.		Other Reason f	or Filing Not Listed Abo	ve		
Dor	+ 2	Infa	ormation Abo	ut You (Person apply	ng for naturalization)		
				· 113	,		
1.			•	(do not provide a nicknam			
	Fam	nily N	ame (Last Name)		Given Name (First Name	e)	Middle Name (if applicable)
		er Na nclude		sed Since Birth (see the Ins	structions for this Item Nu	imber for more	information about which names
	Fan	nily N	ame (Last Name)	1	Given Name (First Name	2)	Middle Name (if applicable)

Par	t 2. Information About You (Person applying for naturalization) (continued) A-
Nam	Change (Optional)
	the Instructions for this Item Number before you decide whether you would like to legally change your name.
3.	Would you like to legally change your name? Yes No (skip to Item Number 4)
	If you answered "Yes," type or print the new name you would like to use:
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
4.	USCIS Online Account Number (if any) ► Sex Male Female
6.	Date of Birth (mm/dd/yyyy)
	In addition to your actual date of birth, include any other dates of birth you have ever used, including dates used in connection with any legal names or non-legal names, in the space provided in Part 14. Additional Information .
7.	If you are a lawful permanent resident, provide the date you became a lawful permanent resident (mm/dd/yyyy).
8.	Country of Birth
9.	Country of Citizenship or Nationality
	If you are a citizen or national of more than one country, list additional countries of nationality in the space provided in Part 1 Additional Information .
10.	Was your mother or father (including adoptive mother or father) a U.S. citizen before your 18th birthday?
	If you answered "Yes," you may already be a U.S. citizen. If you are a U.S. citizen, you should not complete Form N-400.
11.	Do you have a physical or developmental disability or mental impairment that prevents you from Yes Notemonstrating your knowledge and understanding of the English language 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. See the <i>Naturalization Testing and Exceptions</i> section of the Instructions for additional information about exceptions from the English language test, including exceptions based on age and years as a lawful permanent resident.
Soc	al Security Update
12.a.	Do you want the Social Security Administration (SSA) to issue you an original or replacement Social Security card and update your immigration status with the SSA if and when you are naturalized?
	Yes (Complete Item Numbers 12.b 12.c.)
	No (Go to Part 3.)
12.b.	Provide your Social Security number (SSN) (if any). ▶
12.c.	Consent for Disclosure: I authorize disclosure of information from this application and USCIS systems to the SSA as required for the purpose of assigning me an SSN, issuing me an original or replacement Social Security card, and updating my immigration status with the SSA.
	NOTE: If you answered "Yes" to Item Number 12.a., you must also answer "Yes" to Item Number 12.c., Consent for Disclosure, to receive a card.

Pai	t 3. Biographic Information	A-									
	E: USCIS requires you to complete the categories below to conduct background checks. (See information.)	the 1	Form	N-400	Inst	ructi	ons for				
1.	Ethnicity (Select only one box) Hispanic or Latino Not Hispanic or Latino										
2.	Race (Select all applicable boxes) American Indian Asian Black or Native Hawaiian or Other Pacific Islander Race (Select all applicable boxes) African American 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/Other										
6.	Hair color (Select only one box) Bald Black Blond Brown Gray Red Sandy (No hair)		Whi	ite 🗌	Un Oth	knowi ier	n/				
Pai	t 4. Information About Your Residence										
1.	Physical Addresses List every location where you have lived during the last 5 years if you are filing based on the game of the naturalization eligibility options, see Part Item Number section of the Instructions for the applicable period of time for which you must need extra space, use the space provided in Part 14. Additional Information. Current Physical Address In Care Of Name (if any)	4. in	the S	pecific	Inst	ructio	ons by				
	In care of Name (If any)										
	Street Number and Name	Ap	t. St	e. Flr	. N	umbe	r				
	City or Town	Sta	ite		Z:	ZIP Code					
				V							
	Province Postal Code Country										
	Dates of Residence: From (mm/dd/yyyy) Dates of Residence: To (mm/dd/yyyy)	/dd/	уууу)		PRE	SENT	?				
	Physical Address (Street Number and Name) City or Town State / Province / Postal Code Country Dates of Residence From To (mm/dd/yyyy) (mm/dd/yyyy)										
2.	Is your current physical address also your current mailing address? Yes (If you answered "Yes," skip to Part 5.) No	,									

