

Application for Citizenship and Issuance of Certificate Under Section 322

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form N-600KOMB No. 1615-0087
Expires 02/28/2027

	Date Stamp		Receipt		Action Block								
For USCI Use Only													
Re	To be completed by an Attorney or Accredited presentative (if any).	Select this box if Form G-28 is attached.	Attorney State Bar Numbe (if applicable)		or Accredited Representative Inline Account Number (if any)								
	START HERE - Type or print in black ink. NOTE: The applicant on this form is the child's parent, grandparent, or legal guardian. Child's A Number:												
Part	1. Information Abo	out the Child's Elig	ibility		ild's A-Number:								
	The application is being fine select only one box):		A-										
[The BIOLOGICAL of	child of a qualifying U.S	. citizen (USC) parent filing th	nis application.									
[The ADOPTED child	d of a qualifying USC pa	arent filing this application.										
[The grandchild of a q five years of the death		rent or the child ward of a USC	C legal guardia	n filing this application within								
Part	2. Information Abo	out the Child (for w	hom this application is b	eing filed)									
1. (Current Legal Name (do 1	not provide a nickname)											
	Family Name (Last Name		Given Name (First Name))	Middle Name								
2. I	Name Exactly As It Appe	ars on the Permanent Re	esident Card (if applicable)										
]	Family Name (Last Name	e)	Given Name (First Name))	Middle Name								
3. (Other Names Used (if app	olicable)											
Provide all other names ever used, including nicknames, maiden name, and aliases.													
]	Family Name (Last Name	2)	Given Name (First Name))	Middle Name								
-													
4. 1	J.S. Social Security Num	ber (if applicable) 5.	USCIS Online Account No	ımbar (if anıı)									
- 	> Social Security Ivalia	5.	USCIS Onine Account No										
6.	Date of Birth (mm/dd/yyy	yy) 7. Country	of Birth										

	Country of Citizenship or Nationality	9.	Gender Male		Female	10.	Heig	ht Feet		Inc	hes	
	Mailing Address (USPS ZIP Code Lookup) n Care Of Name (if any)											
S	Street Number and Name							Apt.	Ste.	Flr.	Numb	
	City or Town					Sı	ate		ZII	P Code	-	
F	Province Postal Co	de			Country							
	Physical Address (Do not provide a PO Box in this Street Number and Name	space u	nless it is the	e ONI	Y addres	s.)		Apt.	Ste.	Flr.	Numb	
	City or Town					Sı	ate		ZII	P Code	;] - [
F	Province Postal Co	de			Country							
	Marital Status Single, Never Married Married Di Other (Explain): Information About the Child's Admission Into the U	vorced	☐ Widow		Separ			Iarriaș	ge An	nulled		
	NOTE: Do NOT complete this section. The USC				•							
	A. Arrived in the following manner: Port-of-Entry		1		C			e of F	intry (mm/de	d/yyyy)	
	Fort-of-Entry							COLL	aiti y (11111/ (1	<i>a,</i> yyy <i>y)</i>	
	Exact Name Used at Time of Entry											
	Family Name (Last Name)	Given N	ame (First N	Jame)			iddle	Name				
	B. Current Immigration Status											

Pai	·t 2.	Information About the Ch	ild (for	whom th	nis appl	ication is	being t	filed)	A-				
		ued)	114 (101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ns upp	10411011 15	oeing i						
16.	Wa	s the child adopted?									Yes] No	
	A.	Date of Adoption (mm/dd/yyyy)		te Legal (m/dd/yyy	•	Began		Date Phys (mm/dd/y	ysical Custody Began (yyyy)				
17.	We	re the child's parents married to each	ch other w	hen the c	hild was	born (or ad	」 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □				Yes [] No	
Pai	rt 3.	Information About the Ch	ild's U.S	S. Citize	en Biol	ogical or	Adopt	ive Pare	ent				
		Provide information about the U. e child's U.S. citizen parent in the										tion	
1.	Cur	rrent Legal Name of U.S. Citizen Pa	arent										
	Fan	nily Name (Last Name)		Giv	en Name	e (First Nan	ne)		Middle N	Name			
2.	Dat	te of Birth (mm/dd/yyyy) 3.	Count	ry of Birt	h								
4.	U.S ▶	S. Social Security Number (if applic	cable)										
5.	Phy	vsical Address											
	Stre	eet Number and Name (Do not prov	vide a PO	Box in thi	is space i	ınless it is y	our ON I	L Y addres	ss.) Apt.	Ste. F	r. Num	ber	
	City	y or Town						Stat	e	ZIP Co	ode -		
	Pro	vince	Postal	Code			Country	,					
6.	Day	ytime Telephone Number			7.	Work Tele	ephone N	Number (i	f any)				
8.	Eve	ening Telephone Number			9.	Mobile Te	elephone	Number	(if any)				
10.	Em	ail Address (if any)]								

