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| **nAturalization questionnaire** |  |

### *For completion by Lawful Permanent Resident*

Please note: Failure to complete all sections or to fully disclose any information requested may result in a substantial delay in the processing of this case and/or the denial of the application. We may require additional information following review.If a question does not apply, please put "none" or "not applicable" (N/A).

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| Eligibility | |
| I am eligible for Naturalization because I am at least 18 years old AND: | I have been a Permanent Resident of the U.S. for at least 5 years; or  I have been a Permanent Resident of the U.S. for at least 3 years, AND I have been married to and living with the same U.S. citizen spouse for the last 3 years, AND my spouse has been a U.S. citizen for the last 3 years; or  I am a Permanent Resident of the U.S. AND my spouse is a U.S. citizen AND my U.S. citizen spouse is regularly engaged in specified employment abroad; or   I am applying on the basis of qualifying military service; or  Other (please explain): |

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| Contact Details | |
| Current Legal Last Name: |  |
| Current Legal First Name: |  |
| Current Legal Middle Name: | or  Not applicable |
| Alias/Nickname: |  |
| Suffix: |  |
| Is your name listed differently on your Permanent Resident Card?  *If yes, please list your name exactly as it appears on the card* | Yes  No  First:       Middle:       Last: |
| Maiden Name: | or  Not applicable |
| Have you used any other names from a previous marriage?  *If yes, provide ALL other names used. Separate entries by placing each name on a new line.* | Yes  No |
| E-mail Address: |  |
| Daytime Phone: |  |
| Work Phone: |  |
| Evening Phone: |  |
| Mobile Phone: |  |

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| Name Change | | |
| Would you like to legally change your name? | | Yes  No. If no, please skip to the next section. |
| If yes, please print the name you would like to use below. Do not use initials or abbreviations. | | |
| New Last Name: |  | |
| New First Name: |  | |
| New Middle Name: |  | |

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| Personal Details | | |
| Gender: | Male  Female | |
| U.S. Social Security Number: | or  I have not been issued a U.S. Social Security number | |
| Alien Number (starts with an “A”): | or  Not applicable | |
| Date of Birth (mm/dd/yyyy): |  | |
| Date you became a U.S. Permanent Resident (mm/dd/yyyy): |  | |
| Country of Birth: |  | |
| Country of Citizenship (Please list all): |  | |
| Country where most recent citizenship, permanent residency or landed immigrant status granted: |  | |
| Height: | feet       inches | |
| Weight (pounds): |  | |
| Are you Hispanic or Latino? | Yes  No | |
| Race (select one or more): | White  Asian  Black or African American  American Indian or Alaska Native  Native Hawaiian or Other Pacific Islander | |
| Hair color: |  | |
| Eye color: |  | |
| Please select if any of the following are true: | I am deaf or hearing impaired and will need a sign language interpreter who uses the following language (e.g., American Sign Language):  I use a wheelchair or other device that assists with mobility  I am blind or sight impaired (low vision)  I require another type of accommodation: | |
| Do you have a physical or developmental impairment that prevents you from demonstrating your knowledge and understanding of the English language and/or civics requirements for naturalization? | | Yes  No |
| Are you **50** years of age or older AND have lived in the United States as Permanent Resident for periods totaling at least **20** years at the time of filing this application? | | Yes  No |
| Are you **55** years of age or older AND have lived in the United States as Permanent Resident for periods totaling at least **15** years at the time of filing this application? | | Yes  No |
| Are you **60** years of age or older AND have lived in the United States as Permanent Resident for periods totaling at least **20** years at the time of filing this application? | | Yes  No |

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| Current Residence and Mailing Address | |
| Date From (mm/dd/yyyy): | to Present |
| Street Address: |  |
| Address 2: |  |
| City: |  |
| State/Province/Region: |  |
| Zip Code: |  |
| Country: |  |
| Is this the same address as your current mailing address (for courier delivery)? If no, please complete the address fields below: | Yes  No |
| Street Address: |  |
| Address 2: |  |
| City: |  |
| State/Province/Region: |  |
| Zip Code: |  |
| Country: |  |
| Phone Number Associated With This Address: |  |
| *To ensure you receive all government related notices and documents, such as an approved EAD card, please ensure that your name (and each dependent living in your household) is listed as a resident of this address with the U.S. Postal Service.* | |