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Pai	rt 4. Information About Your R	esidence (continued)		A-	
3.	Current Mailing Address (Safe Mailing	Address, if applicable)			
	In Care Of Name (if any)				
	Street Number and Name			Apt. Ste. Flr. Nur	nber
	City or Town			State ZIP	Code
				▼	
	Province	Postal Code	Country		
Pai	ct 5. Information About Your M	larital History			
1.	What is your current marital status?				
	☐ Single, Never Married ☐ Married	Divorced Widowe	ed Separated	Marriage Annulled	
	If you are single and have never married	d, go to Part 6. Information A l	oout Your Children.		
2.	If you are currently married, is your spo	use a current member of the U.S	S. armed forces?	☐ Yes	s 🗌 No
3.	How many times have you been married the Instructions for more information ab			ction of	
	Provide current marriage certificate and marriages were terminated (if applicable		decree, or death certifi	icate showing that your	prior
	If you are filing under one of the catego • Spouse of U.S. Citizen, Part 1. , • Spouse of U.S. Citizen in Qualif	Item Number 1.b.; or;		tem Number 1.d.	
	If you are not filing under one of the c	ategories above, skip to Part 6	•		
You	ur Current Marriage				
If yo	u are currently married, including if you	are legally separated, provide th	e following information	on about your current sp	ouse.
4.a.	Current Spouse's Legal Name				
	Family Name (Last Name)	Given Name (First N	Jame)	Middle Name (if app	licable)
4.b.	Current Spouse's Date of Birth (mm/dd/yyyy) 4.c.	Date You Entered into Marria with Current Spouse (mm/dd/	Č .		
4.d.	Is your current spouse's present physica	l address the same as your physi	 cal address?		
····	Yes	r dedress the sume as your physic	cui udui ess.		
	No (If you answered "No," provide	address in Part 14 Additional	Information)		
5 a			inioi mation.)		
5.a.	When did your current spouse become a				
	By Birth in the United States - Go to				
	Other - Complete Item Number 5.b				
5.b.	Date Your Current Spouse Became a U.	S. Citizen (mm/dd/yyyy)			

Par	t 5. Information About Your Ma	rital History	(continued)	A-				
6.	Current Spouse's Alien Registration Num	ber (A-Number)	(if any) ► A-					
7.	How many times has your current spouse been married? (See the Specific Instructions by Item Number section of the Instructions for more information about which marriages to include.)							
	Provide divorce decrees, annulment decreterminated (if applicable).	es, or death certi	ficates showing that all of y	our spouse's prior marr	iages were			
8.	Current Spouse's Current Employer or Co	ompany						
	Only answer Item Number 8. if you are the Employment Outside the United States		1., Item Number 1.d., Spo	ouse of U.S. Citizen in	Qualified			
Par	t 6. Information About Your Ch	ildren						
1.	Indicate your total number of children und	der 18 years of ag	ge.					
2.	Provide the following information about y columns, you must type or print one of th address(es) where those children live in P provided in Part 14. Additional Information	e valid options li art 14. Addition	sted. If any of your children	n do not reside with you	i, provide the			
			Residence	Relationship				
	Son or Daughter's Name (First Name and Family Name)	Date of Birth (mm/dd/yyyy)	(Valid options include: resides with me, does not reside with me, or unknown/ missing)	(Valid options include: biological son or daughter, stepchild, or legally adopted son or daughter)	Are you providing support for your son or daughter?			
					Yes No			
					Yes No			
					☐ Yes ☐ No			
Par	rt 7. Information About Your Em	iployment an	d Schools You Attend	ed				