		Information About the Child's (continued)	U.S. Citize	en Biological	or Ad	optive	A- [
11.	The	e parent is a U.S. citizen by:								
		Birth in the United States	Acquisitio	on After Birth	Through 1	Naturaliza	tion of A	Alien Pa	rent(s)	
		Birth Abroad to U.S. Citizen Parent(s)								
		Certificate of Citizenship Number (if any) Alien Reg	sistration Numb	er (A-Nu	ımber) (if	any)			
			▶ A-							
		Naturalization								
		Place of Naturalization								
		Name of Court or USCIS Office Location	n							
		City or Town	Stat	e						
		Certificate of Naturalization Number	A-Numbe	r			Date of	Natural	ization (n	nm/dd/yyyy)
			► A-							
12.		s the U.S. citizen father or mother ever loss of U.S. citizenship?	st U.S. citizer	nship or taken a	ny actior	n that wou	ld cause	;	Ye	es 🗌 No
	If y	ou answered "Yes" to Item Number 12.,	provide a full	explanation in	the space	e provided	l in Part	11. Ad	ditional I	Information.
13.	Ma	rital History								
	A.	How many times has the U.S. citizen fat marriages and marriages to the same per		r been married	(includin	ig annulle	d			
	B.	What is the U.S. citizen father or mother	's current ma	rital status?						
		Single, Never Married Married	Divor	ced Wide	owed [Separa	ted	Marria	ige Annu	lled
		Other (Explain):								
	C.	Information About the U.S. Citizen Fath	er's or Mothe	er's Current S p	ouse					
		Family Name (Last Name)		Given Name (First Nan	ne)		Middle	Name	
		Date of Birth (mm/dd/yyyy) Count	ry of Birth				1			
		Country of Citizenship or Nationality								
		Spouse's Physical Address								
		Street Number and Name (Do not provid ONLY address.)	de a PO Box	in this space ur	nless it is	your spou	ıse's	Apt.	Ste. Flr.	. Number
		City or Town					State		ZIP Cod	le
										-
		Province	Postal Code	e		Country				

		Information About the Cl (continued)	hild's U.S. C	itizen Biolo	gical	or Adoptive	A-			
		Date of Marriage (mm/dd/yyyy)	1							
		Place of Marriage								
		City or Town		State		Country				
		Spouse's Immigration Status	. D. 11		Œ	1				
		U.S. Citizen Lawful Pe	ermanent Reside	ent Oth	ier (Ex	aplain):				
	D.	Is the U.S. citizen father's or mot	ther's current sp	ouse also the o	child's	biological (or ado	ptive) parent?		Yes	No No
14.	Mei	mber of U.S. Armed Forces								
	A.	Is the sponsoring U.S. citizen par	rent a member o	of the U.S. Arr	ned Fo	orces?			Yes	☐ No
	В.	If you answered "Yes" to Item A and reside with the sponsoring U							Yes	☐ No
		NOTE: If the U.S. citizen biolo					ND has the req	uired p	hysica	ıl
		presence in the United States, s	жір Рагі 4. апо	a go airecuy i	o Pari	15.				
Par	rt 4.	Information About the Cl	hild's Qualif	ying U.S. C	itizei	n Grandparent	t			
citize	enshij	Complete this part only if the U.S. p for the child, and the U.S. citize re after 14 years of age.	-			• •				rs of
1.	Cur	rent Legal Name of U.S. Citizen O	Grandparent							
	Fan	nily Name (Last Name)		Given Name	(First	Name)	Middle Nar	ne		
2.	Date	e of Birth (mm/dd/yyyy) 3.	Country of	f Birth						
4.			inable)							
4.	0. S	. Social Security Number (II appli	icable)							
5.	Dby	sical Address								
٥.	•	et Number and Name (Do not pro	ovide a PO Box	in this space II	nless i	t is your ONLY ac	ldress) Ant S	Ste Fli	· Nii	mher
		et i vamoer and i vame (20 not pro	// rac a 1 0 Bon	m uns space a	111000 1	tis your ortal ac			1	
	City	or Town					State	ZIP Co	- ∟ de	
									-	
	Pro	vince	Postal Cod	le		Country				
6.	Day	time Telephone Number		7.	Work	Telephone Numb	er (if any)			
		<u>-</u>								
0.	Day	time Telephone Number		7.	Work	1 elepnone Numb	er (11 any)		_	

