

Application for Naturalization

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form N-400 OMB No. 1615-0052 Expires 09/30/2022

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► START HERE - Type or print in black ink. Type or print "N/A" if an item is not applicable or the answer is none, unless otherwise indicated. Failure to answer all of the questions may delay U.S. Citizenship and Immigration Services (USCIS) processing your Form N-400. NOTE: You must complete Parts 1 15.										
birthday,	you may already be a Ucis.gov for more information	we mother or father is a U.S. citizen by birth, or was J.S. citizen. Before you consider filing this application on this topic and to review the instructions for I Application for Citizenship and Issuance of Certification	on, please visit the USCIS Website at Form N-600, Application for Certificate of							
NOTE: Are either of your parents a United States citizen? If you answer "Yes," then complete Part 6. Information About Your Parents as part of this application. If you answer "No," then skip Part 6. and go to Part 7. Biographic Information .										
Part 1.	Part 1. Information About Your Eligibility (Select only one box or your Enter Your 9 Digit A-Number:									

For	m N	-400 may be delayed	1)		► A-				
1.	You	are at least 18 years of a	ge and:						
	A.	Have been a lawfu	al permanent resident of	the United States for at least 5 years	S.				
	В.	and living with the	-	the United States for at least 3 years se for the last 3 years, and your spo 400.		•			
	C.	spouse is regularly 319(b).) If your re	engaged in specified er esidential address is outs	ited States and you are the spouse of item of the it	ration and ling under	l Nationali r Section 3	ty Act (IN 19(b), sel	VA) sec	tion
	D.	Are applying on the	ne basis of qualifying mi	litary service.					
	E.	Other (Explain):							
		·							
Par	rt 2.	Information About	t You (Person apply	ing for naturalization)					
1.	You	r Current Legal Name (d	lo not provide a nicknan	ne)					
	Fam	ily Name (Last Name)	-	Given Name (First Name)	M	iddle Nam	e (if appl	icable)	
•		N F 4 A T/A	W. D.	(P. 11 (C. 1/15 11 11)					
2.		_	ppears on Your Permane	nt Resident Card (if applicable)					
	Fam	ily Name (Last Name)		Given Name (First Name)	M	iddle Nam	e (if appl	icable)	

Pa	rt 2. Information About You (Person applying for naturalization) (continued) A-
3.	Other Names You Have Used Since Birth (include nicknames, aliases, and maiden name, if applicable)
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
4.	Name Change (Optional)
	Read the Form N-400 Instructions before you decide whether or not you would like to legally change your name. Would you like to legally change your name? Yes No
	If you answered "Yes," type or print the new name you would like to use in the spaces provided below.
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
5.	U.S. Social Security Number (if applicable) 6. USCIS Online Account Number (if any)
	▶
7.	Gender 8. Date of Birth 9. Date You Became a Lawful
	Male Female (mm/dd/yyyy) Permanent Resident (mm/dd/yyyy)
10.	Country of Birth 11. Country of Citizenship or Nationality
12.	Do you have a physical or developmental disability or mental impairment that prevents you from demonstrating your knowledge and understanding of the English language and/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.
13.	Exemptions from the English Language Test
	A. Are you 50 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 20 years at the time you file your Form N-400?
	B. Are you 55 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 15 years at the time you file your Form N-400?
	C. Are you 65 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 20 years at the time you file your Form N-400? (If you meet this requirement, you will also be given a simplified version of the civics test.)
Pai	rt 3. Accommodations for Individuals With Disabilities and/or Impairments
NO	TE: Read the information in the Form N-400 Instructions before completing this part.
1.	Are you requesting an accommodation because of your disabilities and/or impairments?
	If you answered "Yes," select any applicable box.
	A. I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).)
	B. I am blind or have low vision and request the following accommodation:

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		Accommodations for Indements (continued)	ividuals With Dis	sabilit	ies and/o	r	A-					
	C.	I have another type of disadisability and/or impairment					ir). (De	escribe	the na	ture o	f your	
Pa	rt 4.	Information to Contact Y	ou									
1.	Day	time Telephone Number		2.	Work Te	lephone Numbe	er (if an	y)				
3.	Eve	ening Telephone Number		4.	Mobile 7	elephone Num	ber (if a	ıny)				
5.	Ema	ail Address (if any)										
Pa	rt 5.	Information About Your	Residence									
1.	A.	ere have you lived during the last e lived during the last five years. Current Physical Address Street Number and Name City or Town Province or Region (foreign address only) Dates of Residence From (mm/dd/yyyy	Count Postal Code (foreign addre	y ess only	additional	sheets of paper	State	Apt.	Ste.	Flr.	Numb	ber
	В.	Current Mailing Address (if different In Care Of Name (if any) Street Number and Name City or Town	Count				State	Apt.		Flr.	Numb	per
		Province or Region (foreign address only)	Postal Code (foreign addre	-	r)	Country (foreign addre	ess only)			- [

