

## **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

Far		Date Stamp	Recei	pt		Action Block				
For USC										
Use										
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Rema	arks									
			rint in black ink. If you do S) to process your Form N-		estions, it may ta	ake longer for U.S. Citizenship				
If you	r moi	ther or father (includin	g legal adoptive mother or	father) is a U.S. citizen b	v birth, or was r	naturalized before you reached				
your 1	8th b	oirthday, you may not		you may already be a U.S	S. citizen. Befor	re you file this application, please				
Davi	. 1	Information Abo	ut Vour Eligibility (Ca	last only one have to	idontifi. Ent	er Your 9 Digit A-Number:				
			<b>ut Your Eligibility</b> (Se or your Form N-400 n		Identify					
me t	)asis	s of your engionity	or your Form N-400 ii	iay be delayed of rej	ected.)					
1.	Reas	on for Filing (Please s	ee Instructions for eligibility	y requirements under eac	h provision.):					
	A.	General Provisi	on. See Instructions: List	of General Eligibility R	equirements					
	B.	☐ Spouse of U.S. 0	Citizen. See Instructions: I	Eligibility Based on Mar	riage to a U.S. (	Citizen				
•	C.	VAWA. See Ins		e Spouse, Former Spous	se, or Child of a	U.S. Citizen under the Violence				
	D.		Citizen in Qualified Emplo Citizen Working for a Qua			Instructions: Eligibility for the tes				
		(INA) section 31	al address is outside the Uni 9(b), select the USCIS field S field office at <u>www.uscis.</u>	l office where you would		gration and Nationality Act ur naturalization interview. You				
-	E.		e During Period of Hostilit U.S. Armed Forces	ties. See Instructions: E	ligibility and Ev	vidence for Current and Former				
-	F.		ear of Honorable Military mer Members of the U.S.		See Instructions	: Eligibility and Evidence for				
	G.	Other Reason fo	or Filing Not Listed Above	2						
Part	t <b>2.</b>	Information Abo	ut You (Person applyir	ng for naturalization)						
1.	Your	Current Legal Name	(do not provide a nickname	)						
-	Fami	ily Name (Last Name)	(	Given Name (First Name	)	Middle Name (if applicable)				
		r Names You Have Us clude)	sed Since Birth (see the Inst	ructions for this Item Nu	n Number for more information about which names					
		ŕ	,	o' ar (E' (ar	`	AC 111 AT (20 12 1.1.)				
İ	ramı	lly Name (Last Name)	(	Given Name (First Name	)	Middle Name (if applicable)				

Par	rt 2. Information About You (Person applying for naturalization) (continued) A-								
	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. Sex								
6.	Date of Birth (mm/dd/yyyy)								
	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 <b>Part 14. Additional Information</b> .								
7.	If you are a lawful permanent resident, provide the date you became a lawful permanent resident (mm/dd/yyyy).								
8.	Country of Birth								
9.	Country of Citizenship or Nationality								
	If you are a citizen or national of more than one country, list additional countries of nationality in the space provided in <b>Part 14. Additional Information</b> .								
10.	Was your mother or father (including adoptive mother or father) a U.S. citizen before your 18th birthday?   Yes   No								
	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?								
	Yes (Complete Item Numbers 12.b 12.c.)								
	No (Go to Part 3.)								
12.b.	Provide your Social Security number (SSN) (if any).								
	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.								

Pai	rt 3. Biographic Information	A-					
	ΓΕ: USCIS requires you to complete the categories below to conduct background checks. (See information.)	the	Form	N-400	Ins	tructi	ons for
1.	Ethnicity (Select <b>only one</b> box)  Hispanic or Latino Not Hispanic or Latino						
2.	Race (Select all applicable boxes)  American Indian		] Whi	te			
3.	Height Feet Inches 4. Weight Pounds						
5.	Eye color (Select <b>only one</b> box)  Black Blue Brown Gray Green Hazel Maroon		] Pink	: <u></u>	Un Otl	know ier	n/
6.	Hair color (Select only one box)  Bald Black Blond Brown Gray Red Sandy (No hair)		] Whi	te 🗌	Un Otl	know ner	n/
Pai	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 gitem 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)	<b>4.</b> i	n the $\mathbf{S}_{\mathbf{j}}$	pecific	Ins	tructi	ons by
	Street Number and Name	A	pt. Sto	e. Flr	. N	umbe	r
		] L					
	City or Town	S1 	ate			IP Co	de
	Province Postal Code Country				╛┖		
	Dates of Residence: From (mm/dd/yyyy) Dates of Residence: To (mn	ı/dd	/уууу)		PRI	SEN'	ľ
	Physical Address (Street Number and Name)  City or Town State / Province / Postal Code		Da Fro mm/dd			T	
2.	Is your current physical address also your current mailing address?  Yes (If you answered "Yes," skip to Part 5.)  No				1		