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| Residence History*Please provide all residence information for the past five (5) years, not including your current address. (If you have lived at your current residence for the past 5 years or more, you do not need to complete this section.) Please provide previous addresses in chronological order, most recent address first*. | | | | | | |
| **Date *From***  ***(mm/dd/yyyy)*** | **Date To**  ***(mm/dd/yyyy)*** | **Street Address** | **City** | **State / Province** | **Zip Code** | **Country** |
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| Parents | |
| Were your parents married before your 18th birthday? | Yes  No |
| Is your mother a U.S. citizen?  *If yes, please provide:*  Mother’s Last Name:  Mother’s First Name:  Mother’s Middle Name:  Mother’s Country of Birth:  Mother’s Date of Birth (mm/dd/yyyy): | Yes  No |
| Is your father a U.S. citizen?  *If yes, please provide:*  Father’s Last Name:  Father’s First Name:  Father’s Middle Name:  Father’s Country of Birth:  Father’s Date of Birth (mm/dd/yyyy): | Yes  No |

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| Employment and Schools*Please list where you have worked or attended school part time or full time during the last five (5) years. Provide information for the complete time period. Include all military, police and/or intelligence service during this time period. List in chronological order, most recent first. If you worked for yourself, type “self employed.” If you were unemployed, type “unemployed.” If you need more space, please attach an additional sheet(s) of paper.* | | | | | |
| **Employer or School Name** | **Address**  **(street, city, state, and zip code)** | **If foreign address, include province/region, country and postal code** | **Dates From** | **Dates To** | **Title / Occupation** |
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| Time Spent Outside the U.S.*Begin with your most recent trip and work backwards. If you need more space, use an additional sheet(s) of paper.* | | | | | |
| How many **total days (24 hours or longer)** did you spend outside the U.S. during the past five (5) years? | | | | days | |
| How many trips of **24 hours or longer** did you take outside the U.S. during the past five (5) years? | | | | trips | |
| List below all the trips of **24 hours or longer** that you have taken outside the United States during the last 5 years. Begin with your most recent trip and work backwards. If you need more space, please attach an additional sheet of paper. | | | | | |
| **Date you left the U.S. (mm/dd/yyyy)** | **Date you returned to the U.S. (mm/dd/yyyy)** | **Did trip last more than 6 months?**  **Yes or No** | **Countries to which you traveled** | | **Total days outside the U.S.** |
|  |  | Yes  No |  | |  |
|  |  | Yes  No |  | |  |
|  |  | Yes  No |  | |  |
|  |  | Yes  No |  | |  |
|  |  | Yes  No |  | |  |
|  |  | Yes  No |  | |  |
|  |  | Yes  No |  | |  |

