

Application for Replacement Naturalization/Citizenship Document

Department of Homeland Security

USCIS Form N-565

OMB No. 1615-0091 Expires 12/31/2027

U.S. Citizenship and Immigration Services

	Returned	F	ee Stamp			Action Block		
	Resubmitted		•					
	Relocated							
For	r Sent Relocated							
USC	IS Received							
Us Onl	Applicant \square D	eclaration of tention Verified by:						
	☐ Citizenship Verified	by:						
	Remarks							
At	torney or Accredited epresentative (if any)	Select this box if Form G-28 is attached	Attorney State Bar (if applicable)			or Accredited Representative nline Account Number (if any)		
IV.	epresentative (if any)							
►ST	ART HERE - Type or pri	nt in black ink.						
Part	t 1. Information From	Current Certificat	te or Declaration					
1. Y	Your Full Name							
P	rovide your full name exact	ly as it is printed on the	certificate or declarati	on.				
F	Family Name (Last Name)		Given Name (First)	Name)				
2. [Date of Birth on Certificate of	or Declaration	3. Country	of Birth	<u>,</u>			
(1	mm/dd/yyyy)							
4. (Country of Former Citizensh	ip or Nationality	5. Certific	ate or Declar	ration Nu	nber		
6. A	Alien Registration Number (A-Number) (if any)						
•	► A-							
7. C	Certificate or Declaration Iss	uance						
P	Provide information about w	ho issued vour last certif	ficate or declaration al	ong with the	date it wa	is issued.		
		•		•		Date (mm/dd/yyyy)		
U.S. Citizenship and Immigration Services (USCIS) Office or Name of Court								
L								
Part	t 2. Current Informati	ion About You						
1. Y	Your Full Legal Name (Do r	ot provide a nickname)						
	Family Name (Last Name)	1	Given Name (First)	Name)		Middle Name (if applicable)		
Ţ			1			(uppnessor)		

Pa	art 2. Current Information About You (con	ntinued)							
2.	Other Names Used								
	Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 12. Additional Information .								
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)						
3.	Current Mailing Address								
	In Care Of Name (if any)								
	Street Number and Name		Apt. Ste. Flr. Number						
	City or Town		State ZIP Code						
	President	al Cada Causatura							
	Province Post	al Code Country							
4.	Your Current Marital Status								
7.		dowed Marriage Annull	ed						
5.	Since becoming a U.S. citizen, have you lost or reno	ounced your U.S. citizenship in a	any manner? Yes No						
	NOTE: If you answered "Yes" to Item Number 5. , separate sheet of paper.	provide an explanation in Part	12. Additional Information or attach a						
	separate sheet of paper.								
Pa	ert 3. Type of Application								
I ar	n applying for a (select only one box):								
1.a	New Certificate of Citizenship 1	.d. New Declaration of Inte	ntion						
1.b	New Certificate of Naturalization		aturalization to Obtain Recognition of My						
1.c.	New Certificate of Repatriation	U.S. Citizenship by a Fo	oreign Country						
	NOTE: If you selected Item 1.e. , skip to Part 8.								
Ba	sis for My Application								
Sel	ect all applicable boxes, provide explanations and att	ach the original certificate or de	claration where requested.						
2.a.	My certificate or declaration was lost, stolen, or	destroyed.							
	(1) Provide an explanation of when, where, and	d how this happened.							
	NOTE: If you selected Item Number 2.a. , go to Pa report, and/or sworn statement.	rt 9. and attach a copy of the ce	rtificate or declaration (if available), police						

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Pa	ort 3. Type of Application (continued)
	NOTE: If you selected Item Number 2.b., go to Part 9. and attach the original certificate or declaration.
2.c.	My certificate or declaration is incorrect due to a typographical or clerical error by USCIS.
	NOTE: If you selected Item Number 2.c., go to Part 4. and attach the original certificate or declaration.
2. d	My name has legally changed.
	NOTE: If you selected Item Number 2.d. , go to Part 5. and attach the original certificate or declaration and evidence of the name change.
2.e.	My date of birth has legally changed through a court order or U.S. Government-issued document, and I am applying for a replacement Certificate of Citizenship.
	NOTE: If you selected Item Number 2.e., go to Part 6. and attach the original certificate and evidence of the date of birth change.
2.f.	My certificate or declaration is incorrect because my sex listed on the document does not reflect my biological sex at birth.
	NOTE: If you selected Item Number 2.f., go to Part 7. and attach the original certificate or declaration and your birth certificate.
2.g.	My reason for applying for a new document is not listed above.
	(1) Provide an explanation.
	NOTE: If you selected Item Number 2.g. , go to Part 9. and attach the original certificate or declaration and any evidence documents.
	ort 4. Complete If Applying to Correct Your Document Due to a USCIS Typographical or erical Error
NO	TE: After completing this section, go to Part 9.
1.	What was the typographical or clerical error in your document that needs to be corrected? (select all applicable boxes) Name Date of Birth Sex Other
2.	Provide an explanation of what is incorrect on your current certificate or declaration and attach copies of any documents supporting your request.