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Part	5.	Informati	on About Your Res	idence	(continued)			A -				
		Physical Add										
		Street Number							Apt.	Ste.	Flr.	Number
		City or Town	1		County		St	ate		_ ZI	P Cod	le + 4
		Province or I (foreign addr		Postal (foreig	Code n address only)		Country (foreign address	s only)			
					,				<u> </u>			
		Dates of Residence	From (mm/dd/yyyy)	To (r	nm/dd/yyyy)							
]	D.	Physical Add	lress 3									
		Street Number							Apt.	Ste.	Flr.	Number
		City or Town	1		County		St	ate		ZI	P Cod	le + 4
												-
		Province or I (foreign addr		Postal (foreig	Code n address only)		Country (foreign address	s only)			
					ir address sing)		(Toreign address	9 9111	<u>/</u>			
		Dates of	From (mm/dd/yyyy)	To (r	nm/dd/yyyy)		J [
		Residence										
]	E.	Physical Add	lress 4									
		Street Number	er and Name						Apt.	Ste.	Flr.	Number
		City or Town	1		County		St	ate		$\neg \Box$	P Cod	le + 4
] - [
		Province or I (foreign addr		Postal (foreig	n address only)		Country (foreign address	s only)			
		Dates of	From (mm/dd/yyyy)	To (r	nm/dd/yyyy)							
		Residence										
D		T 0										
			on About Your Par									
If neit	her	one of your	parents is a United Stat	es citizer	ı, then skip this pa	ırt an	d go to Part 7.					
1.	Wer	re your parent	s married before your 18t	h birthda	y?] Ye	es No
Info	rm	ation Abou	t Your Mother									
2.]	Is vo	our mother a	U.S. citizen?							Г	Y	es No
	-		Yes." complete the follow	wing info	rmation. If you an	swere	d "No." go to Ite i	m Nu	mber :	3.	_	

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Par	t 6.	Information About Your Parents (continued) A-
	A.	Current Legal Name of U.S. Citizen Mother
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	B.	Mother's Country of Birth C. Mother's Date of Birth (mm/dd/yyyy)
	D.	Date Mother Became a U.S. Citizen E. Mother's A-Number
		(if known) (mm/dd/yyyy) (if any)
		► A-
Info	rm	ation About Your Father
3.		
3.	•	our father a U.S. citizen? Yes No
		ou answered "Yes," complete the information below. If you answered "No," go to Part 7.
	Α.	Current Legal Name of U.S. Citizen Father
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	В.	Father's Country of Birth C. Father's Date of Birth (mm/dd/yyyy)
	D.	Date Father Became a U.S. Citizen (if known) (mm/dd/yyyy) E. Father's A-Number (if any)
		► A-
Par	t 7.	Biographic Information
		USCIS requires you to complete the categories below to conduct background checks. (See the Form N-400 Instructions for
		rmation.)
1.	Ethi	nicity (Select only one box)
		Hispanic or Latino Not Hispanic or Latino
2.	Rac	e (Select all applicable boxes)
		White Asian Black or American Indian Native Hawaiian or
		African American or Alaska Native Other Pacific Islander
3.	Heig	ght Feet Inches 4. Weight Pounds
5.	Eye	color (Select only one box)
		Black Blue Brown Gray Green Hazel Maroon Pink Unknown/
_		Other
6.	Hair	r color (Select only one box) Bald Black Blond Brown Gray Red Sandy White Unknown/
		(No hair)

