

## **Application for Certificate of Citizenship**

**Department of Homeland Security** 

U.S. Citizenship and Immigration Services

**USCIS** Form **N-600** 

OMB No. 1615-0057 Expires 02/28/2027

	Date Stamp		Receipt	Action Block
_				
For USC:				
Use				
Onl	y Remarks			
	Kemarks			
	To be completed	Select this box if	Attorney State Bar Number	
	by an Attorney or Accredited	Form G-28 is attached.	(if applicable)	USCIS Online Account Number (if any)
Re	epresentative (if any).	attacheu.		
<b>▶</b> S7	TART HERE - Type or	print in black ink.		
Part	1. Information Abo	out Your Eligibility	,	Enter Your 9 Digit A-Number:
1.	This application is being	filed based on the fact th	at: (Select <b>only one</b> box)	► A-
	I am a BIOLOGICA	L child of a U.S. citizen	parent.   I am an ADOPT	ED child of a U.S. citizen parent.
	Other (Explain fully)	):		
	NOTE: If you need extr	a space to complete this	section, use the space provided	in Part 11. Additional Information.
	<b>,</b>	1 1	7 1 1	
Part	2. Information Abo	out You		
				icate of Citizenship. Provide information
about	your child if you are a U	J.S. citizen parent applyi	ng for a Certificate of Citizens	hip for your minor child.
1.	Current Legal Name (do	not provide a nickname)		
	Family Name (Last Name	e)	Given Name (First Name)	Middle Name
2.	Your Name Exactly As It	Appears on Your Perma	anent Resident Card (if differen	nt from above)
	Family Name (Last Name	e)	Given Name (First Name)	Middle Name
3.	Other Names You Have V	Used Since Birth		
	Provide all other names y	ou have ever used, inclu	de nicknames, maiden name, a	nd aliases.
	Family Name (Last Name	e)	Given Name (First Name)	Middle Name
4.	U.S. Social Security Nun	nber (if any) 5. USO	CIS Online Account Number (i	fany)
	<b>&gt;</b>	<b>&gt;</b>		
6.	Date of Birth (mm/dd/yy	yy) 7. Country	of Birth	
8.	Country of Prior Citizens	hip or Nationality	9. Gender	
			Male Fer	nale

Pai	rt 2.	Information About You (continued)
10.	Ma	iling Address
	In (	Care Of Name (if any)
	Stre	eet Number and Name Apt. Ste. Flr. Number
	City	y or Town State ZIP Code + 4
	Pro	vince (foreign address only)  Postal Code (foreign address only)  Country (foreign address only)
11.	Phy	vsical Address
	Stre	eet Number and Name (Do <b>not</b> provide a PO Box in this space unless it is your <b>ONLY</b> address.) Apt. Ste. Flr. Number
	City	y or Town State ZIP Code + 4
	Pro	vince (foreign address only)  Postal Code (foreign address only)  Country (foreign address only)
12.		rrent Marital Status
		Single, Never Married Married Divorced Widowed Separated Marriage Annulled
		Other (Explain):
13.	U.S	S. Armed Forces
	Are	e you a member or veteran of any branch of the U.S. Armed Forces?
14.	Info	ormation About Your Admission into the United States and Current Immigration Status
	A.	I arrived in the following manner
		Port-of-Entry
		City or Town State Date of Entry (mm/dd/yyyy)
		Exact Name Used at Time of Entry
		Family Name (Last Name) Given Name (First Name) Middle Name
	В.	I used the following travel document to be admitted to the United States
		Passport Travel Document
		Passport Number Travel Document Number
		Deta Bernard or Travel Decorated
		Country of Issuance for Passport or Date Passport or Travel Document Travel Document Issued (mm/dd/yyyy)