1. List where you have worked or attended school full time or part time during the last 5 years if you are filing based on the general provision under Part 1., Item Number 1.a. If you are filing based on other naturalization eligibility options, see Part 7. in the Specific Instructions by Item Number section of the Instructions for the applicable period of time for which you must enter this information. Provide information for the complete time period for all employment, including foreign government employment such as military, police, and intelligence services. Begin by providing information about your most recent or current employment, studies, or unemployment. Provide the locations and dates where you worked, were self-employed, were unemployed, or have studied. If you worked for yourself and not for a specific employer, type or print "self-employed" for the employer name. If you were unemployed, type or print "unemployed." If you are retired, type or print "retired." If you need extra space to complete Part 7., use the space provided in Part 14. Additional Information.

Employer or School						School Dates	Occupation or			
Name	City/Town	State/ Province	ZIP Code/ Postal Code	Country	From (mm/dd/yyyy)	To (mm/dd/yyyy)	Occupation or Field of Study			
						PRESENT				

Pai	rt 8. Time Outside t	the United States	A-	
1.	provision under Part 1., Specific Instructions b this information. Start v completed within 24 horsee the Required Evide	y Item Number 1.a. If y y Item Number section with your most recent triurs) in the table. If you lence - Continuous Resid	de the United States during the last 5 years if you are filing to are filing based on other naturalization eligibility option of the Instructions for the applicable period of time for when p and work backwards. Do not include day trips (where the have taken any trips outside the United States that lasted the lence section of the Instructions for evidence you should be provided in Part 14. Additional Information.	ons, see Part 8. in the chich you must enter he entire trip was more than 6 months,
	Date You Left the United States (mm/dd/yyyy)	Countries to Which You Traveled		
				_
Pai	rt 9. Additional Info	ormation About Yo	u	
anyv Num	where in the world at any	y time, unless the questic tem Numbers 1 14., p	st provide information about any of your actions or condu on specifies otherwise. If you answer "Yes" to any of the rovide explanations and any additional information in the	questions in Item
1.	Have you EVER claims	ed to be a U.S. citizen (in	n writing or any other way)?	Yes No
2.			ny Federal, state, or local election in the United ction where aliens are eligible to vote, you may answer	Yes No
3.	Do you currently owe as	ny overdue Federal, state	e, or local taxes in the United States?	Yes No
4.	-	-	have you called yourself a "nonresident alien" on a to file a tax return because you considered yourself to	Yes No
Have	e you EVER:			
5.a.	Been a member of, invo		ssociated with any Communist or totalitarian party	Yes No
5.b.			following, or been a member of, involved in, or in any world that advocated any of the following:	Yes No
	• Opposition to all org	anized government;		
	• World communism;			
	• The establishment in	the United States of a to	otalitarian dictatorship;	
	 The overthrow by for United States or all for 		inconstitutional means of the Government of the	
			cer or officers of the Government of the United States e of their official character;	
	The unlawful damage	e, injury, or destruction of	of property; or	
	 Sabotage? 			