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Pai	rt 8. Information About Your Employment and Schools You Attended		A-					
perio empl unen	where you have worked or attended school full time or part time during the last five years. P. d. Include all military, police, and/or intelligence service. Begin by providing information a oyment, studies, or unemployment (if applicable). Provide the locations and dates where yo aployed, or have studied for the last five years. If you worked for yourself, type or print "self or print "unemployed." If you need extra space, use additional sheets of paper.	about y u work	our ed,	most i were s	ecent o	or cur ploye	rent d, we	re
ι.	Employer or School Name							
	Street Number and Name		_	Apt.	Ste.	Flr.	Nun	nber
				Ш		Ш		
	City or Town	Stat	e		_ ZI	P Co	de + 4	
] - [
	Province or Region Postal Code Country (foreign address only) (foreign address only) (foreign address only)	dress (only)				
	Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation							
	Date 10 (Imm dayyyy)							
2.	Employer or School Name							
	Street Number and Name			Apt.	Ste.	Flr.	Nun	nber
	City or Town	Stat				 P Co	10 + 4	
	City of Town					1 CO] - [
	Province or Region Postal Code Country (foreign address only) (foreign address only) (foreign address only)	· · · · · · · · · · · · · · · · · · ·						
	Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation							
3.	Employer or School Name							
	Street Number and Name			Apt.	Ste.	Flr.	Nun	nber
	City or Town	Stat	— е		ZI	P Coo	de + 4	
							٦- [
	Province or Region Postal Code Country (foreign address only) (foreign address only) (foreign address only)	dress	only)				
	Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation							1

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Pa	rt 9.	Time Outside	the United States			A-		
1.	Hov	w many total days	(24 hours or longer) d	lid you spend outside the	United States during the	last 5 ye	ears?	days
2.	Hov	w many trips of 24	hours or longer have	you taken outside the Uni	ted States during the las	t 5 years	?	trips
3.				that you have taken outsi f you need extra space, use			ast 5 yea	ars. Start with
	D	ate You Left the United States (mm/dd/yyyy)	Date You Returned to the United States (mm/dd/yyyy)	Did Trip Last 6 Months or More?	Countries t Which You Traveled			Total Days Outside the United States
				☐ Yes ☐ No				
				☐ Yes ☐ No				
				☐ Yes ☐ No				
				☐ Yes ☐ No				
				☐ Yes ☐ No				
				☐ Yes ☐ No				
Pa	rt 10). Information	About Your Mari	tal History				
l .	Wh	at is your current r	marital status?	· · · · · · · · · · · · · · · · · · ·				
		Single, Never Mar		Divorced Widow	ed Separated	Marria	ge Annu	ılled
		•	nave never married, go				50 1 22220	
2.		•		ember of the U.S. armed	forces?		Г	Yes No
3.	Hov	•	e you been married (incl	luding annulled marriages		ple, and	L	
١.		•	•	g information about your o	current spouse.			
	•	Current Spouse's		,	r			
		Family Name (La	9	Given Name (Fir	st Name)	Middl	e Name	(if applicable)
					,			<u> </u>
	В.	Current Spouse's	Previous Legal Name					
	Σ.	Family Name (La	_	Given Name (Fir	st Name)	Middl	e Name	(if applicable)
			,					(» FF »)
	C.	Other Names Use	nd by Current Spage (is	nclude nicknames, aliases.	and maidan nama if a	L	`	
	C.	Family Name (La	-	Given Name (Fir	•	-		(if applicable)
		Tanniy Ivanic (La	ist ivallie)	Given ivalie (i ii	st (vaine)		.c rvairie	(п аррпсаоте)
	D.	Current Spouse's (mm/dd/yyyy)		Date You Entered into Ma with Current Spouse (mm.	•			
		· · · · · · · · · · · · · · · · · · ·		T /				

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Pa	rt 10	0. Information About Your M	arital	History (continue	ed)	A-					
	F.	Current Spouse's Present Home Addr	ess								
		Street Number and Name					Apt.	Ste.	Flr.	Number	
		City or Town		County		State	_	ZI	P Cod	le + 4	
]-[
		Province or Region (foreign address only)		al Code ign address only)	Country (foreign add	dress only	y)				
	G.	Current Spouse's Current Employer o	or Comp	any							
5.	Is y	your current spouse a U.S. citizen?] Ye	es No	
	If y	ou answered "Yes," answer Item Num	ıber 6.	If you answered "No	," go to Item Num	ber 7.					
6.	If y	your current spouse is a U.S. citizen, co	mplete	the following inform	ation.						
	A.	When did your current spouse become	e a U.S.	citizen?							
		At Birth - Go to Item Number 8.		Other - Complete	the following infor	mation.					
	В.	Date Your Current Spouse Became a U.S. Citizen (mm/dd/yyyy)									
7.	If v	our current spouse is not a U.S. citizen	compl	ata the following infe	ormation						
/٠	п у А.	•	-	•		umber (i	fany)				
	Α,	A. Current Spouse's Country of Citizenship or Nationality ■ B. Current Spouse's A-Number (if any) ■ A-									
	C.	Current Spouse's Immigration Status									
		Lawful Permanent Resident	Other (Explain):							
8.	oth	w many times has your current spouse er people, and marriages to the same po vide the following information about y	erson)?	If your current spou	se has been married	_	0				
	•	our current spouse has had more than o				on addit	ional sł	neets o	f nane	er.	
	-	Legal Name of My Current Spouse's	_			011 444011	101141 01		- pup		
		Family Name (Last Name)	11101 Dp	Given Name (Firs	st Name)	Mid	ldle Na	me (if	applic	able)	
		,						- (TI		
	В.	Immigration Status of My Current Sp	ouse's F	rior Spouse (if know							
	ъ.	U.S. Citizen Lawful Perma		•	(Explain):						
	C	Date of Birth of My Current Spouse's			` • ′	's					
	С.	Prior Spouse (mm/dd/yyyy)		Prior Spouse	rry Current Spouse	3					
	E.	Country of Citizenship or Nationality	of My	Current							
		Spouse's Prior Spouse									

