

CLIA NATURALIZATION FORM

Any information you provide on this form is confidential. Answer all questions <u>completely</u>. Please attach your latest tax return form, proof of benefits, or declaration of financial hardship. Your case will not be considered without. DO NOT attach original documents.

Date		
Name		
Date of Birth	Occupation	
Address		
City / State	Zip code	
Phone	Email	
Place of Birth	USCIS #	
Marital Status	SSN	
Do you need an interpreter Current Education Level	N If yes, what language	
Level of English capacity (begin	r / intermediate / advanced)	
1. Falsely claimed to be a U.S. of 2. Been convicted of committing crime 3. Voted or registered to vote in 4. Admitted to or have been of (unless 30 grams of marijuants). Convicted of a Felony 6. Currently in removal process.	U.S. election victed of illegal drug charges or less)	
Date you received your Green Car	Green Card Expiration Date	

Questions	Y	es	No
Have 5 years or 90 days before you reach five years passed size your Green Card? If you answer yes you can skip	nce having (
If 5 years have NOT passed since becoming a resident, have married to a U.S. Citizen for at least 3 years	ve you been (
Have you lived with your spouse for 3 years?	(
If you are not married to a U.S. Citizen: Have you served in th	ne military? (\supset	
Are you married to someone in the military?	(\bigcirc	
Have you been physically present in the U.S. for at least half of years (3 years if married to U.S. Citizen) since you became a L. Permanent Resident? If no please explain			
Have you lived in the State of Nebraska for the last 3 months?	? (\bigcirc	
Since coming to the US, have you been arrested, cited, convict for breaking or violating any laws? if yes, explain	ted or fined (
Have you ever been in removal proceedings? if yes, explain		\supset	
Have you previously submitted an N-400 application? if yes, what was the result		\supset	
Do you have or believe you have a learning disability or mention impairment that prevents you from learning English or taking test?	\		
If you are a male, do you have a selective service number?	470	1	
Selective Service#	between the age to register for t you have a no	es of 18- he sele n-immi	nd live in the U.S26, you are required ctive service. Unless grant visa (student, s) or nonimmigrant
Date registered	status during t	hat tha	t age period you do register

5 Year Address History

Current Address	
City / State	Zip code
Move in Date	
Previous Address	
City / State	Zip code
Move in Date	Move out Date
Previous Address	
City / State	Zipcode
Move in Date (Move out Date
Previous Address	
City / State	Zip code
Move in Date	Move out Date
Previous Address	
City / State	Zip code
Move in Date	Move out Date
Previous Address	
City / State	Zip code
Move in Date	Move out Date

Any additional addresses can be written on the back of this sheet (you must include all your addresses for the last 5 years)

5 Year Employment History

Current Employer Name		
Address		
City / State	Zip code	
Start Date	End Date	
Job Title		
Previous Employer Name		
Address		
City / State	Zip code	
Start Date	End Date	
Job Title		
Previous Employer Name		
Address		
City / State	Zip code	
Start Date	End Date	
Job Title		
Previous Employer Name		
Address		
City / State	Zip code	
Start Date	End Date	
Job Title		

Any additional employers can be written on the back of this sheet (you must include all your employers in the last 5 years)

5 Year School History Current School

School		
Address		
City / State	Zip co	ode
Start Date	End Da	te
Degree		
Previous School		
Address		
City / State	Zip co	ode
Start Date	End Da	te
Degree		
Previous School		
Address		
City / State	Zip co	ode
Start Date	End Da	te
Degree		
Previous School		
Address		
City / State	Zip co	ode
Start Date	End Da	ite
Degree		

5 Year Travel History

Countries Visited	
Date you left the U.S	Date you returned
Countries Visited	
Date you left the U.S	Date you returned
Countries Visited	
Date you left the U.S	Date you returned
Countries Visited	
Date you left the U.S	Date you returned
Countries Visited	
Date you left the U.S	Date you returned
Countries Visited	
Date you left the U.S	Date you returned
Countries Visited	
Date you left the U.S	Date you returned

Any additional travel dates can be written on the back of this sheet (you must include all your travel in the last 5 years)

FAMILY INFORMATION

SPOUSE Name Date of Birth Marriage Date Place of Marriage Place of Birth USCIS (A#) Status PREVIOUS SPOUSE (IF APPLICABLE) Name Marriage Date Date of Birth Place of Marriage Place of Birth Status USCIS (A#) Divorce Divorce Date Location **CHILDREN** Name Date of Birth Status Place of Birth USCIS (A#) Name Date of Birth Status Place of Birth USCIS (A#) Name Date of Birth Status Place of Birth USCIS (A#)

CHILDREN CONTINUED Name Date of Birth Status Place of Birth USCIS (A#) Name Date of Birth Status Place of Birth USCIS (A#) Name Date of Birth Status Place of Birth USCIS (A#) Any additional children can be added on the back of this sheet (you must include all your children, adopted children, step children, deceased children) CRIMINAL HISTORY (INCLUDES ARREST, CITATIONS, TICKETS, JAIL, ETC) Crime / Citation Location Date Cited Final Result Crime / Citation Location Date Cited Final Result Crime / Citation Location Date Cited Final Result

CRIMINAL HISTORY CONTINUED

Crime / Citation	
Date	Location Cited
Final Result	
Crime / Citation	
Date	Location Cited
Final Result	
Crime / Citation	
Date	Location Cited
Final Result	
ANY ADDITIO	ONAL INFORMATION

You must attach your latest tax return, proof of benefits, or declaration of financial hardship to receive services. Your intake will be rejected if you do not. Please attach relevant immigrant documents to better understand your case.