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| Marital History | | |
| My current marital status is: | | Single, never married  Married  Separated  Divorced  Widowed  Marriage annulled |
| If you are married, is your spouse a current member of the U.S. armed forces? | | Yes  No |
| How many times have you been married (including annulled marriages and marriage(s) to the same person)? | | 0 |
| Spouse Details*Please complete if you are married now.* | | |
| **Legal Name of Current Spouse:** | | |
| Family/Last Name: |  | |
| Given/First Name: |  | |
| Middle Name: |  | |
| **Previous Legal Name of Current Spouse**: | | |
| Family/Last Name: |  | |
| Given/First Name: |  | |
| Middle Name: |  | |
| Date of Birth (mm/dd/yyyy): |  | |
| **Other Names Used by Current Spouse (nicknames, alias, maiden name):** | | |
| Family/Last Name: |  | |
| Given/First Name: |  | |
| Middle Name: |  | |
| **Spouse Information:** | | |
| Spouse’s Date of Birth: |  | |
| Date of Marriage (mm/dd/yyyy): |  | |
| Spouse’s U.S. Social Security Number: |  | |
| Does your spouse have the same home address as you?  *If no, please provide spouse’s complete address (street, city, state, and zip)* | Yes  No | |
| Spouse’s present employer: |  | |
| Is your current spouse a U.S. citizen? | Yes  No | |
| If yes, when did your spouse become a U.S. citizen? | At Birth  Other  Not Applicable | |
| If answer above was ‘Other’:  Date (mm/yyyy) your spouse became a U.S. citizen:  Place your spouse became a U.S. citizen: |  | |
| If answer above was ‘Not Applicable’:  Spouse’s country of citizenship:  Spouse's USCIS “A” #:  Spouses U.S. immigration status: | Permanent Resident  Other: | |
| If answer above was ‘no’:  Spouse’s Country of Citizenship or Nationality:  Spouse’s A-Number:  Spouse’s Current Immigration Status: |  | |
| How many times has your current spouse been married (including annulled marriages and marriage(s) to the same person)? |  | |
| **Spouse’s Previous Marriage Details**  *If your current spouse was married before, provide the following information about your* ***spouse’s previous marriage****. If your spouse had more than one previous marriage, use a separate page to provide the information requested about each spouse.* | | |
| Prior Spouse’s Family/Last Name: |  | |
| Prior Spouse’s Given/First Name: |  | |
| Prior Spouse’s Middle Name: |  | |
| Prior Spouse’s U.S. Immigration Status: | U.S. Citizen  Permanent Resident  Other: | |
| Prior Spouse’s Date of Birth (mm/dd/yyyy): |  | |
| Prior Spouse’s Country of Birth: |  | |
| Prior Spouse’s Country of Citizenship or Nationality: |  | |
| Date of Marriage with Prior Spouse (mm/dd/yyyy): |  | |
| Date Marriage Ended with Prior Spouse (mm/dd/yyyy): |  | |
| How Marriage ended: | Annulled  Divorced  Spouse Deceased  Other: | |
| Prior Spouse Details*If you were married before, provide the following information about your prior spouse. If you have more than one previous marriage, use separate page to provide the information requested about each marriage.* | | |
| Your Prior Spouse’s Family/Last Name: |  | |
| Your Prior Spouse’s Given/First Name: |  | |
| Your Prior Spouse’s Middle Name: |  | |
| Prior Spouse’s U.S. Immigration Status when marriage ended: | U.S. Citizen  Permanent Resident  Other: | |
| Your Prior Spouse’s Date of Birth (mm/dd/yyyy): |  | |
| Your Prior Spouse’s Country of Birth: |  | |
| Your Prior Spouse’s Country of Citizenship or Nationality: |  | |
| Date of Marriage with Your Prior Spouse (mm/dd/yyyy): |  | |
| Date Marriage Ended with Your Prior Spouse (mm/dd/yyyy): |  | |
| How Marriage ended with Your Prior Spouse: | Annulled  Divorced  Spouse Deceased  Other: | |