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Pa	rt 1(O. Information About Your Marital History (continued) A-
	F.	My Current Spouse's Date of Marriage G. Date My Current Spouse's Marriage Ended with Prior Spouse (mm/dd/yyyy) with Prior Spouse (mm/dd/yyyy)
	Н.	How My Current Spouse's Marriage Ended with Prior Spouse
		Annulled Divorced Spouse Deceased Other (Explain):
9.		ou were married before, provide the following information about your prior spouse. If you have more than one previous riage, provide that information on additional sheets of paper.
		My Prior Spouse's Legal Name
	А.	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
		Tanny Ivanic (East Ivanic) Given Ivanic (First Ivanic) Ividede Ivanic (II applicable)
	В.	My Prior Spouse's Immigration Status When My Marriage Ended (if known)
	ъ.	U.S. Citizen Lawful Permanent Resident Other (Explain):
	C.	My Prior Spouse's Date of Birth (mm/dd/yyyy) D. My Prior Spouse's Country of Birth
	Е.	My Prior Spouse's Country of Citizenship or Nationality F. Date of Marriage with My Prior Spouse (mm/dd/yyyy)
	G.	Date Marriage Ended with My Prior Spouse (mm/dd/yyyy)
	TT	Have Manuface Ended with Mr. Drien Strause
	п.	How Marriage Ended with My Prior Spouse Annulled Divorced Spouse Deceased Other (Explain):
Pa	rt 11	1. Information About Your Children
1.		icate your total number of children. (You must indicate ALL children, including: children who are alive,
1.		sing, or deceased; children born in the United States or in other countries; children under 18 years of age or
		er; children who are currently married or unmarried; children living with you or elsewhere; current ochildren; legally adopted children; and children born when you were not married.)
2.	-	
4.		vide the following information about all your children (sons and daughters) listed in Item Number 1. , regardless of age. list any additional children, use additional sheets of paper.
	A.	Child 1
		Current Legal Name
		Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
		A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth
		► A-

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rt 11	1. Information About Your Children (continued) A-
	Current Address
	Street Number and Name Apt. Ste. Flr. Number
	City or Town County State ZIP Code + 4
	Province or Region Postal Code Country
	(foreign address only) (foreign address only) (foreign address only)
	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)
В.	Child 2
	Current Legal Name
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	A Number (if and) Date of Birth (non-Alderman) Country of Birth
	A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth
	Current Address
	Street Number and Name Apt. Ste. Flr. Number
	City or Town County State ZIP Code + 4
	Province or Region Postal Code Country
	(foreign address only) (foreign address only) (foreign address only)
	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)
C.	Child 3
	Current Legal Name
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	Tuming Frame (East Frame)
	A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth
	A-Number (II any) Date of Birth (mm/dd/yyyy) Country of Birth
	P A