Par	t 9. Additional Information About You (continued)	A-						
	e you EVER been a member of, involved in, or in any way associated with, or have you EVER be, services or labor, or any other assistance or support to a group that:	prov	/ide	ed mo	oney, a	a thing	g of	
6.a.	Used a weapon or explosive with intent to harm another person or cause damage to property?					Yes		No
6.b.	Engaged (participated) in kidnapping, assassination, or hijacking or sabotage of an airplane, shi vehicle, or other mode of transportation?	ip,				Yes		No
6.c.	Threatened, attempted (tried), conspired (planned with others), prepared, planned, advocated for incited (encouraged) others to commit any of the acts listed in Item Numbers 6.a. or 6.b. ?	r, o	r			Yes		No
Have	you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participal	ted	in	any o	f the f	ollow	ing:	
7.a.	Torture?					Yes		No
7.b.	Genocide?					Yes		No
7.c.	Killing or trying to kill any person?					Yes		No
7.d.	Intentionally and severely injuring or trying to injure any person?					Yes		No
7.e.	Any kind of sexual contact or activity with any person who did not consent (did not agree) or wunable to consent (could not agree), or was being forced or threatened by you or by someone elements of the consent (could not agree).					Yes		No
7.f.	Not letting someone practice his or her religion?					Yes		No
7.g.	Causing harm or suffering to any person because of his or her race, religion, national origin, membership in a particular social group, or political opinion?					Yes		No
8.a.	Have you EVER served in, been a member of, assisted (helped), or participated in any military police unit?	or				Yes		No
8.b.	Have you EVER served in, been a member of, assisted (helped), or participated in any armed g group that carries weapons), for example: paramilitary unit (a group of people who act like a m group but are not part of the official military), self-defense unit, vigilante unit, rebel group, or group?	nilita	ary			Yes		No
	If you answered "Yes" to Item Number 8.a. or Item Number 8.b. , include the name of the conthe name of the military unit or armed group, your rank or position, and your dates of involvem your explanation in Part 14. Additional Information .							
9.	Have you EVER worked, volunteered, or otherwise served in a place where people were detain (forced to stay), for example, a prison, jail, prison camp (a camp where prisoners of war or poli prisoners are kept), detention facility, or labor camp, or have you EVER directed or participate other activity that involved detaining people?	tical		у		Yes		No
10.a.	Were you EVER a part of any group, or did you EVER help any group, unit, or organization that weapon against any person, or threatened to do so?	ıat u	ıse	d		Yes		No
10.b.	If you answered "Yes" to Item Number 10.a. , when you were part of this group, or when you this group, did you ever use a weapon against another person?	help	ed			Yes		No
10.c.	If you answered "Yes" to Item Number 10.a. , when you were part of this group, or when you this group, did you ever threaten another person that you would use a weapon against that person		ed			Yes		No
11.	Have you EVER sold, provided, or transported weapons, or assisted any person in selling, provor transporting weapons, which you knew or believed would be used against another person?	⁷ idir	ıg,			Yes		No
12.	Have you EVER received any weapons training, paramilitary training, or other military-type tr	aini	ngʻ	?		Yes		No
13.	Have you EVER recruited (asked), enlisted (signed up), conscripted (required to join), or used person under 15 years of age to serve in or help an armed group, or attempted or worked with o do so?	-		5		Yes		No
14.	Have you EVER used any person under 15 years of age to take part in hostilities or attempted of worked with others to do so? This could include participating in combat or providing services to combat (such as serving as a messenger or transporting supplies)		ted			Yes		No

Part 9. Additional Info	ormation About	You (continue	d)	A-						
If you answer "Yes" to any part of Item Number 15. below, complete the table below with each crime or offense even if your records have been sealed, expunged, or otherwise cleared. You must disclose this information even if someone, including a judge, law enforcement officer, or attorney, told you that it is no longer on your record, or told you that you do not have to disclose the information. If you need extra space, use the space provided in Part 14. Additional Information. Submit evidence to support your answers with your Form N-400.										
Include all the crimes and offenses in the United States or anywhere in the world (including domestic violence, driving under the influence of drugs or alcohol, and crimes and offenses while you were under 18 years of age) which you EVER :										
Committed, agreed to commit, or asked someone else to commit;										
• Were arrested, cited, detained, or confined by any law enforcement officer, military official (in the U.S. or elsewhere), or immigration official;										
Were charged with commit	tting, helping comm	it, or trying to com	ımit;							
• Pled guilty to;										
• Were convicted of;										
• Were placed in alternative adjudication, or deferred ad	•	abilitative program	for (for example, diver	rsion, deferred prosecution,	withheld					
Received a suspended sent	ence, clemency, am	nesty, or pardon fo	r, or were placed on pro	obation or paroled for.						
15.a. Have you EVER commutried to commit a crime				ed commit, or	Yes No					
15.b. Have you EVER been a official (in the U.S. or e or offense?					Yes No					
What was the crime or offense? (If convicted, provide crime of conviction. If not convicted, provide crime or offense listed in arrest, citation, charging document, or crime committed.)	Date of the Crime or Offense (mm/dd/yyyy)	Date of your conviction or guilty plea (if applicable) (mm/dd/yyyy)	Place of Crime or Offense (City or Town, State, Country)	disposition of the arrest, citation, or charge? (no charges	What was your sentence (if applicable)? (For example, 90 days in jail, 90 days on probation)					
					 					

your suspended sentence, probation, or parole?