Pa	art 4. Information About Your Residence (continued)		A-	
3.	Current Mailing Address (Safe Mailing Address, if applicable)			
	In Care Of Name (if any)			
	Street Number and Name		Apt. Ste. Flr	. Number
	City or Town		State	ZIP Code
	Province Postal Code Country			
Pa	art 5. Information About Your Marital History			
1.	What is your current marital status?			
	Single, Never Married Married Divorced Widowed Sep	parated [	] Marriage Annu	ılled
	If you are single and have never married, go to Part 6. Information About Your	Children.		
2.	If you are currently married, is your spouse a current member of the U.S. armed for	rces?		Yes No
3.	How many times have you been married? (See the <b>Specific Instructions by Item I</b> the Instructions for more information about which marriages to include.)	Number sec	tion of	
	Provide current marriage certificate and any divorce decree, annulment decree, or demarriages were terminated (if applicable).	death certific	ate showing tha	t your prior
	<ul> <li>If you are filing under one of the categories below, answer Item Numbers 4.a 8.</li> <li>Spouse of U.S. Citizen, Part 1., Item Number 1.b.; or;</li> <li>Spouse of U.S. Citizen in Qualified Employment Outside the United States,</li> </ul>		m Number 1.d.	
	If you are not filing under one of the categories above, skip to Part 6.			
You	our Current Marriage			
If yo	ou are currently married, including if you are legally separated, provide the following	ginformation	about your curi	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 Marriage with Current Spouse (mm/dd/yyyy)			
4.d.	Is your current spouse's present physical address the same as your physical address'	?		
	Yes			
	No (If you answered "No," provide address in <b>Part 14. Additional Information</b>	on )		
5.a.		···,		
J.a.	By Birth in the United States - Go to <b>Item Number 7.</b>			
	Other - Complete Item Number 5.b.			
5.b.	Date Your Current Spouse Became a U.S. Citizen (mm/dd/yyyy)			

Pai	rt 5. Information About Your Ma	arital History	(continued)	A-	
6.	Current Spouse's Alien Registration Num	nber (A-Number)	(if any) ► A-		
7.	How many times has your current spouse <b>Number</b> section of the Instructions for m				
	Provide divorce decrees, annulment decreterminated (if applicable).	ees, or death certi	ificates showing that all of y	our spouse's prior marr	iages were
8.	Current Spouse's Current Employer or Co	ompany			
	Only answer Item Number 8. if you are Employment Outside the United States	-	1., Item Number 1.d., Spo	ouse of U.S. Citizen in	Qualified
Pal	rt 6. Information About Your Ch	ildren			
1.	Indicate your total number of children un	der 18 years of a	ge.		
2.	Provide the following information about columns, you must type or print one of the address(es) where those children live in I provided in Part 14. Additional Information	ne valid options li Part 14. Addition	sted. If any of your childre	n do not reside with you	, provide the
	Son or Daughter'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 son or daughter, stepchild, or legally adopted son or daughter)	Are you providing support for your son or daughter?
					Yes No
					Yes No
					Yes No
Pai	rt 7. Information About Your En	nnlovment an	d Schools Vou 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/ ZIP Code/ Province Postal Code		Country	From (mm/dd/yyyy)	To (mm/dd/yyyy)	Occupation or Field of Study
						PRESENT	

