

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 05/31/2019

U.S. Citizenship and Immigration Services

For USCIS Use Only						
Barcode		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 State Bar Number (if applicable)	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 Naturalization Applicant ► A-						
1. Current Legal Name (do not provide a nickname						
Family Name (Last Name)	Given Name (First Name)	Middle Name				
	SILOT					
 Other Names Used (if any) Provide all other names you have ever used, incluthis section, use the space provided in Part 8. Ac 		cknames. If you need extra space to complete				
Family Name (Last Name)	Given Name (First Name)	Middle Name				
11/-	16/20	110				
3. Date of Birth (mm/dd/yyyy) 4. USCIS (Online Account Number (if any)	410				
5. Physical Address (do not provide a PO Box in the Street Number and Name	is space unless it is your only addre	Apt. Ste. Flr. Number				
City or Town	County	State ZIP Code				
Province or Region Postal	Code Country					

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	Part 1. Information About You, the Naturalization Applicant (continued)	► A-
6.	6. Mailing Address	
	In Care Of Name (if any)	
	Street Number and Name Ap	ot. Ste. Flr. Number
	City or Town County Sta	ate ZIP Code
		•
	Province or Region Postal Code Country	
7.	7. Contact Information	
,.	A. Work Telephone Number B. Evening Telephone	e Number
Pa	Part 2. Information About Form N-400 Denial On Which You (the Natura	alization Applicant) Are
	Requesting a Hearing	
1.	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.	1. Did you file your Form N-400 on the basis of qualifying military service?	Yes No
Pa	Part 3. Biographic Information	
1.	Lethnicity (Select only one box)	
	☐ Hispanic or Latino ☐ Not Hispanic or Latino	
2.	2. Race (Select all applicable boxes)	1 ()
	American Indian or Alaska Native Asian Black or African Other Pacific Island	
3.	3. Height Feet Inches	
4.	1. Weight Pounds []	
5.	5. Eye Color (Select only one box)	
	Black Blue Brown Gray Green Hazel Maro	on Pink Unknown/Other
6.	6. Hair Color (Select only one box)	
	Bald Black Blond Brown Gray Red S (No hair)	andy White Unknown/Other

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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 expace provided in Part 8. Additional Information .	tra space t	o comple	ete this secti	on, use the
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Da	art 5 Naturalization Applicant's Statement Contact Information						
	art 5. Naturalization Applicant's Statement, Contact Information, ertification, and Signature	A-					
NC	OTE: Read the Penalties section of the Form N-336 Instructions before completing this section	1.					
No	aturalization Applicant's Statement						
NC	OTE: Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for	or 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. The interpreter named in Part 6. read to me every question and instruction on this re	quest and my answer to					
	every question in , a language in v	which I am fluent, and I					
	understood everything.						
2.	Naturalization Applicant's Statement Regarding the Preparer						
	At my request, the preparer named in Part 7.,	,					
	prepared this request for me based only upon information I provided or authorized.						
N	aturalization Applicant's Contact Information						
3.	Naturalization Applicant's Daytime Telephone Number 4. Naturalization Applicant	's Mobile Telephone Number (if any)					
5.	Naturalization Applicant's Email Address (if any)						
IV	aturalization Applicant's Certification	()					
req	pies of any documents I have submitted are exact photocopies of unaltered, original documents quire that I submit original documents to USCIS at a later date. Furthermore, I authorize the releast USCIS may need to determine my eligibility for the immigration benefit that I seek.						
ent	urthermore authorize release of information contained in this request, in supporting documents, tities and persons where necessary for the administration and enforcement of U.S. immigration	aw.					
	nderstand that USCIS may require me to appear for an appointment to take my biometrics and, ovide biometrics, I will be required to sign an oath reaffirming that:	at that time, if I am required to					
	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.						
	ertify, under penalty of perjury, that I provided or authorized all of the information in my requestormation contained in, and submitted with, my request, and that all of this information is complete.						
N	aturalization Applicant's Signature						
6.	Naturalization Applicant's Signature	Date of Signature (mm/dd/yyyy)					

 $\textbf{NOTE TO ALL NATURALIZATION APPLICANTS:} \ \ \text{If you do not completely fill out this } \textbf{request, USCIS} \ \ \text{may deny your request.}$

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Pa	rt 6. Interpreter's Contact Information, Certification, and Signature A-
	vide the following information about the interpreter.
Int	terpreter's Full Name
1.	Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)
1.	Interpreter's Paintry Name (Last Name)
2.	Interpreter's Business or Organization Name (if any)
Int	terpreter's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number Given The state of the
	City or Town State ZIP Code
	Province or Region Postal Code Country
7	
Ini	terpreter's Contact Information
4.	Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Telephone Number (if any)
6.	Interpreter's Email Address (if any)
Int	terpreter's Certification
I ce	rtify, under penalty of perjury, that:
Iter on t inst	n fluent in English and , which is the same language specified in Part 5. , n B. , in Item Number 1. ; and I have read to this naturalization applicant in the identified language every question and instruction this request and his or her answer to every question. The naturalization applicant informed me that he or she understands every ruction, question, and answer on the request, including the Naturalization Applicant's Certification , and has verified the irracy of every answer.
Int	terpreter's Signature
7.	Interpreter's Signature Date of Signature (mm/dd/yyyy)

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	reparing this Request, if Other Than the Naturalization Applicant A-
Pro	ovide the following information about the preparer.
Pr	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)
Pr	reparer's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number
	City or Town State ZIP Code
	Province or Region Postal Code Country
Pr	reparer's Contact Information
4.	Preparer's Daytime Telephone Number 5. Preparer's Mobile 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 trained in, and submitted with, his or her request, including the Naturalization Applicant's Certification , and that all of this permation is complete, true, and correct. I completed this request based only on information that the naturalization applicant wided to me or authorized me to obtain or use.
Pr	reparer's Signature
8.	Preparer's Signature Date of Signature (mm/dd/yyyy)

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Part X.	Additional	Inform	nation

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.	Fan	nily Name (Last Name)		Given Name	(First Name)	Middle Name	
•		Jl					
2.	A-N	Number (if any) ► A-					
3.	A. D.	Page Number B.	Part Number	C. Ite	em Number		
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4.		Page Number B.	Part Number	C. Ite	em Number)R	
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6.	A.	Page Number B.	Part Number	C. Ite	em Number		
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