rt 2.	Information About You	(continued)				A-		
C.	I am							
	A Lawful Permanent Reside	ent (LPR)	A Nonimmig	ant A	A Refugee/As	sylee		
	Other (Explain):							
	NOTE: If you select "Other" an Additional Information.	nd you need e	xtra space to com	plete this se	ection, use the	e space provid	ed in <b>Part 11.</b>	,
D.	I obtained LPR status through ac	ljustment of s	status in the Unite	d States or a	admission as	a LPR (if appl	licable)	
	Date I became a LPR (mm/dd/yyyy)		enship and Immi Location Where I			) Office That (	Granted My L	PR
Цол	ve you previously applied for a Co	ertificate of C	itizanshin or II S	Passport?			☐ Yes	П
If y	you answered "Yes" to Item Num space provided in Part 11. Addit	<b>ber 15.</b> , provi	ide an explanation	-	you need ext	ra space to co		
If y	ve you ever abandoned or lost you you answered "Yes" to Item Num space provided in Part 11. Addit	<b>ber 16.</b> , provi	ide an explanation	ı below. If	you need ext	ra space to con	Yes mplete this sec	Netion, u
If y	re you adopted? rou answered "Yes" to Item Num Place of Final Adoption City or Town	ber 17., comp	State	Count	try		☐ Yes	1
В.	Date of Adoption (mm/dd/yyyy)		Legal Custody Boods (dd/yyyy)	egan		hysical Custod d/yyyy)	dy Began	
If y	d you have to be re-adopted in the you answered "Yes" to Item Num			).			Yes	<u> </u>
A.	Place of Final Adoption							
	City or Town		State	Count	try			
В.	Date of Final Adoption (mm/dd/yyyy)	c.	Date Legal Custo (mm/dd/yyyy)	ody Began		Date Physical (mm/dd/yyyy)	Custody Bega	n
We	ere your parents married to each o	lher when you	were born (or ac	lopted)?			Yes	
Did	l your parents marry after you we	re born?					Yes	
Do	you regularly reside in the United	States in the	legal and physica	ıl custody o	t your U.S. c	itizen parents?	? Yes	

Par	rt 2. Information About You (continued)	A-						
22.	Have you been absent from the United States since you first arrived?					Yes		No
	Complete the following information only if you are claiming U.S. citizenship at the time of October 10, 1952. If you need extra space to complete this section, use the space provided in							
	A. Date You Left the United States (mm/dd/yyyy)  B. Date You Returned to the United States (mm/dd/yyyy)							
	C. Place of Entry Upon Return to the United States							
	City or Town State							
	D. Date You Left the United States (mm/dd/yyyy)  E. Date You Returned to the United States (mm/dd/yyyy)							
	F. Place of Entry Upon Return to the United States							
	City or Town State							
Par	rt 3. Biographic Information							
1.	Ethnicity (Select <b>only one</b> box)  Hispanic or Latino Not Hispanic or Latino							
2.	Race (Select all applicable boxes)  White Asian Black or African American or Alaska Native Other Paci			r				
3.	Height Feet Inches 4. Weight Pounds							
5.	Eye color (Select <b>only one</b> box)  Black Blue Brown Gray Green Hazel Maroon	P	ink		Unkn Other	own/		
6.	Hair color (Select only one box)  Bald Black Blond Brown Gray Red Sandy (No hair)		Whi		] Uı	ıknov her	vn/	
Par	rt 4. Information About Your U.S. Citizen Biological Father (or Adoptive	Fath	er)					
info	TE: Complete this section if you are claiming citizenship through a U.S. biological father (of a crmation about yourself if you are a U.S. citizen father applying for a Certificate of Citizenship ogical or adopted child.							
1.	Current Legal Name of U.S. Citizen Father							
	Family Name (Last Name) Given Name (First Name)	Mi	ddle	Name	:			