Pai	t 8. Time Outside t	the United States	A	<b>A-</b>	
1.	provision under Part 1., Specific Instructions by this information. Start v completed within 24 housee the Required Evide	y Item Number 1.a. If y y Item Number section with your most recent triurs) in the table. If you lence - Continuous Residence.	de the United States during the last 5 years if yo ou are filing based on other naturalization eligible of the Instructions for the applicable period of the and 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 <b>Part 14. Additional Information</b>	which you must enter s (where the entire trip was at lasted more than 6 months, ou should provide. If you need	
	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		
When a question includes the word "EVER," you must provide information about any of your actions or conduct that occurred anywhere in the world at any time, unless the question specifies otherwise. If you answer "Yes" to any of the questions in Item Numbers 1 14. in Part 9. Item Numbers 1 14., provide explanations and any additional information in the space provided in Part 14. Additional Information.					
1.	Have you EVER claime	ed to be a U.S. citizen (ir	writing or any other way)?	Yes No	
2.			ny Federal, state, or local election in the United etion where aliens are eligible to vote, you may a		
3.	Do you currently owe ar	ny overdue Federal, state	e, or local taxes in the United States?	Yes No	
4.	•		nave you called yourself a "nonresident alien" or to file a tax return because you considered yours	1 2 2 3     1 1 1 0	
Have	you EVER:				
5.a.	Been a member of, invo anywhere in the world		sociated with any Communist or totalitarian par	ty Yes No	
5.b.	` <b>-</b> -		following, or been a member of, involved in, or <b>world</b> that advocated any of the following:	in any Yes No	
	Opposition to all orga	anized government;			
	• World communism;				
	• The establishment in	the United States of a to	talitarian dictatorship;		
	• The overthrow by for United States or all for		inconstitutional means of the Government of the	,	
			cer or officers of the Government of the United to of their official character;	States	
	• The unlawful damage	e, injury, or destruction of	of property; or		
	• Sabotage?				

Par	t 9. Additional Information About You (continued)	<b>A-</b>						
	e you <b>EVER</b> been a member of, involved in, or in any way associated with, or have you <b>EVER</b> e, services or labor, or any other assistance or support to a group that:	prov	ideo	d mor	ney, a	thing	gof	
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, sh vehicle, or other mode of transportation?	ip,				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 <b>Item Numbers 6.a.</b> or <b>6.b.</b> ?	or, oi	r			Yes		No
Have	you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participate	ated	in a	ny of	the fe	ollow	ing:	
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 valuable to consent (could not agree), or was being forced or threatened by you or by someone experience of the consent (could not agree).					Yes		No
7.f.	Not letting someone practice his or her religion?					Yes		No
7.g.	Causing harm or suffering to any person because of his or her race, religion, national origin, membership in a particular social group, or political opinion?					Yes		No
8.a.	Have you <b>EVER</b> served in, been a member of, assisted (helped), or participated in any military police unit?	or or				Yes		No
8.b.	Have you <b>EVER</b> 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 n group but are not part of the official military), self-defense unit, vigilante unit, rebel group, or group?	nilita	ary			Yes		No
	If you answered "Yes" to <b>Item Number 8.a.</b> or <b>Item Number 8.b.</b> , include the name of the co the name of the military unit or armed group, your rank or position, and your dates of involvem your explanation in <b>Part 14. Additional Information</b> .		-					
9.	Have you <b>EVER</b> 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 <b>EVER</b> directed or participate other activity that involved detaining people?	itical				Yes		No
10.a.	Were you <b>EVER</b> a part of any group, or did you <b>EVER</b> help any group, unit, or organization to a weapon against any person, or threatened to do so?	hat u	ısed			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 you would not you were the your would not you would		ed			Yes		No
11.	Have you <b>EVER</b> 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?	vidin	ıg,			Yes		No
12.	Have you EVER received any weapons training, paramilitary training, or other military-type tr	raini	ng?			Yes		No
13.	Have you <b>EVER</b> 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 6 do so?	•				Yes		No
14.	Have you <b>EVER</b> used any person under 15 years of age to take part in hostilities or attempted 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).		ted			Yes		No

Part 9. Additional Information	n About Y	ou (continued	1)	A-					
If you answer "Yes" to any part of It records have been sealed, expunged, law enforcement officer, or attorney, to information. If you need extra space, u answers with your Form N-400.	<b>or otherwise</b> ld you that it	cleared. You m	nust disclose this informour record, or told you	nation even if someone, in that you do not have to di	cluding a judge, sclose the				
Include all the crimes and offenses in t influence of drugs or alcohol, and crim					ng under the				
• Committed, agreed to commit, or as	ked someone	else to commit;							
<ul> <li>Were arrested, cited, detained, or confined by any law enforcement officer, military official (in the U.S. or elsewhere), or immigration official;</li> </ul>									
• Were charged with committing, help	oing commit,	or trying to com	mit;						
• Pled guilty to;									
• Were convicted of;									
• Were placed in alternative sentencin adjudication, or deferred adjudication	-	itative program	for (for example, diver	sion, deferred prosecution,	withheld				
• Received a suspended sentence, cler	nency, amnes	sty, or pardon for	, or were placed on pro	obation or paroled for.					
<b>15.a.</b> Have you <b>EVER</b> committed, agree tried to commit a crime or offens			_	ed commit, or	Yes No				
<b>15.b.</b> Have you <b>EVER</b> been arrested, official (in the U.S. or elsewhere or offense?		•	•	· · · · · · · · · · · · · · · · · · ·	Yes No				
or O	he Crime ffense d/yyyy)	Date of your conviction or guilty plea (if applicable) (mm/dd/yyyy)	Place of Crime or Offense (City or Town, State, Country)	disposition of the arrest, citation, or charge? (no charges	What was your sentence (if applicable)? (For example, 90 days in jail, 90 days on probation)				

