START HERE - Please type of	For USCIS Use Only					
Part 1. Information about you all three pages of this form.	Returned	Receipt				
Family Name	Given Name		Middle Name			
Address - C/O		<u> </u>		Resubmitted		
Street Number and Name			Apt. #			
City State or		te or Province		Reloc Sent		
Country		Zip/Postal Code				
Date of Birth (mm/dd/yyyy) Country of Bi	irth	Country of Citizenship		Reloc Rec'd		
U.S. Social Security # (If any)	A# (If any)	<i>ny)</i>				
Telephone Number	E-Mail Add	E-Mail Address (If any)				
Part 2. Processing Information	Applicant Interviewed					
Date you became a permanent resident (mn						
completing thi file this applica your name in th 2 and 3) of this I desire to declare my intention to become a of perjury under the laws of the United Sta submitted with it is all true and correct. I a that U.S. Citizenship and Immigration Serv	Yes Attach a list absences. nation on penalties in s section. You must a section. You must sign he appropriate places form. a citizen of the Unite tes of America, that uthorize release of an	t of departure/a n the instructio be in the Unit your name bel s (Signature of ed States. I cer- this application ny information	arrival dates of all ns before ed States when you ow and also sign Applicant on Pages tify, under penalty n and the evidence from my records	Action Block		
seeking. Signature	Date					
Part 4. Signature of person pr (Sign below.)	eparing form,	if other th	an above.			
I declare that I prepared this application at information of which I have any knowledge		ove person, and	d it is based on all			
Signature		Date				
Print Your Name		1			mpleted by	
Firm Name				Attorney or Rep	resentative, if any 28 is attached to	
Firm Address			represent the ap	-		
Telephone Number	dress (If any)					

Original to be retained by USCIS - Duplicate to be given to:

Family Name	Given Name	Middle Name		
Address - C/O				
Street Number and Name		Apt. #	Affix	
City	State or Pro	vince		
Country		Zip/Postal Code	Photograph	
Date of Birth (<i>mm/dd/yyyy</i>) Country of Birth		Country of Citizenship	Here	
J.S. Social Security # (If any)	A# (If any)			
Telephone Number E-Mail		lress (If any)		
am over the age of 18 years, hav	been lawfully admitted	to the United States as a	Not valid unless DHS Seal	

admission.

I hereby declare my intention in good faith to become a citizen of the United States and I certify that the photographs affixed to the original and duplicate hereof are a likeness of me and were signed by me.

I do swear (or affirm) that the statements I have made and the intentions I have expressed in this declaration of intention subscribed by me are true to the best of my knowledge and belief.

Signature of Applicant

Date

Signature of Authorizing Official

Date

Form N-300 (Rev. 07/08/08)Y Page 2

applied below.

nte

Original to be retained by USCIS - Duplicate to be given to:

Family Name	Given Name	Middle Name	
Address - C/O		I	
Street Number and Name		Apt. #	Affix
City	State or P	rovince	
Country		Zip/Postal Code	Photograph
Date of Birth (<i>mm/dd/yyyy</i>) Country of Birth		Country of Citizenship	Here
U.S. Social Security # (If any)	A# (If any	<i>)</i>	
Telephone Number	E-Mail Ad	ddress (If any)	
am over the age of 18 years, h	ave been lawfully admitte	d to the United States as a	Not valid unless DHS Seal

applied below.

permanent resident, and am now residing in the United States pursuant to such admission.

I hereby declare my intention in good faith to become a citizen of the United States and I certify that the photographs affixed to the original and duplicate hereof are a likeness of me and were signed by me.

I do swear (or affirm) that the statements I have made and the intentions I have expressed in this declaration of intention subscribed by me are true to the best of my knowledge and belief.

Signature of Applicant

Date

Signature of Authorizing Official

Date