		Information About th	e Child's Qualifying	U.S. Cit	izen Grandparent	A-
8.		ening Telephone Number		9. M	Iobile Telephone Numb	ber (if any)
10.	Em	ail Address (if any)]		
11.	The	e grandparent is a U.S. citizen	by:]		
		Birth in the United States	Acquisitio	n After Bi	th Through Naturalizat	tion of Alien Parent(s)
		Birth Abroad to U.S. Citizer	n Parent(s)			
		Certificate of Citizenship Nu	A-Number (if any) A-Number • A-	r (if any)		
		Naturalization				
		Place of Naturalization				
		Name of Court or USCIS O	ffice Location			
		City or Town	State	e		
		Certificate of Naturalization	Number A-Number	r	_ I	Date of Naturalization (mm/dd/yyyy
			► A-			(, , , , , , , , , , , , , , , , , , ,
12.	Has	s the grandparent ever lost U.	S. citizenship or taken any	y action tha	t would cause loss of U	J.S. citizenship? Yes No
		ou answered "Yes" to Item formation.	Number 12., provide a f	full explana	ation in the space prov	ided in Part 11. Additional
Pai	rt 5.	Physical Presence in t	he United States Fro	om Birth	Until Filing of For	rm N-600K
not	been		ted States for five years, tv			ates. If the U.S. citizen parent has ears of age, then the child must use
1.	Ind	icate whether this information		n parent or	to the qualifying grand	parent.
	Ш	U.S. Citizen Parent U	J.S. Citizen Grandparent			
2.	Phy	ysical Presence in the United	States			
	A.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	E.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)
	В.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	F.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)
	υ.	Trom (mm/dd/yyyy)	Chen (himi dd/yyyy)		Tiom (mm/ ed/yyyy)	Charles (min/dd/yyyy)
	C.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	G.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)
	D.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)	Н.	From (mm/dd/yyyy)	Until (mm/dd/yyyy)

NOTE: If the U.S. citizen biological/adoptive parent is filing this application, skip Part 6. and go directly to Part 7.

	t 6. Information About the Legal Gua		.•	1 1 10 -	,	A-				
omp	plete this part only if the legal guardian is filing	this appli	cation on	behalf of	a deceased U	.S. citizen	pare	nt.		
	Current Legal Name of the Legal Guardian									
	Family Name (Last Name)	Gi	ven Nam	e (First Na	me)	Mi	ddle	Name		
	Date of Birth (mm/dd/yyyy) 3. Coun	try of Bir	th							
	U.S. Social Security Number (if applicable)									
	Physical Address									
	Street Number and Name (Do not provide a PO	Box in th	is space	ınless it is	your ONLY	address.)	Apı	t. Ste.	Flr.	Number
	City or Town					State			Code	1
]
	Province Postal	Code			Country					
	Daytime Telephone Number		7.	Work Te	lephone Nun	nber (if an	y)			
	Evening Telephone Number		9.	Mobile 7	Telephone Nu	ımber (if a	ny)			
).	Email Address (if any)		_							
•	The legal guardian is a U.S. citizen by:									
	Birth in the United States	Acquisiti	ion After	Birth Thro	ough Naturali	zation of	Alier	n Parent	t(s)	
	☐ Birth Abroad to U.S. Citizen Parent(s)									
	Certificate of Citizenship Number (if any)	A-Numb	er (if any)						
		► A-								
	Naturalization									
	Place of Naturalization									
	Name of Court or USCIS Office Location									
	City or Town	Sta	ite							
	Certificate of Naturalization Number	A-Numb	er	_		Date of	Natı	ıralizati	ion (mr	n/dd/yyyy