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. Additional Information**. Submit evidence to support your answers.

If you received a suspended sentence, were placed on probation, or were paroled, have you completed

your suspended sentence, probation, or parole?

16.

Yes No

Par	t 9. Additional Information About You (continued)	<b>A-</b>					
Have	you EVER:						
17.a.	Engaged in prostitution, attempted to procure or import prostitutes or persons for the purpose of 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 financi support after divorce or separation)?	ial			Yes		No
17.h.	Made any misrepresentation to obtain any public benefit in the United States?				Yes		No
18.	Have you <b>EVER</b> given any U.S. Government officials <b>any</b> information or documentation that false, fraudulent, or misleading?	was			Yes		No
19.	Have you <b>EVER</b> 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?	ited			Yes		No
Infor	answer "Yes" to Item Numbers 20 21. below, provide an explanation in the space provided mation and see the Specific Instructions by Item Number, Part 9. Additional Information information.					ection	ns 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
	al Law requires nearly all people born as male who are either U.S. citizens or immigrants, 18 the Selective Service. See <a href="www.sss.gov">www.sss.gov</a> .	hroug	h 25	years of	age, t	o reg	ister
22.a.	Are you a male who lived in the United States at any time between your 18th and 26th birthda not select "Yes" if you were a lawful nonimmigrant for all of that time period.)	.ys? (	Do		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						
	answered "No," to Item Number 22.b. see the Specific Instructions by Item Number, Part t You of the Instructions for more information.	t 9. A	dditi	onal Info	rmat	tion	
If you	answer "Yes" to Item Numbers 23 24., provide an explanation in the space provided in Pa	rt 14.	Add	litional I	nforn	natio	n.
23.	Have you <b>EVER</b> 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

Par	t 9. Additional Information About You (continued)	<b>A</b> -						
If yo	a answered "No" to Item Number 25., go to Item Number 30.a.	,						
26.a.	Are you <b>currently</b> a member of the U.S. armed forces?					Yes		No
26.b.	If you answered "Yes" to <b>Item Number 26.a.</b> , are you scheduled to deploy outside the United including to a vessel, within the next 3 months? (Call the Military Help Line at <b>877-247-4645</b> transfer to a new duty station after you file your Form N-400, including if you are deployed of United States or to a vessel.)	if yo	u	e		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 <b>Item Number 26.a.</b> , are you a former U.S. military service member currently residing outside of the U.S.?	who	is			Yes		No
If yo	answer "Yes" to Item Numbers 27 29., provide an explanation in the space provided in Pa	rt 14	. A	dditio	onal I	nfor	mati	on.
27.	Have you <b>EVER</b> 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	l			Yes		No
28.	Have you <b>EVER</b> been discharged from training or service in the U.S. armed forces because you an alien?	ou we	ere			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 Information in the space provided in Part 14. Add						f you	1
30.a.	Do you now have, or did you <b>EVER</b> have, a hereditary title or an order of nobility in any foreign country?	N	o (s	skip to	Iten	n Nu	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				
	foreign country at your naturalization ceremony?							
-	a answer "No" to any question except <b>Item Number 33.</b> , see the <b>Oath of Allegiance</b> section o mation.	f the	Inst	ructio	ons fo	r mo	re	
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	gian	ce)?	P		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 <b>Item Numbers 34 37.</b> and see the <b>Legal Gu Surrogate, or Designated Representative</b> section in the <b>Instructions</b> .	-	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	ites?				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	<b>A-</b>				
	information about fees, fee waivers, and reduced fees, see Form G-1055, Fee Schedule, at <a href="https://www.ned.neb.neb.neb.">www.ned.neb.neb.neb.neb.neb.neb.neb.neb.neb.neb</a>			_		. •
1.	My household income is less than or equal to $400\%$ of the Federal Poverty Guidelines (see Ins documentation).	truct	ions fo	or requir	ed	
	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.):					
	tt 11. Applicant's Contact Information, Certification, and Signature  olicant's Contact Information					
Provi	de your daytime telephone number, mobile telephone number (if any), and email address (if any	y).				
1.	Applicant's Daytime Telephone Number  2. Applicant's Mobile Telephone Telephone Number	hone	Num	ber (if a	ny)	
3.	Applicant's Email Address (if any)					
App	olicant's Certification and Signature					
my aj undei infori that U	ify, under penalty of perjury, that I provided or authorized all of the responses and information 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, and mation are complete, true, and correct. Furthermore, I authorize the release of any information USCIS may need to determine my eligibility for an immigration request and to other entities and instration and enforcement of U.S. immigration law.	he in nd th from	terpreat all of any a	ter listed of the re nd all of	l in <b>Pa</b> r sponse f my re	rt 12., s and the cords
4.	Applicant's Signature (or signature of a legal guardian, surrogate, or designated representative, if applicable)		te of S n/dd/y	ignature yyy)	•	
$\Rightarrow$						