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| Children*Provide the following information about all of your children (sons and daughters), regardless of age. “All” children includes: 1) Children who are alive, missing, deceased; 2) Children born in the United States or in other countries; 3) Children under 18 years of age or older; 4) Children who are currently married or unmarried; 5) Children living with you or elsewhere; 6) Current stepchildren; 7) Legally adopted children; 8) Children born when you were not married.*  *In location column, type ‘With me’ if child lives with you; list the street address, city, & state/country where child lives if not with you; or ‘Missing’ or ‘Deceased’, if applicable. If you need more space, use a separate page.*  *For Relationship, enter “Biological, Stepchild, or Legally Adopted”* | | | | | | |
| **Total number of children:** | | | 0 | | | |
| **Full Name**  **(First, Middle, Last)** | **Date of Birth (mm/dd/yyyy)** | **USCIS “A” # (if applicable)** | | **Country of Birth** | **Location** | **Relationship To You** |
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| Additional Questions *Please indicate "Yes" or “No” and provide an explanation if any of the following Yes / No questions apply. Answering ‘Yes’ to any of the following will not prevent you from applying for naturalization, but a full explanation is necessary.* | | | | | | | | |
| Have you **ever** claimed to be a U.S. citizen *(in writing or any other way)* | | | | | | | Yes  No | |
| Have you **ever** registered to vote in any Federal, State, or local election in the United States? | | | | | | | Yes  No | |
| Have you **ever** voted in any Federal, State, or local election in the United States? | | | | | | | Yes  No | |
| Do you now have, or did you **ever** have, a hereditary title or an order of nobility in any foreign country? | | | | | | | Yes  No | |
| Have you **ever** been declared legally incompetent or been confined to a mental institution? | | | | | | | Yes  No | |
| Do you owe any Federal, State, or local taxes that are overdue? | | | | | | | Yes  No | |
| Have you **ever** not filed a Federal, State or local tax return since you became a Permanent Resident?  If yes, did you consider yourself a “non-U.S. resident”? | | | | | | | Yes  No  Yes  No | |
| Have youcalled yourself a “non-U.S. resident” on a Federal, State or local tax return since you became a Permanent Resident? | | | | | | | Yes  No | |
| Have you **ever** been a member of, involved in, or in any way associated with, any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world? | | | | | | | Yes  No | |
| If yes, provide the information below. If you need more space, attach the names of the other group(s) on an additional sheet of paper and provide any evidence to support your answer. | | | | | | | | |
| **Name of Group** | **Purpose of Group** | | | **Dates of Membership** | | | | |
| **From**  **(mm/dd/yyyy)** | | | | **To**  **(mm/dd/yyyy)** |
| APEGGA | Canadian Professional Engineering | | | 01/31/2003 | | | | 03/31/2010 |
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| Have you **ever** been a member of or in any way associated *(either directly or indirectly)* with: | | | | | | | | |
| 1. The Communist Party? | | | | | | Yes  No | | |
| 1. Any other totalitarian party? | | | | | | Yes  No | | |
| 1. A terrorist organization? | | | | | | Yes  No | | |
| Have you **ever** advocated *(either directly or indirectly)* the overthrow of any government by force or violence? | | | | | | Yes  No | | |
| Have you **ever** persecuted *(either directly or indirectly)* any person because of race, religion, national origin, membership in a particular social group, or political opinion? | | | | | | Yes  No | | |
| Between March 23, 1933 and May 8, 1945, did you work for or associate in any way *(either directly or indirectly)* with: | | | | | | | | |
| 1. The Nazi government of Germany? | | | | | | Yes  No | | |
| 1. Any government in any area (1) occupied by, (2) allied with, or (3) established with the help of the Nazi government of Germany? | | | | | | Yes  No | | |
| 1. Any German, Nazi, or S.S. military unit, paramilitary unit, self-defense unit, vigilante unit, citizen unit, police unit, government agency or office, extermination camp, concentration camp, prisoner of war camp, prison, labor camp, or transit camp? | | | | | | Yes  No | | |
| Were you **ever** involved in any way with any of the following: | | | | | | | | |
| 1. Genocide? | | | | | | Yes  No | | |
| 1. Torture? | | | | | | Yes  No | | |
| 1. Killing or trying to kill someone? | | | | | | Yes  No | | |
| 1. Badly hurting, or trying to hurt, a person on purpose? | | | | | | Yes  No | | |
| 1. Forcing, or trying to force, someone to have any kind of sexual contact or relations? | | | | | | Yes  No | | |
| 1. Not letting someone practice his or her religion? | | | | | | Yes  No | | |
| Were you **ever** a member of, or did you ever serve in, help, or otherwise participate in, any of the following groups? | | | | | | | | |
| 1. Military unit? | | | | | | Yes  No | | |
| 1. Paramilitary unit? *(a group of people who act like a military group but are not part of the official military)* | | | | | | Yes  No | | |
| 1. Police unit? | | | | | | Yes  No | | |
| 1. Self-defense unit? | | | | | | Yes  No | | |
| 1. Vigilante unit*? (a group of people who act like the police, but are not part of the official police)* | | | | | | Yes  No | | |
| 1. Rebel group? | | | | | | Yes  No | | |
| 1. Guerilla group? *(a group of people who use weapons against or otherwise physically attack the military, police, government, or other people)* | | | | | | Yes  No | | |
| 1. Militia? *(an army of people, not part of the official military)* | | | | | | Yes  No | | |
| 1. Insurgent organization? *(a group that uses weapons and fights against a government)* | | | | | | Yes  No | | |
| Were you **ever** a worker, volunteer, or soldier, or did you otherwise ever serve in any of the following? | | | | | | | | |
| 1. Prison or jail? | | | | | | Yes  No | | |
| 1. Prison camp? | | | | | | Yes  No | | |
| 1. Detention facility? *(a place where people are forced to stay*) | | | | | | Yes  No | | |
| 1. Labor camp? *(a place where people are forced to work*) | | | | | | Yes  No | | |
| 1. Any other place where people were forced to stay? | | | | | | Yes  No | | |
| Were you **ever** part of any group, or did you ever help any group, unit, or organization that used a weapon against any person, or threatened to do so? | | | | | | Yes  No | | |
| 1. If yes, when you were a part of this group, or when you helped this group, did you ever use a weapon against another person? | | | | | | Yes  No | | |
| 1. If yes, when you were a part of this group, or when you helped this group, did you ever tell another person that you would use a weapon against that person? | | | | | | Yes  No | | |
| Did you **ever** sell, give or provide weapons to any person, or help another person sell, give or provide weapons to any person? | | | | | | Yes  No | | |
| 1. If yes, did you know that this person was going to use weapons against another person? | | | | | | Yes  No | | |