		Information About Your U.S. Citizen Biological Father optive Father) (continued)		A					
2.		te of Birth (mm/dd/yyyy)  3. Country of Birth	4.	Countr	y of (	Citize	nship c	or Nat	ionality
5.	Phy	vsical Address							
J.	•	eet Number and Name (Type or print "Deceased" and the date of death if your father	has pas	sed awa	/.) A	.pt. S	Ste. F	lr. N	umber
	Cit	y or Town		State			ZIP	Code -	+ 4
	Pro	vince (foreign address only)  Postal Code (foreign address only)  Cou	ıntry (fo	oreign a	ddres	s only	y)		
6.	Му	father is a U.S. citizen by							
		Birth in the United States Acquisition after birth through naturalization	n of alie	en paren	ts				
		Birth abroad to U.S. citizen parents  Certificate of Citizenship Number  Alien Registration Number (A-Number A-	ımber)	(if any)					
		Naturalization Place of Naturalization (Name of Court or USCIS Office Location)							
		City or Town State							
		Certificate of Naturalization Number  A-Number (if any)  A-  A-  A-  A-  A-  A-  A-  A-  A-  A		Date	of Na	ıturali	zation	(mm/	dd/yyyy)
7.	Ha	s your father ever lost U.S. citizenship or taken any action that would cause los	s of U.	S. citize	nship	?		Yes	☐ No
	Ify	you answered "Yes" to Item Number 7., provide an explanation in Part 11. Ac	ddition	al Infor	mati	on.			
8.	-	arital History							
	A.	How many times has your U.S. citizen father been married (including annulle marriages to the same person)?	ed marr	iages an	d				
	B.	What is your U.S. citizen father's current marital status?							
		Single, Never Married Married Divorced Widowed	Sepa	ırated	□ N	Marria	ge Anı	nulled	
		Other (Explain):							
		If you selected "Other," provide an explanation. If you need extra space to co Part 11. Additional Information.	mplete	this sec	tion,	use th	ne spac	e prov	ided in

		Information About Your U.S. Citizen Biological Father optive Father) (continued)		A-					
9.	Info	ormation About U.S. Citizen Father's Current Spouse							
	A.	Family Name (Last Name) Given Name (First Name)	N	Middle	e Name	;			
	В.	Date of Birth (mm/dd/yyyy) C. Country of Birth							
	D.	Country of Citizenship or Nationality							
	Ε.	Spouse's Physical Address							
		Street Number and Name			Apt.	Ste.	Flr.	Nun	nber
					] []				
		City or Town	-	State			— IP Сос	 de + 4	 1
		City of Town	ПÌ	raic				7_ [	
		Province Postal Code Country						J L	
		(foreign address only) (foreign address only) (foreign a	ıddre	ss onl	y)				
	F.	Date of Marriage (mm/dd/yyyy)							
	G.	Place of Marriage							
		City or Town State Country							
	н	Spouse's Immigration Status							
		U.S. Citizen Lawful Permanent Resident							
		Other (Explain):							
		If you selected "Other," provide an explanation. If you need extra space to comple <b>Part 11. Additional Information</b> .	te thi	s sect	ion, use	e the sp	pace p	rovid	ed in
	I.	Is your U.S. citizen father's current spouse also your biological (or adopted) mothe	r?			[	Y	es	] No
Par	t 5.	Information About Your U.S. Citizen Biological Mother (or Ado	ptiv	e Mo	ther)				
infor	mat	Complete this section if you are claiming citizenship through a U.S. citizen biologic tion about yourself if you are a U.S. citizen mother applying for a Certificate of Cit. I or adopted child.							ovide
1.	_	rrent Legal Name of U.S. Citizen Mother							
-		nily Name (Last Name) Given Name (First Name)		M	iddle N	lame			
				$\exists \vdash$					
2.	L Dat	te of Birth (mm/dd/yyyy) 3. Country of Birth 4.	Co	⊥ ∟ ountrv	of Citi	zenshi	p or N	 Vation	 nality
					22 2111		r		

