

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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For USCIS									
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кетаг	Remarks								
► START HERE - Type or print in black ink. If you do not answer all of the questions, it may take longer for U.S. Citizenship and Immigration Services (USCIS) to process your Form N-400.									
you ma	y not need to file Form N		U.S. citizen. Before yo	alized before you reached your 18th birthday, ou file this application, please visit the USCIS enship.					
		ut Your Eligibility (Selovor your Form N-400 ma							
1. R	eason for Filing (Please s	ee Instructions for eligibility	requirements under eacl	n provision.):					
A		ion. See Instructions: List of	•	,					
В	<u> </u>	Citizen. See Instructions: <i>El</i>							
C	. VAWA. See In: Against Women		Spouse, Former Spous	e, or Child of a U.S. Citizen under the Violence					
D	. Spouse of U.S. (,		ed States. See Instructions: <i>Eligibility for the</i> the <i>United States</i>					
	(INA) section 31		office where you would	ing under Immigration and Nationality Act like to have your naturalization interview. You					
E		e During Period of Hostilitie U.S. Armed Forces	es. See Instructions: <i>El</i>	igibility and Evidence for Current and Former					
F	At Least One Y		=	See Instructions: <i>Eligibility and Evidence for</i>					
G	. Other Reason f	or Filing Not Listed Above							
Part '	2 Information Abo	ut You (Person applying	for naturalization)						
		\ 115	, 101 Huturunzunom)						
	9	(do not provide a nickname)	NI (F) (NI)	ACTUAL COLUMN					
	amily Name (Last Name)		ven Name (First Name)						
	EST_LAST_NAME		EST_FIRST_NAME	TEST_MIDDLE_NAME					
	ther Names You Have Us include)	sed Since Birth (see the Instru	ctions for this Item Nu	mber for more information about which names					
Fa	amily Name (Last Name)	Gi	ven Name (First Name)	Middle Name (if applicable)					

Par	rt 2. Information About You (Person applying for naturalization) (continued) A-						
Nam	e Change (Optional)						
	I 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) 5. Gender						
	▶ 1 2 3 4 5 6 7 8 9 9 9 9						
6.	Date of Birth (mm/dd/yyyy)						
	01/01/1990						
	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						
	TEST_COUNTRY_OF_BIRTH						
9.	Country of Citizenship or Nationality						
	TEST_COUNTRY_OF_CITIZENSHIP						
	If you are a citizen or national of more than one country, list additional countries of nationality in the space provided in Part 14 . Additional Information .						
10.	Was one of your parents (including adoptive parents) 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 demonstrating 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	ial 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?						
	X Yes (Complete Item Numbers 12.b 12.c.)						
	No (Go to Part 3.)						
12.b.	Provide your Social Security number (SSN) (if any). 1 2 3 1 2 1 2 3 4						
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.						

Par	rt 3. Biographic Information	A-									
	E: USCIS requires you to complete the categories below to conduct background checks. (See information.)	the 1	Form N	N-400	Inst	ructio	ons for				
1.	Ethnicity (Select only one box) Hispanic or Latino Not Hispanic or Latino										
2.	Race (Select all applicable boxes) American Indian										
3.	Height Feet 4 Inches 11 4. Weight Pounds 1 0 0										
5.	Eye color (Select only one box) Black		Pink		Unk Oth	knowi er	1/				
6.	Hair color (Select only one box) Bald Black Blond Brown Gray Red Sandy (No hair)		White	е 🗌	Unk Oth	knowi er	n/				
Par	rt 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 a Item Number 1.a. If you are filing based on other 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 Sp	ecific	Inst	ructio	ons by				
	in care of ivalite (if ally)										
	Street Number and Name	Ap	t. Ste.	Flr.	Nι	ımbe	1				
	City or Town	Sta	ite		ZIP Code						
	Province Postal Code Country										
	Dates of Residence: From (mm/dd/yyyy) Dates of Residence: To (mm	ı/dd/	L			SENT					
	Physical Address (Street Number and Name) City or Town State / Province / Postal Code		Da Froi nm/dd/			To					
2.	Is your current physical address also your current mailing address? Yes (If you answered "Yes," skip to Part 5.) No	1									