If you answer "Yes" to any of the questions in **Item Numbers 17.a. - 19.**, provide an explanation in the space provided in **Part 14. Additional Information**. Submit evidence to support your answers.

If you received a suspended sentence, were placed on probation, or were paroled, have you completed

16.

No

Yes

Par	t 9. Additional Information About You (continued)	A-					
Have	you EVER:						
17.a.	Engaged in prostitution, attempted to procure or import prostitutes or persons for the purpose of prostitution, or received any proceeds or money from prostitution?	of			Yes	s [] No
17.b.	Manufactured, cultivated, produced, distributed, dispensed, sold, or smuggled (trafficked) any controlled substances, illegal drugs, narcotics, or drug paraphernalia in violation of any law or regulation of a U.S. state, the United States, or a foreign country?				Yes	s [] No
17.c.	Been married to more than one person at the same time?				Yes	5] No
17.d.	Married someone in order to obtain an immigration benefit?				Yes	5] No
17.e.	Helped anyone to enter, or try to enter, the United States illegally?				Yes	5] No
17.f.	Gambled illegally or received income from illegal gambling?				Yes	; <u> </u>] No
17.g.	Failed to support your dependents (pay child support) or to pay alimony (court-ordered financi support after divorce or separation)?	al			Yes	; <u> </u>] No
17.h.	Made any misrepresentation to obtain any public benefit in the United States?				Yes	s [] No
18.	Have you EVER given any U.S. Government officials any information or documentation that false, fraudulent, or misleading?	was			Yes	; <u> </u>] No
19.	Have you EVER lied to any U.S. Government officials to gain entry or admission into the UniStates or to gain immigration benefits while in the United States?	ited			Yes	s] No
Infor	answer "Yes" to Item Numbers 20 21. below, provide an explanation in the space provided mation and see the Specific Instructions by Item Number, Part 9. Additional Information information.						ons for
20.	Have you EVER been placed in removal, rescission, or deportation proceedings?				Yes	s [] No
21.	Have you EVER been removed or deported from the United States?				Yes	s [] No
	al Law requires nearly all people born as male who are either U.S. citizens or immigrants, 18 the Selective Service. See www.sss.gov .	hroug	h 25	years of	age,	to re	egister
22.a.	Are you a male who lived in the United States at any time between your 18th and 26th birthday not select "Yes" if you were a lawful nonimmigrant for all of that time period.)	ys? (Do		Yes	s [] No
22.b.	If you answered "Yes," to Item Number 22.a., did you register for the Selective Service?				Yes	5] No
22.c.	If you answered "Yes," to Item Number 22.b., provide information about your registration.						
	Date Registered (mm/dd/yyyy) Selective Service Number						
	answered "No," to Item Number 22.b. see the Specific Instructions by Item Number, Part at You of the Instructions for more information.	9. A	dditi	onal In	form	atior	1
If you	answer "Yes" to Item Numbers 23 24., provide an explanation in the space provided in Pan	rt 14.	Ado	litional	Info	mat	ion.
23.	Have you EVER left the United States to avoid being drafted in the U.S. armed forces?				Yes	; <u> </u>] No
24.	Have you EVER applied for any kind of exemption from military service in the U.S. armed for	rces?			Yes	s [] No
25.	Have you EVER served in the U.S. armed forces?				Yes	s [No