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Pa	rt 11	. Information About Your Chil	dren (continued)		A-					
		Current Address						'		
		Street Number and Name				Apt.	Ste.	Flr.	Num	ıber
		City or Town	County	Sta	te		ZIP	Code	e + 4	
									-	
		\mathcal{E}	Postal Code (foreign address only)	Country (foreign address	only)					
		(Totelgii address omy)	(Totelgii address only)	(Totelgii address	Omy,	1				
		What is your child's relationship to you? stepchild, legally adopted child)	(for example, biological child,							
	D.	Child 4								
		Current Legal Name								
		Family Name (Last Name)	Given Name (First Nam	ne)	M	iddle N	Name (if app	licab	ole)
		A-Number (if any)	Date of Birth (mm/dd/yyyy)	Country of Birth						
		► A-								
		Current Address								
		Street Number and Name				Apt.	Ste.	Flr.	Num	ber
							Ш	Ш		
		City or Town	County	Sta	te		→ ZIP	Code	e + 4 	
		Durania and Duranian	Postal Code	Country] - [
		\mathcal{E}	(foreign address only)	Country (foreign address	only))				
		What is your child's relationship to you?	(for example, biological child,							
		stepchild, legally adopted child)								
Par	rt 12	2. Additional Information About	t Vou (Person Applying for	r Naturalizatio	n)					
			1100			ovenloss.	otion o	n ode	lition	no1
		tem Numbers 1 21. If you answer "Yepaper.	es to any of these questions, men	idde a typed of pr	mea	ехріап	iation (ni auc	шиоі	iai
1.	Hav	ve you EVER claimed to be a U.S. citizer	n (in writing or any other way)?] Ye	s	No
2.	Hav	ve you EVER registered to vote in any Fe	ederal, state, or local election in t	he United States?	•] Ye	s [No
3.	Hav	ve you EVER voted in any Federal, state,	or local election in the United S	tates?] Ye	s [No
4.	A.	Do you now have, or did you EVER have country?	ve, a hereditary title or an order of	of nobility in any	foreig	gn		Ye	s	No
	В.	If you answered "Yes," are you willing thave in a foreign country at your natural		orders of nobility	that y	/ou] Ye	s	No
5.	Hav	ve you EVER been declared legally incor	mpetent or been confined to a me	ental institution?] Ye	s [No

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		2. Additional Information About You lization) (continued)	ou (Person Applying for	A-	
6.	Do	you owe any overdue Federal, state, or local t	axes?		Yes No
7.	A.	Have you EVER not filed a Federal, state, or resident?	r local tax return since you became a lawful pe	rmanent	Yes No
	B.	If you answered "Yes," did you consider you	rrself to be a "non-U.S. resident"?		Yes No
8.		ve you called yourself a "non-U.S. resident" or ful permanent resident?	n a Federal, state, or local tax return since you	became a	Yes No
9.	A.		d in, or in any way associated with, any organiciety, or similar group in the United States or in		Yes No
	В.	If you answered "Yes," provide the informati additional sheets of paper and provide any ev	ion below. If you need extra space, attach the vidence to support your answers.	names of the oth	er groups on
		Name	Purpose	Dates of M	embership
		of the	of the	From	To
		Group	Group	(mm/dd/yyyy)	(mm/dd/yyyy)
10.	Hay	ve you EVER been a member of or in any wa	y associated (either directly or indirectly) with		
10.		The Communist Party?	y associated (claic) anectry of maneetry) with	Г	☐ Yes ☐ No
		Any other totalitarian party?			Yes No
	C.	A terrorist organization?			Yes No
11.		ve you EVER advocated (either directly or inclence?	directly) the overthrow of any government by f	orce or	Yes No
12.		ve you EVER persecuted (either directly or in gin, membership in a particular social group, o	directly) any person because of race, religion, a prolitical opinion?	national	Yes No
13.		ween March 23, 1933 and May 8, 1945, did yoirectly) with:	ou work for or associate in any way (either dire	ectly or	
	A.	The Nazi government of Germany?			Yes No
	В.	Any government in any area occupied by, all government of Germany?	lied with, or established with the help of the Na	azi [Yes No
	С.		amilitary unit, self-defense unit, vigilante unit, termination camp, concentration camp, prisone		Yes No