Par	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. Fli	. Number
]
	City or Town			State	ZIP Code
	Province	Postal Code	Country		
Par	t 5. Information About Your M	larital History			
1.	What is your current marital status?				
	Single, Never Married Married	Divorced W	idowed Separ	ated 🔲 Marriage Anni	ılled
	If you are single and have never marrie	d, go to Part 6. Informat	ion About Your Ch	ildren.	
2.	If you are currently married, is your spo	use a current member of t	he U.S. armed force	s?	Yes No
3.	How many times have you been married the Instructions for more information ab			mber section of	
	Provide current marriage certificate and marriages were terminated (if applicable	•	lment decree, or dea	th certificate showing tha	t 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;		art 1., Item Number 1.d.	·
	If you are not filing under one of the c	ategories above, skip to l	Part 6.		
You	ır Current Marriage				
If yo	u are currently married, including if you	are legally separated, prov	ride the following in	formation about your cur	rent spouse.
4.a.	Current Spouse's Legal Name				
	Family Name (Last Name)	Given Name (First Name)	Middle Name	(if applicable)
4.b.	Current Spouse's Date of Birth (mm/dd/yyyy) 4.c.	Date You Entered into with Current Spouse (m	0		
4.d.	Is your current spouse's present physical	l address the same as your	physical address?		
	Yes				
	☐ No (If you answered "No," provide	address in Part 14. Addi	tional Information.)	
5.a.	When did your current spouse become a	u.S. citizen?			
	By Birth in the United States - Go to	Item Number 7.			
	Other - Complete Item Number 5.b	•			
5.b.	Date Your Current Spouse Became a U.	S. Citizen (mm/dd/yyyy)			

Par	rt 5. Information About Your Ma	rital History	(continued)	A-				
6.	Current Spouse's Alien Registration Number							
	_							
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 decre terminated (if applicable).	es, or death certi	ficates showing that all of y	our spouse's prior marri	ages were			
8.	Current Spouse's Current Employer or Co	mpany						
	Only answer Item Number 8. if you are find Employment Outside the United States .	•	1., Item Number 1.d., Spo	ouse of U.S. Citizen in (Qualified			
Par	t 6. Information About Your Chi	ildren						
1.	Indicate your total number of children und	ler 18 years of ag	ge.					
2.	Provide the following information about y columns, you must type or print one of the address(es) where those children live in P provided in Part 14. Additional Information	e valid options lis art 14. Additio n	sted. If any of your childre	n do not reside with you	, provide the			
	Child's Name (First Name and Family Name)	Date of Birth (mm/dd/yyyy)	Residence (Valid options include: resides with me, does not reside with me, or unknown/ missing)	Relationship (Valid options include: biological child, stepchild, legally adopted child)	Are you providing support for this child?			
					Yes No			
					Yes No			
					Yes No			
Par	rt 7. Information About Your Em	nlovment and	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 o	Employment	School Dates	Occupation or			
Name	City/Town	State/ Province	ZIP Code/ Postal Code	Country	From (mm/dd/yyyy)	To	Occupation or Field of Study
		TTOVINCE	1 Ustur Couc		(IIIII da yyyy)	PRESENT	

Par	t 8. Time Outside t	the United States	A	A-			
1.	provision under Part 1. , Specific Instructions b ; this information. Start v completed within 24 horsee the Required Evide	de the United States during the last 5 years if yo rou are filing based on other naturalization eligible of the Instructions for the applicable period of the pand work backwards. Do not include day trips have taken any trips outside the United States the lence section of the Instructions for evidence yo be provided in Part 14. Additional Information	bility option time for whice the s (where the coud should performed to the standard of the standard of the standard performed of the standard	ons, see l hich you he entire nore than	Part 8. must of trip work from 6 more	in the enter as nths,	
	Date You Left the United States (mm/dd/yyyy)	Date You Returned to the United States (mm/dd/yyyy)	Countries to Which You Traveled				
Par	t 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 on specifies otherwise. If you answer "Yes" to a rovide explanations and any additional informat	any of the	question	s in Ite	em
1.	Have you EVER claime	ed to be a U.S. citizen (ir	n writing or any other way)?			Yes [No
2.			ny Federal, state, or local election in the United ction where noncitizens are eligible to vote, you			Yes [No
3.	Do you currently owe ar	ny overdue Federal, state	e, or local taxes in the United States?			Yes [No
4.			have you called yourself a "nonresident alien" of to file a tax return because you considered yours			Yes [No
Have	you EVER:						
5.a.	Been a member of, invo anywhere in the world		ssociated with any Communist or totalitarian par	rty		Yes [No
5.b.			following, or been a member of, involved in, or world that advocated any of the following:	r in any		Yes [No
	Opposition to all orga	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	e			
			cer or officers of the Government of the United e of their official character;	States			
	· ·	e, injury, or destruction o	of property; or				
	 Sahotage? 						

