Write on these sheets <u>ALL the required information BEFORE</u> you come back to our office <u>to process your citizenship</u>.

A #	SSN	Selective Service #	# Date reg	istered		
Height: ft _	in Weight:	lbs Eye Color:	: Hair Color:			
Other Names U	sed:					
First	Midd	le:	Last:			
First	Midd	le:	Last:			
Trips made outs	side of the United S	States				
		that you have taken ou finishing with the oldes	tside the United States in t t one)	he last 5 years.		
Month /Day/Year Left U.S.	Month/Day/Year Returned	Were you gone for six months or more?	Country	Total days out of USA		
		yes no				
		yes no				
		yes no				
		yes no				
		yes no				
		yes no				
		yes no				
		yes no				
Addresses durir	ng the last five year	rs (<u>Starting with the</u>		_		
Number, Street nam	ne and apt # City	State	Zip Code From Month/Yea	To Month/Year		
				Present		
		· · ·				
				-		

Employment during the	he last five years (<u>Starti</u>) (Work or School address)	ng with the n	nost recent or From	<u>1e</u>) To	Occupation
Employer or School name	Street Address, City, State,	Zip Code	Month/Year		
				Present	
				<u> </u>	
Marriage					
If you are married give in	formation about your spous	e. How many t	times have you l	been married	?
(If you have been married b	pefore we will need information	on about ALL o	f your previous i	marriages)	
Legal name of spouse:					
Previous legal name of spou	use:				
Home Address:					
Name of spouse's employer	r:				
	Place of Ma				
Date of Birth:	Social Secur	rity Number:		Alien #:	
Country of Birth:	Country of C	Citizenship:			
If your husband or wife IS a					
Date of Naturalization	on (Month/Day/Year)				
Location of Naturali	ization (City/State)				
If your husband or wife IS I	NOT a U.S. citizen				
Immigration Status	(None/Resident/Citizen)		A#		
If you OR your spouse, we marriages. (If you need mo	ere married more than once ore space use the last page)	we will need in	nformation abo	ut ALL your	previous
Include ALL	of the previous marriages				
Name of ex-spouse:		Date	of Birth:		
State of Birth:	Country of Birth:				
Date of marriage:	Date of Divorce:	Immigra	tion Status: (No	ne / Resident /	' Citizen)

Children (We need the information of ALL your children even if they don't live with you)

(Include stepchildren, legally adopted children, and deceased children)

Name	Date of Birth	Alien Number	Country of Birth	Address (Street state, country)	•
		/		/	
	/	/	/	/	
	/	/	/	/	
	/	/	/	/	
		/			
Have you ever been arreste reason, include traffic ticke	, ,	letained by <u>a</u>	ANY* law enfo	orcement officer <u>fo</u>	or any
(*Including Immigration, military	officer or police	ce officer)			
Why were you arrested, cited De	ate arrested, cite	ed Where we	ere you arrested	Outcome or Disposit	<u>ion</u>
					
*** If you need addition	al space to wri	te more inforr	nation please use	the back of this page	***
Would you like to legally change	your name? If s	so, please prov	ide your desired n	ame below:	
Last Name(s)		First		_ Middle	
Parents Information Were your parents married before Are either of your parents U.S. cit	•	•			
If so, please provide the following Mother:	g information:				
Legal Name Date of	Naturalization:	Country	y of Birth	Date of Birth	
	······································				
Father: Legal Name				Date of Birth	
A# Date of	Naturalization:				Rev. 03/14/17