	rt 5. Information About Your U.S. Citizen Biological Mother Adoptive Mother) (continued)
5.	Physical Address
	Street Number and Name (Type or print "Deceased" and the date of death if your mother has passed away.) Apt. Ste. Flr. Number
	City or Town State ZIP Code + 4
	Province (foreign address only) Postal Code (foreign address only) Country (foreign address only)
6.	My mother is a U.S. citizen by
	☐ Birth in the United States ☐ Acquisition after birth through naturalization of alien parents
	Birth abroad to U.S. citizen parents
	Certificate of Citizenship Number A-Number (if any)
	► A-
	Naturalization
	Place of Naturalization (Name of Court or USCIS Office Location)
	City or Town State
	Certificate of Naturalization Number  A-Number (if any)  Date of Naturalization (mm/dd/yyyy)
	► A-
7.	Has your mother ever lost U.S. citizenship or taken any action that would cause loss of U.S. citizenship?
	If you answered "Yes" to Item Number 7., provide an explanation in Part 11. Additional Information.
8.	Marital History
	A. How many times has your U.S. citizen mother been married (including annulled marriages and marriages to the same person)?
	<b>B.</b> What is your U.S. citizen mother's current marital status?
	☐ Single, Never Married ☐ Married ☐ Divorced ☐ Widowed ☐ Separated ☐ Marriage Annulled
	Other (Explain):
	If you selected "Other," provide an explanation. If you need extra space to complete this section, use the space provided in <b>Part 11. Additional Information</b> .
9.	Information About U.S. Citizen Mother's Current Spouse
	A. Family Name (Last Name) Given Name (First Name) Middle Name
	B. Date of Birth (mm/dd/yyyy) C. Country of Birth

Part 5.	Information About Y	our U.S. Citizen Biolo	gical M	other	A-					
(or Ado	optive Mother) (continu	ued)								
D.	Country of Citizenship or N	Vationality								
E.	Spouse's Physical Address									
	Street Number and Name					Apt.	Ste.	Flr.	Nun	nber
	City or Town			<u>S</u>	tate		ZI	P Cod	le + 4	1
	Province	Postal Code		Country						
	(foreign address only)	(foreign addres	ss only)	(foreign addres	s only	)				
F.	Date of Marriage (mm/dd/y	ууу)								
G.	Place of Marriage									
	City or Town	State		Country						
Н.										
	U.S. Citizen Law	ful Permanent Resident								
	Other									
	If you selected "Other," pro	ovide an explanation. If you	need extra	space to complete this	sectio	n, use	the sp	ace pr	ovid	ed in
	Part 11. Additional Inform	nation.								
I.	Is your U.S. citizen mother	s current spouse also your b	iological (	(or adopted) father?				] Y	es [	] No
Part 6.	Physical Presence in t	the United States Fron	n Birth	Until Filing of For	m N-	600				
	Only applicants born outside									
•	r U.S. citizen biological fath il the date you file your Fo	_	mother re	sided in the United Sta	tes. Ir	ıclude	all da	tes fr	om y	our our
	icate whether this information		n father or	mother						
		S. Citizen Mother	- 1001101							
	<u> </u>									
•	vsical Presence in the United		n	F ( /11/)		т (	/ 1 1	/	`	
Α.	From (mm/dd/yyyy)	To (mm/dd/yyyy)	В.	From (mm/dd/yyyy)		10 (1	nm/dd	/уууу	)	
C	F ( /11/ )	T. ( /11/ )		F ( /11/ )			/ 1 1	,		
C.	From (mm/dd/yyyy)	To (mm/dd/yyyy)	— D.	From (mm/dd/yyyy)		10 (1	nm/dd	/уууу	)	
	F ( /11/ )	T. ( /11/ )		F ( /11/ )			/11	/	`	
Е.	From (mm/dd/yyyy)	To (mm/dd/yyyy)	F.	From (mm/dd/yyyy)		10 (1	nm/dd	/уууу	)	
•	F ( /11/ )	T. ( /11/ )		F ( /11/ )			/11	/	`	
G.	From (mm/dd/yyyy)	To (mm/dd/yyyy)	Н.	From (mm/dd/yyyy)		10 (1	nm/dd	уууу	)	

