

Application to File Declaration of Intention

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form N-300

OMB No. 1615-0078 Expires 03/31/2020

		For USCIS Use Only					
Date Stamp	Receipt			Action Block			
Remarks]	Bar Code					
To be completed by an attorney or accredited representative (if any).		or Accredited Representative nline Account Number (if any)					
► START HERE - Type or p	rint in black ink.		En	ter Your 9 Digit A-Number:			
Part 1. Information About	•	A-					
 Your Current Legal Name (I Family Name (Last Name) 							
Talling Name (Last Name)		Given Name (First Name)		Middle Name			
2. Other Names Used (if any)							
Provide all other names you this section, use the space pr			icknames. If	you need extra space to complete			
Family Name (Last Name)		Given Name (First Name)		Middle Name			
3. U.S. Social Security Number		Online Account Number (if any	5.	Date of Birth (mm/dd/yyyy)			
6. Date You Became a Lawful (mm/dd/yyyy)	Permanent Resident	7. Country of Birth					
8. Country of Citizenship or Na	8. Country of Citizenship or Nationality						
9. Since you were admitted to to period of six months or long		awful permanent resident, have	you been abs	ent for a Yes No			
If you answered "Yes" to Ite	em Number 9., provid	e departure/arrival dates of all a	bsences in the	e space provided in Part 5.			

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Pa	art 1. Information About You (continued)	A-					
10.	Mailing Address (USPS ZIP Code Lookup)						
	In Care Of Name (if any)						
	Street Number and Name	Apt. Ste. Flr. Number					
	City or Town	Sta	te	ZIP	Code		
11.	Physical Address (if different from the address above)						
	Street Number and Name (Do not provide a PO Box in this space unless it is your ONLY address	ss.)	Apt. Ste.	Flr.	Number		
	City or Town	Sta	te	ZIP	Code		
Pa	art 2. Applicant's Statement, Contact Information, Declaration, Certification	ı, aı	nd Signa	ture			
	TE: Read the Penalties section of the Form N-300 Instructions before completing this part. You United States.	ı mu	ıst file Forı	n N-3	00 while in		
Ap	pplicant's Statement						
NO	TE: Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for	Iten	n 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 is my answer to every question.	nstrı	action on th	nis ap	plication and		
	B. The interpreter named in Part 3. read to me every question and instruction on this applies	cati	on and my	answ	er to every		
	question in	,	a language	in wh	ich I am		
	fluent and I understood everything.						
2.	Applicant's Statement Regarding the Preparer						
	At my request, the preparer named in Part 4. , prepared this application for me based only upon information I provided or authorized.				,		
	prepared this application for the based only upon information i provided or authorized.						
Ap	pplicant's Contact Information						
3.	Applicant's Daytime Telephone Number 4. Applicant's Mobile Telephone	ne l	Number (if	any)			
5.	Applicant's Email Address (if any)						

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	art 2. Applicant's Statement, Contact Information, Pertification, and Signature (continued)	Declaration,	► A-						
Ap	oplicant's Declaration and Certification								
req	pies of any documents I have submitted are exact photocopies of using that I submit original documents to USCIS at a later date. Further all of my records that USCIS may need to determine my eligibility.	rthermore, I authorize the r	elease of any information from any						
	furthermore 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 understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) 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 understood all of the information contained i	n, and submitted with, my	application; and						
	2) All of this information was complete, true, and correct at the	e time of filing.							
autl	rtify, under penalty of perjury, that all of the information in my approximate that I reviewed and understand all of the information is complete, true, and correct.								
Ap	pplicant's Signature								
6.	Applicant's Signature		Date of Signature (mm/dd/yyyy)						
Inst	TE TO ALL APPLICANTS: If you do not completely fill out the fructions, USCIS may deny your application. THE TO ALL APPLICANTS: If you do not completely fill out the fructions, USCIS may deny your application. THE TO ALL APPLICANTS: If you do not completely fill out the fructions, USCIS may deny your application.		bmit required documents listed in the						
Pro	vide the following information about the interpreter.								
In	terpreter'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)								
In	terpreter's Mailing Address								
3.	Street Number and Name	Ap	t. Ste. Flr. Number						
	City or Town	Sta	te ZIP Code						
	Province Postal Code	Country							
	1 Ostar Code	Country							