| 1. If yes, did you know that this person was going to sell or give the weapons to someone else who was going to use them against another person? | | | | | | Yes  No | | |
| Did you **ever** receive any type of military, paramilitary (a group of people who act like a military group but are not part of the official military), or weapons training? | | | | | | Yes  No | | |
| Did you **ever** recruit (ask), enlist (sign up), conscript (require), or use any person under age 15 to serve in or help an armed forces group? | | | | | | Yes  No | | |
| Did you **ever** use any person under age 15 to do anything that helped or supported people in combat? | | | | | | Yes  No | | |
| If any of the following questions apply to you, you must answer “Yes” even if your records have been sealed, expunged, or otherwise cleared. You must disclose this information even if anyone, including a judge, law enforcement officer, or attorney, told you that it no longer constitutes a record or told you that you do not have to disclose the information. | | | | | | | | |
| Have you **ever** committed, assisted in committing, or attempted to commit, a crime or offense for which you were not arrested? | | | | | | Yes  No | | |
| Have you **ever** been arrested, cited, or detained by any law enforcement officer (including any and all immigration officials or the U.S. Armed Forces) for any reason? | | | | | | Yes  No | | |
| Have you **ever** been charged with committing, attempting to commit or assisting in committing a crime or offense? | | | | | | Yes  No | | |
| Have you **ever** been convicted of a crime or offense? | | | | | | Yes  No | | |
| Have you **ever** been placed in an alternative sentencing or a rehabilitative program (e.g., diversion, deferred inspection, withheld adjudication, deferred adjudication)? | | | | | | Yes  No | | |
| Have you ever received a suspended sentence, been placed on probation or been paroled? | | | | | | Yes  No | | |
| If yes, have you completed the probation or parole? | | | | | | Yes  No | | |
| Have you ever been in jail or prison? | | | | | | Yes  No | | |
| If yes, how long were you in jail or prison? | | | | | | Years       Months       Days | | |
| If you answered Yes to any of the questions above, please complete the following table. If you need more space, use an additional sheet(s) of paper and provide any evidence to support your answer. If you answered No to all the questions above, please skip the table and continue. | | | | | | | | |
| **Why were you arrested, cited, detained or charged?** | | **Date arrested, cited, detained or charged**  **(mm/dd/yyyy)** | **Where were you arrested, cited, detained or charged? (City, State, Country)** | | **Outcome or disposition of the arrest, citation, detention, or charge (no charges filed, charges dismissed, jail, probation, etc.** | | | |
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| If you answer Yes to any of these questions, please provide a written explanation and provide any evidence to support your answer. | |
| Have you **ever**: | |
| 1. Been a habitual drunkard? | Yes  No |
| 1. Been a prostitute, or procured anyone for prostitution? | Yes  No |
| 1. Sold or smuggled controlled substances, illegal drugs or narcotics? | Yes  No |
| 1. Been married to more than one person at the same time? | Yes  No |
| 1. Married someone in order to obtain an immigration benefit? | Yes  No |
| 1. Helped anyone enter, or try to enter, the United States illegally? | Yes  No |
| 1. Gambled illegally or received income from illegal gambling? | Yes  No |
| 1. Failed to support your dependents or to pay alimony? | Yes  No |
| 1. Made any misrepresentation to obtain any public benefit in the United States? | Yes  No |
| Have you **ever** given any U.S. Government official(s) **any** information that was false, fraudulent or misleading? | Yes  No |
| Have you **ever** lied to any U.S. Government official to gain entry or admission into the United States or to gain immigration benefits while in the United States? | Yes  No |
| Have you **ever** been removed, excluded, or deported from the United States? | Yes  No |
| Have you **ever** been ordered removed, excluded, or deported from the United States? | Yes  No |
| Have you **ever** been placed in removal, exclusion, rescission, or deportation proceedings? | Yes  No |
| Are removal, exclusion, rescission or deportation proceedings (including administratively closed proceedings) **currently** pending against you? | Yes  No |
| Have you **ever** served in the U.S. Armed Forces? | Yes  No |
| Are you **currently** a member of the U.S. Armed Forces? | Yes  No |
| If you are **currently** a member of the U.S. Armed Forces, are you scheduled to deploy overseas, including to a vessel, within the next 3 months? | Yes  No |
| If you are **currently** a member of the U.S. Armed Forces, are you **currently** stationed overseas? | Yes  No |
| Have you **ever** been court-martialed, administratively separated, or disciplined, or have you received an other than honorable discharge, while in the U.S. Armed Forces? | Yes  No |
| Have you **ever** been discharged from training or service in the U.S. Armed Forces because you were an alien? | Yes  No |
| Have you **ever** left the United States to avoid being drafted into the U.S. Armed Forces? | Yes  No |
| Have you **ever** applied for any kind of exemption from military service in the U.S. Armed Forces? | Yes  No |
| Have you **ever** deserted from the U.S. Armed Forces? | Yes  No |
| Are you a male who lived in the United States at any time between your 18th and 26th birthdays? (This does not include living in the United States as a lawful nonimmigrant.) | Yes  No |
| If you answered “YES,” and have registered with selective the Selective Service System, provide the date that you registered and your Selective Service Number:  Date:  Selective Service Number: | |
| If you answered “YES,” but you did NOT register with the Selective Service System and are still under 26 years of age, you must register before you apply for naturalization, so that you can provide the information above. | |
| If you answered “YES,” but you did NOT register with the Selective Service System and you are now 26 years old or older, explain why you did not register: | |
| The following questions pertain to the Oath of Allegiance immediately prior to becoming a U.S. citizen. The text of the oath is provided below. | |
| Do you support the Constitution and form of government of the United States? | Yes  No |
| Do you understand the full Oath of Allegiance to the United States? | Yes  No |
| Are you willing to take the full Oath of Allegiance to the United States? | Yes  No |
| If the law requires it, are you willing to bear arms on behalf of the United States? | Yes  No |
| If the law requires it, are you willing to perform noncombatant services in the U.S. Armed Forces? | Yes  No |
| If the law requires it, are you willing to perform work of national importance under civilian direction? | Yes  No |
| At your naturalization ceremony, are you willing to give up any inherited title(s) or order(s) of nobility that you have in a foreign country? | Yes  No |