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	ided	mon	ey, a	thing	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?	p,				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, or				Yes		No
Have	you~EVER~ordered,~incited,~called~for,~committed,~assisted,~helped~with,~or~otherwise~participal and a state of the committed committed committed and a state of the committed committed committed and a state of the committed c	ted i	n an	y of t	he fo	llowi	ng:	
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 their religion?					Yes		No
7.g.	Causing harm or suffering to any person because of their race, religion, national origin, member a particular social group, or political opinion?	rshij	o in			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?	illita	ıry			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				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	sed			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?	[,] idin	g,			Yes		No
12.	Have you EVER received any weapons training, paramilitary training, or other military-type tr	ainir	ıg?			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?		s to			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).		ed			Yes		No

Part 9. Additional Info	ormation About	You (continued	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	mit;						
• Pled guilty to;									
 Were convicted of; 									
• Were placed in alternative adjudication, or deferred ad	_	bilitative program	for (for example, diver	sion, deferred prosecution,	withheld				
Received a suspended sent	ence, clemency, am	nesty, or pardon for	r, or were placed on pro	obation or paroled for.					
15.a. Have you EVER comm tried 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?		•	-	· 1 1	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)	What was the result or disposition of the arrest, citation, or charge? (no charges filed, convicted, charges dismissed, detention, jail, probation, etc.)	What was your sentence (if applicable)? (For example, 90 days in jail, 90 days on probation)				
,									

16. If you received a suspended sentence, were placed on probation, or were paroled, have you completed Yes No 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.

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Additional Information. Submit evidence to support your answers.

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 prostitution, or received any proceeds or money from prostitution?	of			Yes		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		No
17.c.	Been married to more than one person at the same time?				Yes		No
17.d.	Married someone in order to obtain an immigration benefit?				Yes		No
17.e.	Helped anyone to enter, or try to enter, the United States illegally?				Yes		No
17.f.	Gambled illegally or received income from illegal gambling?				Yes		No
17.g.	Failed to support your dependents (pay child support) or to pay alimony (court-ordered finance support after divorce or separation)?	rial			Yes		No
17.h.	Made any misrepresentation to obtain any public benefit in the United States?				Yes		No
18.	Have you EVER given any U.S. Government officials any information or documentation that false, fraudulent, or misleading?	t was			Yes		No
19.	Have you EVER lied to any U.S. Government officials to gain entry or admission into the UnStates or to gain immigration benefits while in the United States?	iited			Yes		No
Infor	answer "Yes" to Item Numbers 20 21. below, provide an explanation in the space provide mation and see the Specific Instructions by Item Number , Part 9. Additional Information information.					ctions	s for
20.	Have you EVER been placed in removal, rescission, or deportation proceedings?				Yes		No
21.	Have you EVER been removed or deported from the United States?				Yes		No
	ral Law requires nearly all people born as male who are either U.S. citizens or immigrants, 18 t Selective Service. See www.sss.gov .	hroug	sh 25	years of	age, t	o regi:	ster
22.a.	Are you a person born as a male who lived in the United States at any time between your 18th birthdays? (Do not select "Yes" if you were a lawful nonimmigrant for all of that time period		26th		Yes		No
22.b.	If you answered "Yes," to Item Number 22.a. , did you register for the Selective Service?				Yes		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						
	a answered "No," to Item Number 22.b. see the Specific Instructions by Item Number , Part You of the Instructions for more information.	t 9. A	ddit	ional Inf	ormat	ion	
If you	a answer "Yes" to Item Numbers 23 24. , provide an explanation in the space provided in P a	rt 14	. Ad	ditional 1	nforn	natio	n.
23.	Have you EVER left the United States to avoid being drafted in the U.S. armed forces?				Yes		No
24.	Have you EVER applied for any kind of exemption from military service in the U.S. armed for	orces	,		Yes		No
25.	Have you EVER served in the U.S. armed forces?				Yes		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?					Yes		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 on United States or to a vessel.)	if yo	ou	!		Yes		No
26.c.	If you answered "Yes," to Item Number 26.a., are you currently stationed outside the United	d Stat	es?			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	S			Yes		No
If yo	u answer "Yes" to Item Numbers 27 29. , provide an explanation in the space provided in Pa	rt 14	. A	dditio	onal 1	nforı	nati	on.
27.	Have you EVER been court-martialed or have you received a discharge characterized as other honorable, bad conduct, or dishonorable, while in the U.S. armed forces?	r than				Yes		No
28.	Have you EVER been discharged from training or service in the U.S. armed forces because you an alien?	ou we	re			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 Inference of the Number 30.a., provide an explanation in the space provided in Part 14. Add						f you	1
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	kip to) Iten	n Nui	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	lers			Yes		No
	of nobility, (list titles), that you	have	in a	ì				
	foreign country at your naturalization ceremony?							
-	u answer "'No" to any question except Item Number 33. , see the Oath of Allegiance section o mation.	f the	lnst	ructio	ons fo	r moi	e	
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 to the United States)	gian	: e)?			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 Guesting Surrogate, or Designated Representative section in the Instructions .		ın,			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	tes?				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		No