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	ort 3. Interpreter's Contact Information, Certification (1997)	tion	, and Signature	► A-						
In	terpreter's Contact Information									
4.	Interpreter's Daytime Telephone Number	5.	Interpreter's Mobile Tel	e Telephone Number (if any)						
6.	Interpreter's Email Address (if any)									
In	terpreter's Certification									
I ce	rtify, under penalty of perjury, that:									
Iteı	n fluent in English and n B., in Item Number 1.; and I have read to this applicant in the lightest and his or honorous to every question. The applicant		ntified language every qu	estion and in						
and	lication and his or her answer to every question. The applicant answer on the application, including the Applicant's Declarat wer.									
In	terpreter's Signature									
7.	Interpreter's Signature			Date of	Signature (mm/dd/yyyy)					
	ert 4. Contact Information, Declaration, and Signa Ther Than the Applicant	atur	e of the Person Prep	paring this	s Application, if					
Pro	vide the following information about the preparer.									
Pr	eparer's Full Name									
1.	Preparer's Family Name (Last Name)	Pı	reparer's Given Name (Fi	rst Name)						
2.	Preparer's Business or Organization Name (if any)									
Pr	eparer's Mailing Address									
3.	Street Number and Name		Apt	Ste. Flr.	Number					
	City or Town		Stat	e	ZIP Code					
	Dravinas Postal Cada		Country							
	Province Postal Code		Country							

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	rt 4. Contact Information, Declaration, and Signature of the Person eparing this Application, if Other Than the Applicant (continued)						
Pr	eparer'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	eparer's Statement						
7.	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, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.						
Pr	eparer's Certification						
revi witl	my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then 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 Declaration and Certification , and that all of this information is complete, it, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain use.						
Pr	eparer's Signature						
8.	Preparer's Signature Date of Signature (mm/dd/yyyy)						

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Part 5. Additional Information

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, you may make copies of this page to complete and file with this application 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 Nam	e)		Given Na	me (First Name	e)	Middle Name	
		-							
2.	A-N	Number (if any)	A- [
3.	A. D.	Page Number	В.	Part Number	C.	Item Number]		
4.	A.	Page Number	В.	Part Number	C.	Item Number			
	D.								
5.	A.	Page Number	В.	Part Number	C.	Item Number			
	D.						1		
6.	A.	Page Number	В.	Part Number	C.	Item Number			
	D.								

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Pa	rt 6. Declaration of Intention	•	A-				
1.	Your Current Legal Name (Do not provide a nickname.)						
	Family Name (Last Name) Given Name (I	Middle Name	>				
2.	U.S. Social Security Number (if any) ▶ USCIS Online Account ▶ USCIS Online Account	Number (if any)					
4.	Date of Birth (mm/dd/yyyy) 5. Date You Became a Lawful (mm/dd/yyyy)	Permanent Resident					
6.	Country of Birth 7.	Country of Citizenship or N	Nationality				
8.	Mailing Address						
	In Care Of Name (if any)						
	Street Number and Name		Apt. Ste. Flr.	Number			
	City or Town		State	ZIP Code			
9.	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			
10.	Daytime Telephone Number 11.	Work Telephone Number ((if any)				
12.	Evening Telephone Number 13.	Mobile Telephone Number	(if any)				
14.	Email Address (if any)						

Part 6. Declaration of Intention (continued	d)	► A	-					
I am over 18 years of age, have been lawfully admitte United States based on such admission.	d to the United States as a lawful per	manent resid	lent,	and ar	n now	resid	ling i	n the
I hereby declare my intention in good faith to become original and duplicate hereof are a likeness of me and		ertify that th	e ph	otogra	ohs aft	ixed	to th	e
I do swear (or affirm) that the statements I have made me are true to the best of my knowledge and belief.	and the intentions I have expressed i	n this declar	atior	of int	ention	subs	cribe	d by
Applicant's and USCIS Officer's Signature								
15. Applicant's Signature (USCIS will reject your Fo	I	Date of Signature (mm/dd/yyyy)						
16. USCIS Officer's Signature		Date of Signature (mm/dd/yyyy)						
	Affix							

Not valid unless DHS Seal applied below.

Photograph

Here