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| Oath |
| If your application is approved, you will be scheduled for a public oath ceremony at which time you will be required to take the following oath of allegiance immediately prior to becoming a naturalized citizen.  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 when required by the law; and  that I take this obligation freely, without any mental reservation or purpose of evasion; so help me God. |

|  |  |
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| Attach Documents | |
| **Current Passport:**  Complete copy of current passport, including all pages (even blank pages). Please provide high-quality copies, preferably color, single-sided. | Choose an item. |
| **Previous (Expired) Passport(s)**  including all pages (even blank pages). Please provide high-quality copies, preferably color, single-sided. | Choose an item. |
| **Alien Registration Card:**  **Copy of front and back of card.** | Choose an item. |
| **Photographs:**  Two (2) recent color photographs. | Choose an item. |
| **Marriage/Child/ren's Birth Certificate:** (if applicable)  Current Marriage and/or Birth certificate(s) to demonstrate relationship of family members. | Choose an item. |
| **Proof of termination of prior marriage(s), such as final decree of divorce, annulment, or death certificate.** Applies to all previous divorces or annulments. | Choose an item. |
| **Proof of spouse’s U.S. citizenship or permanent resident status: (if applicable)** | Choose an item. |
| **Copies of IRS Form 1722 – Federal Tax Return Transcripts:** (You can obtain these online at: http://www.irs.gov/Individuals/Order-a-Transcript.) | Choose an item. |
| **Legal Evidence of Name Change Except by Marriage, if applicable:** | Choose an item. |
| **Custody Decree for Children, if applicable:** | Choose an item. |
| **Additional Attachments:** | Choose an item. |

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Before submitting this questionnaire, please check all information to make sure it is accurate and complete, including, but not limited to:

* Your biographic details, residence(s), contact information, marital history, work/education history, current immigration status and immigration history.
* Information about your family members, including their names, biographic details, residence(s), contact details, marital history, work/education history, current immigration status and immigration history.

By submitting this questionnaire, you confirm that you have reviewed all responses and that each response is true, complete and correct. You also confirm that each supporting document you provide to Monty & Ramirez LLP is an unaltered original or a true copy thereof.