Pai	rt 7. Information About Military Service of U. S. Citizen Parents	
NO	<b>TE:</b> Complete this only if you are an applicant claiming U.S. citizenship at time of birth abroad.	
1.	Has your U.S. citizen parent served in the U.S. Armed Forces?	No
2.	If you answered "Yes" to Item Number 1., which parent served in the U.S. Armed Forces?	
	U.S. Citizen Father U.S. Citizen Mother	
3.	Dates of Service (mm/dd/yyyy) (If time of service fulfills any of the required physical presence, submit evidence of the service	ce.)
	A. From (mm/dd/yyyy) To (mm/dd/yyyy)  B. From (mm/dd/yyyy) To (mm/dd/yyyy)  [	
4.	Type of Discharge	
	☐ Honorable ☐ Other than Honorable ☐ Dishonorable	
Pa	rt 8. Applicant's Statement, Contact Information, Certification, and Signature	
NO	<b>TE:</b> Read the <b>Penalties</b> section of the Form N-600 Instructions before completing this part.	
Ap	plicant's Statement	
NO	TE: Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item 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 instruction on this application and my answer to every question.	
	B. The interpreter named in Part 9. read to me every question and instruction on this application and my answer to	
	every question, in, a language in which I am fluent and I understood everything.	
2.	Applicant's Statement Regarding the Preparer	_
	At my request, the preparer named in <b>Part 10.</b> , prepared this application for me based only upon information I provided or authorized.	_],
Ap	plicant's Contact Information	
3.	Applicant's Daytime Telephone Number  4. Applicant's Mobile Telephone Number (if any)	_
5.	Applicant's Email Address (if any)	

## Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I 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.

	rt 8. Applicant's Statement, Contact Information, Certification, d Signature (continued)	A-					
	derstand that USCIS may require me to appear for an appointment to take my biometrics (fing ature) and, at that time, if I am required to provide biometrics, I will be required to sign an oat			_		ıd/or	
	1) I reviewed and provided or authorized all of the information in my application;						
	2) I understood all of the information contained in, and submitted with, my application; and	ł					
	3) All of this information was complete, true, and correct at the time of filing.						
	rtify, under penalty of perjury, that I provided or authorized all of the information in my applic rmation contained in, and submitted with, my application, and that all of this information is co						
App	plicant's Signature						
6.	Applicant's Signature	Da	ate of	Signa	ture (1	nm/do	d/yyyy)
	<b>TE TO ALL APPLICANTS:</b> If you do not completely fill out this application or fail to subnructions, USCIS may deny your application.	nit req	uired	docur	nents	listed	in the
Pai	rt 9. Interpreter's Contact Information, Certification, and Signature						
Prov	vide the following information about the interpreter.						
Int	terpreter's Full Name						
1.	Interpreter's Family Name (Last Name)  Interpreter's Given Name (	First 1	Name	e)			
2.	Interpreter's Business or Organization Name (if any)						
Int	terpreter's Mailing Address						
3.	Street Number and Name Apt.	Ste.	Flr.	Nun	ıber		
	City or Town State			ZIP	Code ·	+ 4	
						] - [	
	Province Postal Code Country						
Int	terpreter's Contact Information						
4.	Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Telephone	lephor	ne Nu	mber	(if any	7)	
6.	Interpreter's Email Address (if any)						

	rt 9. Interpreter's Contact Information, Certification, and Signature ntinued)  A-
Int	erpreter's Certification
I cei	tify, under penalty of perjury, that:
Iten appl	fluent in English and , which is the same language specified in <b>Part 8.</b> , a <b>B.</b> in <b>Item Number 1.</b> , and I have read to this applicant in the identified language every question and instruction on this ideation and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, answer on the application, including the <b>Applicant's Certification</b> , and has verified the accuracy of every answer.
Int	erpreter's Signature
7.	Interpreter's Signature Date of Signature (mm/dd/yyyy)
	rt 10. Contact Information, Declaration, and Signature of the Person Preparing this Application, if ner Than the Applicant
Prov	ide the following information about the preparer.
Pro	parer'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)
Pro	parer's Mailing Address
3.	Street Number and Name  Apt. Ste. Flr. Number
	City or Town         State         ZIP Code + 4           -         -
	Province Postal Code Country
Pro	parer's Contact Information
4.	Preparer's Daytime Telephone Number  5. Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)