Par	t 10. Request for a Fee Reduction	A-					
For information about fees, fee waivers, and reduced fees, see Form G-1055, Fee Schedule, at www.uscis.gov/g-1055 . To apply for a reduced fee, complete Item Number 1. and proceed to Part 11.							
1.	My household income is less than or equal to 400% of the Federal Poverty Guidelines (see Instrudocumentation).	ructions for required					
	Yes (complete Item Numbers 2 5.b.)						
	No (skip to Part 11.)						
2.	Total household income:						
3.	My household size is:						
4.	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.):						
Par	t 11. Applicant's Contact Information, Certification, and Signature						
Арр	plicant's Contact Information						
Provi	de your daytime telephone number, mobile telephone number (if any), and email address (if any	r).					
1.	Applicant's Daytime Telephone Number 2. Applicant's Mobile Teleph	one Number (if any)					
3.	Applicant's Email Address (if any)						
Арр	olicant's Certification and Signature						
my a under inform that U	ify, under penalty of perjury, that I provided or authorized all of the responses and information of pplication, I read and understand or, if interpreted to me in a language in which I am fluent by the restood, all of the responses and information contained in, and submitted with, my application, an mation are complete, true, and correct. Furthermore, I authorize the release of any information function is used to determine my eligibility for an immigration request and to other entities and inistration and enforcement of U.S. immigration law. Applicant's Signature (or signature of a legal guardian, surrogate, or designated	e interpreter listed in Part 12. , d that all of the responses and the rom any and all of my records					
	representative, if applicable)	(mm/dd/yyyy)					

Pa	rt 12. Interpreter's Contact Information, Certif	catio	on, and Signature	P	A-
Int	terpreter's Full Name				
1.	Interpreter's Family Name (Last Name)		Interpreter's Given Name (I	Firs	et Name)
2.	Interpreter's Business or Organization Name				
Int	terpreter's Contact Information				
3.	Interpreter's Daytime Telephone Number	4.	Interpreter's Mobile Telep	ho	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				,
	I have interpreted every question on the application and Instruguage, and the applicant informed me that they understood eve				
6.	Interpreter's Signature		-	_]	Date of Signature (mm/dd/yyyy)
\Rightarrow					
Ot	ert 13. Contact Information, Certification, and Society Cher Than the Applicant Experience of the content of t				
1.	Preparer's Family Name (Last Name)		Preparer's Given Name (Fir	st l	Name)
2.	Preparer's Business or Organization Name				
Pro	eparer's Contact Information				
3.	Preparer's Daytime Telephone Number	4.	Preparer's Mobile Telepl	hor	ne Number (if any)
5.	Preparer's Email Address (if any)	_]			
Pro	eparer's Certification and Signature				
all o	rtify, under penalty of perjury, that I prepared this application of the responses and information contained in and submitted w rmation provided by the applicant. The applicant reviewed the responses and information in or submitted with the application	ith the	application are complete, t	rue	, and correct and reflects only
6.	Preparer's Signature			_ [Date of Signature (mm/dd/yyyy)
\Rightarrow	·				

Par	t 14. Additional Information		A-
than Type	u need extra space to provide any additional informa what is provided, you may make copies of this page or print your name and A-Number at the top of eac h your answer refers; and sign and date each sheet.	e to complete and file with this application of	or attach a separate sheet of paper.
1.	Family Name (Last Name)	Given Name (First Name)	Middle (if applicable)
2.	Page Number Part Number Item Number		
3.	Page Number Part Number Item Number	r	
4.	Page Number Part Number Item Number	r 	
5.	Page Number Part Number Item Number	r	
	Do not complete Parts 15. or 16. until t	ho LISCIS officer instructs you to	do so at the interview

Part 15. Signature at Interview		A-					
I swear (affirm) and certify under penalty of perjury under the laws of this Form N-400, Application for Naturalization, subscribed by me, incevidence 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 Signati	ure					
	J						
Part 16. Oath of Allegiance							
If your application is approved, you will be scheduled for a naturalization 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 to take this Oath:							
I hereby declare on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty, of whom or which I have heretofore been a subject or citizen;							
that I will support and defend the Constitution and laws of the United 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 law;							
that I will perform noncombatant service in the armed forces of the United States when required by the law;							
that I will perform work of national importance under civilian direction	n when required by the la	w; and					
that I take this obligation freely, without any mental reservation or pur	pose of evasion; so help r	ne God.					
Applicant's Signature		Date of Signature (mm/dd/yyyy)					