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Part 5	. Complete If Applying	for a New Docu	ment	Because of a Name	Change				
NOTE:	After completing this section,	go to Part 9. If you	ı are aj	pplying to correct your doo	cument du	e to a USCIS error, use Part 4.			
My nam	e changed through (select only	y one box):							
1.a. 🗌	Marriage, Divorce, or Annula	nent 1.b. Co	urt Ord	der					
	Date of Event (mm/dd/yyyy)	Da	te of C	Court Order (mm/dd/yyyy)					
	TE: If you selected Item Numcted Item Number 1.b., attack			•		t decree, or divorce decree. If you			
Part 6 Chang	. Complete If Applying ge	for a New Certi	ficate	e of Citizenship Beca	use of a	n Official Date of Birth			
NOTE:	After completing this section,	go to Part 9. If you	are ap	oplying to correct your doc	ument due	e to a USCIS error, use Part 4.			
My date	of birth changed through (sele	ect all applicable bo	xes):						
1.a. 🗌	Court Order	1.b. U.S	S. Gov	ernment-Issued Document	į				
	Date of Court Order			J.S. Government-Issued					
	(mm/dd/yyyy)	Do	cumen	at (mm/dd/yyyy)					
birt	nber 1.b. , attach a copy of the h abroad, or other similar vital new date of birth is (as shown	records issued by th	ie U.S.	state where the child resid	ded when				
Part 7	. Complete If Applying	for a New Docu	ment	Listing Your Sex at	Birth				
NOTE:	After completing this section.	go to Part 9. If you	are an	oplying to correct your doc	ument due	e to a USCIS error, use Part 4.			
	biological sex at birth:	Male Femal	-	1 7 6		,			
,									
	. Complete If Applying overnment of a Foreign	-	rtific	rate of Recognition as	s a Citiz	en of the United States to			
1. Nar	ne of Foreign Country								
2. Info	nformation About Foreign Official								
Pro	vide the following information	about the official o	f a fore	eign country who has requ	ested this	certificate (if known).			
Fan	nily Name (Last Name)		Give	n Name (First Name)		Middle Name (if applicable)			
Off	icial Title	Name of Government Agency							
	·			·					

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	ort 8. Complete If Applying for a Spece e Government of a Foreign Country (f R	ecognition a	s a Citiz	zen o	of the United States to
3.	Foreign Official's Address						
	Street Number and Name				Apt. Ste.	Flr.	Number
	City or Town				State		ZIP Code
	Province	Postal Code		Country			
U_{s}^{s}	SCIS or Consular Official's Certification	on					
	OTE: The USCIS or consular official's certificate u do not need to obtain this signature before file		ed aft	ter USCIS adju	dicates yo	our Fo	orm N-565, if it is approved.
4.	USCIS or Consular Official's Certification						
	USCIS or Consular Official's Signature					Date	of Signature (mm/dd/yyyy)
Pa	art 9. Applicant's Contact Information	n, Certification,	and	l Signature			
Ap	oplicant's Contact Information						
Pro	vide your daytime telephone number, mobile te	elephone number (if a	any)	, and email add	ress (if an	ıy).	
1.	Applicant's Daytime Telephone Number		2	Applicant's Mo	bile Telep	hone	Number (if any)
3.	Applicant's Email Address (if any)						
A_{I}	oplicant's Certification and Signature						
I re the cor nee	ertify, under penalty of perjury, that I provided of ad and understand or, if interpreted to me in a laresponses and information contained in, and sumplete, true, and correct. Furthermore, I authorized to determine my eligibility for an immigration I enforcement of U.S. immigration law.	anguage in which I a bmitted with, my ap- ze the release of any	ım fl plica info	uent by the inte tion, and that a rmation from a	erpreter list all of the ro ny and all	sted in espon of m	n Part 10., understood, all of ses and information are y records that USCIS may
4.	Applicant's Signature					Date	of Signature (mm/dd/yyyy)

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Pa	rt 10. Interpreter's Contact Information, Certificat	ion	, and Signature
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		
In	terpreter's Contact Information		
3.	•	4.	Interpreter's Mobile Telephone Number (if any)
5.	Interpreter's Email Address (if any)		
In	terpreter's Certification and Signature		
inte	rtify, under penalty of perjury, that I am fluent in English and rpreted every question on the application and Instructions and into the applicant informed me that he or she understood every instructions.		
6.	Interpreter's Signature		Date of Signature (mm/dd/yyyy)
	rt 11. Contact Information, Declaration, and Signather Than the Applicant	tur	e of the Person Preparing this Application, if
Pr	eparer's Full Name		
1.	Preparer's Family Name (Last Name)		Preparer's Given Name (First Name)
2.	Preparer's Business or Organization Name		
Pr	eparer's Contact Information		
3.	Preparer's Daytime Telephone Number	4.	Preparer's Mobile Telephone Number (if any)
5.	Preparer's Email Address (if any)		
Pr	eparer's Certification and Signature		
that only	rtify, under penalty of perjury, that I prepared this application for all of the responses and information contained in and submitted variation provided by the applicant. The applicant reviewed the responses and information in or submitted with the applicant reviewed the responses and information in or submitted with the applicant.	with he r	the application are complete, true, and correct and reflects responses and information and informed me that he or she
6.	Signature of Preparer		Date of Signature (mm/dd/yyyy)

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Part 12. 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.	Family Name (Last	Name)		Given Name (Firs	st Name)	Middle Name	
2.	A-Number (if any)	► A-					
3.	Page Number	Part Number	Item Numbe	er			
4.	Page Number	Part Number	Item Numbe	er			
5.	Page Number	Part Number	Item Numbe	er			
6.	Page Number	Part Number	Item Numbe	er			

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