

(Family name)	(First name)	(Middle name)	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.)	NATIONALITY	FILE NUMBER A-
ALL OTHER NAMES USED (Including names by previous marriages)			CITY AND COUNTRY OF BIRTH		SOCIAL SECURITY NO. (If any)	
FATHER		MOTHER (Maiden name)		FAMILY NAME		
HUSBAND (If none, so state) OR WIFE		FAMILY NAME (For wife, give maiden name)		FIRST NAME	BIRTHDATE	CITY & COUNTRY OF BIRTH
FORMER HUSBANDS OR WIVES (if none, so state)		FAMILY NAME (For wife, give maiden name)		FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE

APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST				FROM		TO	
STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	MONTH	YEAR	MONTH	YEAR
							PRESENT TIME

APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR				FROM		TO	
STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	MONTH	YEAR	MONTH	YEAR

APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE) LIST PRESENT EMPLOYMENT FIRST			FROM		TO	
FULL NAME AND ADDRESS OF EMPLOYER	OCCUPATION (SPECIFY)		MONTH	YEAR	MONTH	YEAR
						PRESENT TIME

Show below last occupation abroad if not shown above. (Include all information requested above.)

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THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR: <input type="checkbox"/> NATURALIZATION <input type="checkbox"/> STATUS AS PERMANENT RESIDENT <input type="checkbox"/> OTHER (SPECIFY):	SIGNATURE OF APPLICANT	DATE
Submit all four pages of this form.	If your native alphabet is other than roman letters, write your name in your native alphabet here:	

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.

COMPLETE THIS BOX (Family name)	(Given name)	(Middle name)	(Alien registration number)
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