Pai	t 9. Additional Information About You (continued)	A -						
If yo	u answered "No" to Item Number 25., go to Item Number 30.a.							
26.a. Are you currently a member of the U.S. armed forces?								No
26.b.	If you answered "Yes" to Item Number 26.a. , are you scheduled to deploy outside the United including to a vessel, within the next 3 months? (Call the Military Help Line at 877-247-4645 transfer to a new duty station after you file your Form N-400, including if you are deployed of United States or to a vessel.)	if yo	ou	e		Yes		No
26.c.	If you answered "Yes," to Item Number 26.a., are you currently stationed outside the United	d Stat	tes?			Yes		No
26.d.	If you answered "No" to Item Number 26.a. , are you a former U.S. military service member currently residing outside of the U.S.?	who	is			Yes		No
If yo	a answer "Yes" to Item Numbers 27 29., provide an explanation in the space provided in Pa	rt 14	. A	dditi	onal l	nfor	mati	ion.
27.	Have you EVER been court-martialed or have you received a discharge characterized as othe honorable, bad conduct, or dishonorable, while in the U.S. armed forces?	r than	l			Yes		No
28.	Have you EVER been discharged from training or service in the U.S. armed forces because y an alien?	ou we	ere			Yes		No
29.	Have you EVER deserted from the U.S. armed forces?					Yes		No
	tem Numbers 30.a 37. see Specific Instructions by Item Number, Part 9. Additional Infer "Yes" to Item Number 30.a., provide an explanation in the space provided in Part 14. Add						f yo	u
30.a.	Do you now have, or did you EVER have, a hereditary title or an order of nobility in any foreign country?	N	o (s	skip t	o Iten	n Nu	mbe	r 31.)
30.b.	If you answered "Yes," to Item Number 30.a., are you willing to give up any inherited titles	or or	ders			Yes		No
	of nobility, (list titles), that you	have	in	a				
	foreign country at your naturalization ceremony?							
-	a answer "No" to any question except Item Number 33. , see the Oath of Allegiance section omation.	f the	Inst	ructi	ons fo	or mo	re	
31.	Do you support the Constitution and form of Government of the United States?					Yes		No
32.	Do you understand the full Oath of Allegiance to the United States (see Part 16. Oath of Allegiance	egian	ce)î	•		Yes		No
33.	Are you unable to take the Oath of Allegiance because of a physical or developmental disabilimental impairment? If you answer "Yes," skip Item Numbers 34 37. and see the Legal Gaster Surrogate, or Designated Representative section in the Instructions .					Yes		No
34.	Are you willing to take the full Oath of Allegiance to the United States?					Yes		No
35.	If the law requires it, are you willing to bear arms (carry weapons) on behalf of the United Sta	ites?				Yes		No
36.	If the law requires it, are you willing to perform noncombatant services (do something that do include fighting in a war) in the U.S. armed forces?	es no	t			Yes		No
37.	If the law requires it, are you willing to perform work of national importance under civilian di (do non-military work that the U.S. Government says is important to the country)?	rectio	n			Yes		l No

Part 10. Request for a Fee Reduction	A-
For information about fees, fee waivers, and reduced fees, see Form G-1055, Fee Schedule, at www.teduced.com/lete Item Numbers 1 5.b. . If you are not eligible for a reduced fee, complete Item Part 11.	
My household income is less than or equal to 400% of the Federal Poverty Guidelines (see Inst documentation).	ructions for required
Yes (complete Item Numbers 2 5.b.)	
☐ No (skip to Part 11.)	
2. Total household income:	
3. My household size is:	
1. Total number of household members earning income including yourself:	
5.a. I am the head of household.	Yes No
5.b. Name of head of household (if you selected "No" in Item Number 5.a.):	
Part 11. Applicant's Contact Information, Certification, and Signature Applicant's Contact Information Provide your daytime telephone number, mobile telephone number (if any), and email address (if any)	
 Applicant's Daytime Telephone Number Applicant's Mobile Telephone 	
7 Appreciant's Baytime Telephone Plannock	ione rumber (ir any)
Applicant's Email Address (if any)	
Applicant's Certification and Signature	
certify, under penalty of perjury, that I provided or authorized all of the responses and information on application, I read and understand or, if interpreted to me in a language in which I am fluent by the understood, all of the responses and information contained in, and submitted with, my application, an information are complete, true, and correct. Furthermore, I authorize the release of any information that USCIS may need to determine my eligibility for an immigration request and to other entities and administration and enforcement of U.S. immigration law.	ne interpreter listed in Part 12. , and that all of the responses and the from any and all of my records a persons where necessary for the
 Applicant's Signature (or signature of a legal guardian, surrogate, or designated representative, if applicable) 	Date of Signature (mm/dd/yyyy)
-7	