Pa	rt 12. Interpreter's Contact Information, Cert	tificatio	on, and Signature	A-
Int	terpreter's Full Name			
1.	Interpreter's Family Name (Last Name)		Interpreter's Given Name (	(First Name)
2.	Interpreter's Business or Organization Name			
Int	terpreter's Contact Information			
3.	Interpreter's Daytime Telephone Number	4.	Interpreter's Mobile Telep	ephone 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 ar	nd		,
	I have interpreted every question on the application and Instage, and the applicant informed me that he or she understo			
6.	Interpreter's Signature			Date of Signature (mm/dd/yyyy)
<b>→</b>	•			
Ot	ert 13. Contact Information, Certification, and ther Than the Applicant eparer's Full Name	Jigna		cparing tills / tpplication, ii
1.	Preparer's Family Name (Last Name)		Preparer's Given Name (Fi	irst Name)
2.	Preparer's Business or Organization Name			
Pro	eparer's Contact Information			
3.	Preparer's Daytime Telephone Number	4	. Preparer's Mobile Telep	phone Number (if any)
5.	Preparer's Email Address (if any)			
Pro	eparer's Certification and Signature			
that only	rtify, under penalty of perjury, that I prepared this application all of the responses and information contained in and submover information provided by the applicant. The applicant reviews the responses and information in or submitted with	itted wit ewed the	h the application are compleresponses and information	plete, true, and correct and reflects
6.	Preparer's Signature			Date of Signature (mm/dd/yyyy)
$\Rightarrow$	·			

Pai	rt 14. Addition	al Information	1		A-
han `yp	what is provided, y	ou may make cop e and A-Number a	ies of this page to t the top of each	on within this application, use the space of complete and file with this application of sheet; indicate the Page Number, Part N	or attach a separate sheet of paper.
	Family Name (La	st Name)		Given Name (First Name)	Middle (if applicable)
•	Page Number	Part Number	Item Number		
i.	Page Number	Part Number	Item Number		
<b>l.</b>	Page Number	Part Number	Item Number		
5.	Page Number	Part Number	Item Number		
	Do not comp	lete Parts 15 (	or 16 until the	e USCIS officer instructs you to	do so at the interview

Part 15. Signature at Interview		A-					
vear (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, are complete, true, and correct. The dence 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 Signatu	ıre					
Dawt 16 Oath of Allegiance							
Part 16. Oath of Allegiance							
If your application is approved, you will be scheduled for a naturalization following Oath of Allegiance immediately prior to becoming a natural willingness to take this Oath:	•	•					
I hereby declare on oath, that I absolutely and entirely renounce and abstate, or sovereignty, of whom or which I have heretofore been a subject		delity to any foreign prince, potentate,					
that I will support and defend the Constitution and laws of the United S	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	ne law;						
that I will perform noncombatant service in the armed forces of the Un	ited States when required	by the law;					
that I will perform work of national importance under civilian direction	n when required by the law	w; and					
that I take this obligation freely, without any mental reservation or pur	pose of evasion; so help n	ne God.					
Applicant's Signature		Date of Signature (mm/dd/yyyy)					