			Contact Information. Declaration, and Signature of the Person this Application, if Other Than the Applicant (continued)	A-
	_			
Pre	pa	rer's	Statement	
7.	A		I am not an attorney or accredited representative but have prepared this application on the applicant and with the applicant's consent.	behalf of
	В		I am an attorney or accredited representative and my representation of the applicant in extends does not extend beyond the preparation of this application.	this case
			<b>NOTE:</b> If you are an attorney or accredited representative whose representation exter application, you may be obliged to submit a completed Form G-28, Notice of Entry of Accredited Representative, with this application.	• • •
Pre	pa	rer's	Certification	
revie with	we , hi	d this s or h	are, I certify, under penalty of perjury, that I prepared this application at the request of the completed application and informed me that he or she understands all of the information or application, including the Applicant's Certification, and that all of this information is application based only on information that the applicant provided to me or authorized	on contained in, and submitted complete, true, and correct. I
Pre	ра	rer's	Signature	
8.	Pı	epare	r's Signature	Date of Signature (mm/dd/yyyy)

Pa	rt 11	1. Additional Information					A-					
thar Typ	what e or p	ed extra space to provide any additional t is provided, you may make copies of the print your name and A-Number (if any) at to which your answer refers; and sign at	nis pa at the	ge to complete and top of each sheet;	I file with this ap	olication o	r atta	ch a s	separa	ate sh	eet of	
1.	Fan	mily Name (Last Name)	Giv	Given Name (First Name) Midd				lame				
2.	A-N	Number (if any) ► A-										
3.		Page Number B. Part Number	C.	Item Number								
	D.											_
4		De la Navalent D. De de Navalent	<u> </u>	Idama Namahan								_
4.	A. D.	Page Number  B. Part Number	C.	Item Number								
												_
5.	A.	Page Number B. Part Number	C.	Item Number								
	D.											
6.	A. D.	Page Number B. Part Number	C.	Item Number								

## NOTE: Do not complete Parts 12. and 13. unless the USCIS officer instructs you to do so at the interview. Part 12. Affidavit (do NOT complete this part unless instructed to do so AT THE INTERVIEW) I, the (applicant, parent, or legal guardian) do swear or affirm, under penalty of perjury under the laws of the United States, that I know and understand the contents of this application signed by me, and the attached supplementary pages number \_\_\_\_\_ to \_\_\_\_ inclusive, that the same are true and correct to the best of my knowledge, and that corrections number to were made by me or at my request. Applicant's, Parent's, or Legal Guardian's Signature Date of Signature (mm/dd/yyyy) Subscribed and sworn or affirmed before me upon examination of the applicant (parent, legal, guardian) on Date (mm/dd/yyyy) at (Location) USCIS Officer's Title USCIS Officer's Printed Name USCIS Officer's Signature Date of Signature (mm/dd/yyyy) Part 13. Officer Report and Recommendation on Application for Certificate of Citizenship (for USCIS use **ONLY**) On the basis of the documents, records, the testimony of persons examined, and the identification upon personal appearance of the underage beneficiary, I find that all the facts and conclusions set forth under oath in this application are: 1. True and correct 2. The applicant derived or acquired U.S. citizenship on Date (mm/dd/yyyy) The applicant derived or acquired U.S. citizenship through (Select the box next to the appropriate section of law, or if the 3. section of law is not reflected, type or print the applicable section of law in the space next to "Other.") INA Section 301 INA Section 309 INA Section 320 INA Section 321 E. Other The applicant has not been expatriated since that time 4.

Part 13. Officer Report and Record Certificate of Citizenship (for USC	A				
I recommend that this Form N-600 be:	Approved Denied				
Issue Certificate of Citizenship in the name	of				
Family Name (Last Name)	Given Name (First Name)	me)	Middle Name		
USCIS Officer's Printed Name	US	CIS Officer's Title			
USCIS Officer's Signature	Date of Signature (mm/dd/yyyy)				
☐ I do ☐ do not concur with the USCIS USCIS District Director's or Field Office Di		f Form N-600.	Date of Signature (mm/dd/yyyy)		