Pa	rt 12. Interpreter's Contact Information, Certif	catio	on, and Signature	A	-
Int	terpreter's Full Name				
1.	Interpreter's Family Name (Last Name)		Interpreter's Given Name (I	First	t Name)
2.	Interpreter's Business or Organization Name				
Int	terpreter's Contact Information				
3.	Interpreter's Daytime Telephone Number	4.	Interpreter's Mobile Telep	hon	ne Number (if any)
5.	Interpreter's Email Address (if any)	_]			
Int	terpreter's Certification and Signature	_			
I cer	rtify, under penalty of perjury, that I am fluent in English and],
and	I have interpreted every question on the application and Instruguage, and the applicant informed me that he or she understood				
6.	Interpreter's Signature			Γ	Date of Signature (mm/dd/yyyy)
\Rightarrow					
Ot	ert 13. Contact Information, Certification, and Secher Than the Applicant separer's Full Name	-B			g v
1.	Preparer's Family Name (Last Name)		Preparer's Given Name (Fir	st N	Jame)
2.	Preparer's Business or Organization Name				
Pro	eparer's Contact Information				
3.	Preparer's Daytime Telephone Number	4.	Preparer's Mobile Telepl	hone	e Number (if any)
5.	Preparer's Email Address (if any)	_ _			
Pro	eparer's Certification and Signature				
that only	rtify, under penalty of perjury, that I prepared this application all of the responses and information contained in and submitted information provided by the applicant. The applicant review erstands the responses and information in or submitted with the	ed with	h the application are comple responses and information	ete,	true, and correct and reflects
6.	Preparer's Signature			_ <u>[</u>	Date of Signature (mm/dd/yyyy)
\Rightarrow	·				

Pai	t 14. Additiona	l Information	l		A-
nan `ype	what is provided, yo	u may make cop and A-Number a	ies of this page to t the top of each s	on within this application, use the space of complete and file with this application asheet; indicate the Page Number , Part N	or attach a separate sheet of paper
•	Family Name (Last	Name)		Given Name (First Name)	Middle (if applicable)
	Page Number	Part Number	Item Number		
•	Page Number	Part Number	Item Number		
	Page Number	Part Number	Item Number		
i .	Page Number	Part Number	Item Number		

Part 15. Signature at Interview		A-						
I swear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form N-400, Application for Naturalization, subscribed by me, including corrections, are complete, true, and correct. The evidence submitted by me are complete, true, and correct.								
Subscribed to and sworn to (affirmed) before me								
USCIS Officer's Printed Name or Stamp		Date of Signature (mm/dd/yyyy)						
Applicant's Signature	USCIS Officer's Signatu	ıre						
D 146 O 1 419 1								
Part 16. Oath of Allegiance								
If your application is approved, you will be scheduled for a naturalization following Oath of Allegiance immediately prior to becoming a naturalistillingness to take this Oath:	-	J 1						
I hereby declare on oath, that I absolutely and entirely renounce and abstate, or sovereignty, of whom or which I have heretofore been a subject	<i>-</i>	delity to any foreign prince, potentate,						
that I will support and defend the Constitution and laws of the United S	States of America against	all enemies, foreign, and domestic;						
that I will bear true faith and allegiance to the same;								
that I will bear arms on behalf of the United States when required by the	ne law;							
that I will perform noncombatant service in the armed forces of the Un	ited States when required	l by the law;						
that I will perform work of national importance under civilian direction	n when required by the law	w; and						
that I take this obligation freely, without any mental reservation or pur	pose of evasion; so help n	ne God.						
Applicant's Signature		Date of Signature (mm/dd/yyyy)						