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	r t 1 2 tura		
14.	We	re you EVER involved in any way with any of the following:	
	A.	☐ Yes ☐ No	
	В.	Torture?	☐ Yes ☐ No
	C.	Killing, or trying to kill, someone?	Yes No
	D.	Badly hurting, or trying to hurt, a person on purpose?	Yes No
E. Forcing, or trying to force, someone to have any kind of sexual contact or relations?		Forcing, or trying to force, someone to have any kind of sexual contact or relations?	Yes No
	F.	Not letting someone practice his or her religion?	Yes No
15.		re you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of owing groups:	the
	A.	Military unit?	Yes No
	В.	Paramilitary unit (a group of people who act like a military group but are not part of the official military)?	l Yes No
	C.	Police unit?	Yes No
	D.	Self-defense unit?	Yes No
	E.	Vigilante unit (a group of people who act like the police, but are not part of the official police)?	? Yes No
	F.	Rebel group?	Yes No
	G.	Guerrilla group (a group of people who use weapons against or otherwise physically attack the military, police, government, or other people)?	Yes No
	н.	Militia (an army of people, not part of the official military)?	Yes No
	I.	Insurgent organization (a group that uses weapons and fights against a government)?	Yes No
16.	We	re you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the fo	llowing:
	A.	Prison or jail?	Yes No
	B.	Prison camp?	Yes No
	C.	Detention facility (a place where people are forced to stay)?	Yes No
	D.	Labor camp (a place where people are forced to work)?	Yes No
	E.	Any other place where people were forced to stay?	Yes No
17.		re you EVER a part of any group, or did you EVER help any group, unit, or organization that u apon against any person, or threatened to do so?	sed a Yes No
	A.	If you answered "Yes," when you were part of this group, or when you helped this group, did y use a weapon against another person?	rou ever Yes No
	В.	If you answered "Yes," when you were part of this group, or when you helped this group, did y tell another person that you would use a weapon against that person?	rou ever Yes No
18.		I you EVER sell, give, or provide weapons to any person, or help another person sell, give, or propons to any person?	rovide Yes No
	A.	If you answered "Yes," did you know that this person was going to use the weapons against and person?	other Yes No
	В.	If you answered "Yes," did you know that this person was going to sell or give the weapons to someone who was going to use them against another person?	Yes No

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	rt 12. Additional Information About You (Person Applying for turalization) (continued) A-	
19.	Did you EVER receive any type of military, paramilitary (a group of people who act like a military group but are not part of the official military), or weapons training?	Yes No
20.	Did you EVER recruit (ask), enlist (sign up), conscript (require), or use any person under 15 years of age to serve in or help an armed force or group?	Yes No
21.	Did you EVER use any person under 15 years of age to do anything that helped or supported people in combat?	Yes No
othe	ny of Item Numbers 22 28. apply to you, you must answer "Yes" even if your records have been sealed rwise cleared. You must disclose this information even if someone, including a judge, law enforcement office that it no longer constitutes a record or told you that you do not have to disclose the information.	
22.	Have you EVER committed, assisted in committing, or attempted to commit, a crime or offense for which you were NOT arrested?	Yes No
23.	Have you EVER been arrested, cited, or detained by any law enforcement officer (including any immigration official or any official of the U.S. armed forces) for any reason?	Yes No
24.	Have you EVER been charged with committing, attempting to commit, or assisting in committing a crime or offense?	Yes No
25.	Have you EVER been convicted of a crime or offense?	Yes No
26.	Have you EVER been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)?	Yes No
27.	A. Have you EVER received a suspended sentence, been placed on probation, or been paroled?	Yes No
	B. If you answered "Yes," have you completed the probation or parole?	Yes No
28.	A. Have you EVER been in jail or prison?	Yes No
	B. If you answered "Yes," how long were you in jail or prison? Years Months	Days
29.	If you answered "No" to ALL questions in Item Numbers 23 28., then skip this item and go to Item Num	iber 30.
	If you answered "Yes" to any question in Item Numbers 23 28. , then complete this table. If you need ext	ra space, use

additional sheets of paper and provide any evidence to support your answers.

Why were you arrested, cited, detained, or charged?	Date arrested, cited, detained, or charged. (mm/dd/yyyy)	Where were you arrested, cited, detained, or charged? (City or Town, State, Country)	Outcome or disposition of the arrest, citation, detention, or charge (no charges filed, charges dismissed, jail, probation, etc.)
	())))	, , ,	

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		2. Additional Information About You (Person Applying for lization) (continued)	4-[
		tem Numbers 30 46. If you answer "Yes" to any of these questions, except Item Number xplanation on additional sheets of paper and provide any evidence to support your answers.	rs 3'	7. an	nd 38 .	, incl	ıde a	type	d or
30.	Ha	ve you EVER:							
	A.	Been a habitual drunkard?					Yes		No
	B.	Been a prostitute, or procured anyone for prostitution?					Yes		No
	C.	Sold or smuggled controlled substances, illegal drugs, or narcotics?					Yes		No
	D.	Been married to more than one person at the same time?					Yes		No
	E.	Married someone in order to obtain an immigration benefit?					Yes		No
	F.	Helped anyone to enter, or try to enter, the United States illegally?					Yes		No
	G.	Gambled illegally or received income from illegal gambling?					Yes		No
	H.	Failed to support your dependents or to pay alimony?					Yes		No
	I.	Made any misrepresentation to obtain any public benefit in the United States?					Yes		No
31.		we you EVER given any U.S. Government officials any information or documentation that wudulent, or misleading?	as f	false	,		Yes		No
32.		we you EVER lied to any U.S. Government officials to gain entry or admission into the Unite gain immigration benefits while in the United States?	ed S	tates	s or		Yes		No
33.	Ha	ve you EVER been removed, excluded, or deported from the United States?					Yes		No
34.	Ha	ve you EVER been ordered removed, excluded, or deported from the United States?					Yes		No
35.	Ha	ve you EVER been placed in removal, exclusion, rescission, or deportation proceedings?					Yes		No
36.		e removal, exclusion, rescission, or deportation proceedings (including administratively closed ceedings) currently pending against you?	d				Yes		No
37.	Ha	ve you EVER served in the U.S. armed forces?					Yes		No
38.	A.	Are you currently a member of the U.S. armed forces?					Yes		No
	В.	If you answered "Yes," are you scheduled to deploy overseas, including to a vessel, within the three months? (Refer to the Address Change section in the Instructions on how to notify U you learn of your deployment plans after you file your Form N-400.)					Yes		No
	C.	If you answered "Yes," are you currently stationed overseas?					Yes		No
39.		ve you EVER been court-martialed, administratively separated, or disciplined, or have you re er than honorable discharge, while in the U.S. armed forces?	ecei	ved	an		Yes		No
40.	Ha alie	ve you EVER been discharged from training or service in the U.S. armed forces because you en?	we	re ar	1		Yes		No
41.	Ha	ve you EVER left the United States to avoid being drafted in the U.S. armed forces?					Yes		No
42.	Ha	ve you EVER applied for any kind of exemption from military service in the U.S. armed force	es?				Yes		No
43.	Ha	ve you EVER deserted from the U.S. armed forces?					Yes		No

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		2. Additional Informati	on About You (Person Applying for A-			
44.	A.	A. Are you a male who lived in the United States at any time between your 18th and 26th birthdays? [Yes No (This does not include living in the United States as a lawful nonimmigrant.)				
	B. If you answered "Yes," when did you register for the Selective Service? Provide the information below. Date Registered Selective Service (mm/dd/yyyy) Number					
	C.	If you answered "Yes," but y	ou did not register with the Selective Service System and you are:			
		1. Still under 26 years of ag information above; OR	ge, you must register before you apply for naturalization, and complete the	e Selective Service		
			ge (29 years of age if you are filing under INA section 319(a)), but you did nust attach a statement explaining why you did not register, and provide a Service.			
		tem Numbers 45 50. If you paper and provide any evidence	u answer "No" to any of these questions, include a typed or printed explanace to support your answers.	ation on additional		
45.	Do	you support the Constitution a	and form of Government of the United States?	Yes No		
46.	Do	you understand the full Oath	of Allegiance to the United States?	Yes No		
47.	Are	e you willing to take the full O	eath of Allegiance to the United States?	Yes No		
48.	If t	he law requires it, are you will	ing to bear arms on behalf of the United States?	Yes No		
49.	If t	he law requires it, are you will	ing to perform noncombatant services in the U.S. armed forces?	Yes No		
50.	If t	he law requires it, are you will	ing to perform work of national importance under civilian direction?	Yes No		
Pa	rt 1.	3. Applicant's Statemen	nt, Certification, and Signature			
			the Form N-400 Instructions before completing this part.			
Ap_{I}	plice	ant's Statement				
NO	Γ E :	Select the box for either Item	A. or B. in Item Number 1. If applicable, select the box for Item Number	er 2.		
1.	Ap	Applicant's Statement Regarding the Interpreter				
	A.	I can read and understan and my answer to every	d English, and I have read and understand every question and instruction question.	on this application		
	В.	The interpreter named in question in	Part 14. read to me every question and instruction on this application and a language in which I am fluent, and I to			
2.	Ap	plicant's Statement Regarding	the Preparer			
	At my request, the preparer named in Part 15. , prepared this application for me based only upon information I provided or authorized.					

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Par	rt 13. Applicant's Statement, Certification, and Sign	nature (continued) A-				
Apį	plicant's Certification					
requi	es of any documents I have submitted are exact photocopies of unite that I submit original documents to USCIS at a later date. Furtecords that USCIS may need to determine my eligibility for the in	thermore, I authorize the release of any information from any of				
	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.					
	derstand that USCIS will require me to appear for an appointment ature) and, at that time, I will be required to sign an oath reaffirming					
	1) I reviewed and provided or authorized all of the information	in my application;				
	2) I understood all of the information contained in, and submit	ted with, my application; and				
	3) All of this information was complete, true, and correct at the	e time of filing.				
	tify, under penalty of perjury, that I provided or authorized all of transition contained in, and submitted with, my application, and that	• 11				
App	plicant's Signature					
3.	Applicant's Signature	Date of Signature (mm/dd/yyyy)				
\Rightarrow						
Instru	TE TO ALL APPLICANTS: If you do not completely fill out th uctions, USCIS may deny your application. rt 14. Interpreter's Contact Information, Certificat					
Provi	ide the following information about the interpreter.					
Into	erpreter'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)					
Into	erpreter's Mailing Address					
	G	Apt. Ste. Flr. Number				
3.	Street Number and Name					
3.	City or Town	State ZIP Code + 4				

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	rt 14. Interpreter's Contact Information, Certifontinued)	icatio	on, and Signature A-
Int	erpreter'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 cer	tify, under penalty of perjury, that:		
Item or he appli		he or s	, which is the same language specified in Part 13. , Item B. in the same language every question and instruction on this application and his she understands every instruction, question and answer on the seaccuracy of every answer.
	-		Det = (C'
7. →	Interpreter's Signature		Date of Signature (mm/dd/yyyy
_			
	rt 15. Contact Information, Declaration, and Signer Than the Applicant	gnatu	ure of the Person Preparing This Application, if
Prov	ride the following information about the preparer.		
Pre	eparer'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	eparer's Mailing Address		
3.	Street Number and Name		Apt. Ste. Flr. Number
	City or Town		State ZIP Code + 4
	Province Postal Cod	de	Country

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	reparing This Application, if Other Than the Applicant (continued) A-
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 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.
Pr	reparer's Certification
witl con	ewed this completed application and informed me that he or she understands all of the information contained in, and submitted in, his or her application, including the Applicant's Certification , and that all of this information is complete, true, and correct. I applied this application based only on information that the applicant provided to me or authorized me to obtain or use. **Exercise Signature**
8.	Preparer's Signature Date of Signature (mm/dd/yyyy)
	NOTE: Do not complete Parts 16., 17., or 18. until the USCIS Officer instructs you to do so at the interview.
Pa	rt 16. Signature at Interview
this con	rear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of Form N-400, Application for Naturalization, subscribed by me, including corrections number 1 through, are applete, true, and correct. The evidence submitted by me on numbered pages 1 through are complete, true, and rect.
Sub	scribed to and sworn to (affirmed) before me
	USCIS Officer's Printed Name or Stamp Date of Signature (mm/dd/yyyy)
Арј	olicant's Signature USCIS Officer's Signature

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Part 17. Renunciation of Foreign Titles		A-			
If you answered "Yes" to $\boldsymbol{Part~12., Items~A.}$ and $\boldsymbol{B.}$ in $\boldsymbol{Item~M}$	Number 4., then you must aff	irm the following before a USCIS officer:			
I further renounce the title of		h I have heretofore held; or			
(list title	es)				
I further renounce the order of nobility of		to which I have heretofore belonged.			
(li	st order of nobility)				
Applicant's Printed Name	Applicant's Signature				
USCIS Officer's Printed Name	USCIS Officer's Signat	ture			
Date of Signature (mm/dd/yyyy)					
Part 18. Oath of Allegiance					
If your application is approved, you will be scheduled for a public oath ceremony at which time you will be required to take the following Oath of Allegiance immediately prior to becoming a naturalized citizen. By signing below you acknowledge your willingness and ability to take this oath:					
I hereby declare on oath, that I absolutely and entirely renoun state, or sovereignty, of whom or which I have heretofore bee		nd fidelity to any foreign prince, potentate,			
that I will support and defend the Constitution and laws of the	e United States of America ag	ainst 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 requ	ired by the law;				
that I will perform noncombatant service in the armed forces	of the United States when req	juired by the law;			
that I will perform work of national importance under civilian	direction when required by t	he law; and			
that I take this obligation freely, without any mental reservation or purpose of evasion; so help me God.					
Applicant's Printed Name					
	ven Name (First Name)	Middle Name (if applicable)			
		(
Applicant's Signature		Date of Signature (mm/dd/yyyy)			

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