Par	6. Information About the Legal Guardian (continued)												
12.	Date of Legal Guardianship (mm/dd/yyyy) 13. Name of Authority that Granted Legal Guardianship												
14.	Address of Authority that Granted Legal Guardianship												
	Street Number and Name (Do not provide a PO Box in this space unless it is your ONLY address.) Apt. Ste. Flr. Number												
	City or Town State ZIP Code												
	Province Postal Code Country												
Pai	7. Preferred Location and Date for Interview												
1.	USCIS Office Location												
	City or Town State												
2.	Preferred Date (mm/dd/yyyy)												
	USCIS will attempt to accommodate the requested preferences. NOTE: The interview date should be at least 90 days after filing Form N-600K and before the child's 18th birthday.												
Pai	8. Applicant's Statement, Certification, and Signature												
NO	E: Read the Penalties section of the Form N-600K Instructions before completing this section.												
App	licant's Statement												
NO	E: Select the box for either Item A. or B. in Item Number 1. If applicable, select the box for Item Number 2.												
1.	Applicant's Statement Regarding the Interpreter												
	A. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.												
	B. The interpreter named in Part 9. read to me every question and instruction on this application and my answer to every question in, a language in which I am fluent, and I understood everything.												
2.	Applicant's Statement Regarding the Preparer												
	At my request, the preparer named in Part 10. , prepared this application for me based only upon information I provided or authorized.												

Pai	rt 8. Applicant's Statement, Certification, and Signature (continued)
App	plicant's Certification
requ	es of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may ire that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any all of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.
	ther authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other ies and persons where necessary for the administration and enforcement of U.S. immigration law.
auth	tify, under penalty of perjury, that all of the information in my application, and any document submitted with it were provided or orized by me, that I reviewed and understand all of the information contained in, and submitted with, my application, and that all is information is complete, true, and correct.
App	olicant's Signature
3.	Applicant's Signature Date of Signature (mm/dd/yyyy)
>	
Instr	TE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the uctions, USCIS may deny your application.
Pai	t 9. Interpreter's Contact Information, Certification, and Signature
Prov	ide the following information about the interpreter.
Int	erpreter's Full Name
1.	Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)
2.	Interpreter's Business or Organization Name (if any)
Int	erpreter's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number
•	
	City or Town State ZIP Code
	Province Postal Code Country
Int	erpreter's Contact Information
4.	Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Telephone Number (if any)
6.	Interpreter's Email Address (if any)

	rt 9. Interpreter's Contact Information, Certification, and Signature antinued)
Inte	erpreter's Certification
	rtify, under penalty of perjury, that: fluent in English and, which is the same language specified in Part 8. ,
appl	B. in Item Number 1. , and I have read to this applicant in the identified language every question and instruction on this ication and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, answer on the application, including the Applicant's Certification , and has verified the accuracy of every answer.
Inte	erpreter's Signature
7.	Interpreter's Signature Date of Signature (mm/dd/yyyy)
	rt 10. Contact Information, Declaration, and Signature of the Person Preparing this Application, if her Than the Applicant
Prov	vide the following information about the preparer.
Pre	eparer's Full Name
1.	Preparer's Family Name (Last Name) Preparer's Given Name (First Name)
2.	Preparer's Business or Organization Name (if any)
Pre	eparer's Mailing Address
3.	Street Number and Name Apt. Ste. Flr. Number
	City or Town State ZIP Code
	Province Postal Code Country
Pre	eparer's Contact Information
4.	Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)

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		. Contact Information, Declaration, and Signature of the Person ing this Application, if Other Than the Applicant (continued)	A-								
Prep	pare	r's Statement									
7.	A.	I am not an attorney or accredited representative but have prepared this application on the applicant's consent.	behalf of the applicant and with								
	B. I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.										
		NOTE: If you are an attorney or accredited representative, you may need to submit a com Entry of Appearance as Attorney or Accredited Representative, or Form G-28I, Notice of In Matters Outside the Geographical Confines of the United States, with this application.									
Prep	pare	r's Certification									
reviev his or	wed r her	nature, I certify, under penalty of perjury, that I prepared this application at the request of the this completed application and informed me that he or she understands all of the information application, including the Applicant's Certification , and that all of this information is completed application based only on information that the applicant provided to me or authorized necessarily application based only on information that the applicant provided to me or authorized necessarily application based only on information that the applicant provided to me or authorized necessarily application based only on information that the applicant provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided to me or authorized necessarily application and the provided necessarily application an	contained in, and submitted with, blete, true, and correct. I								
Prep	pare	er's Signature									
8.	Pre	parer's Signature	Date of Signature (mm/dd/yyyy)								

Pai	t 11	. Additional	Info	rmation					A-					
than print	what the c	is provided, ma child's name and	ake cop l A-Nu	de any additional pies of this page t mber (if any) at t sign and date eac	to com	plete and file wood of each sheet; i	ith this applica	tion or attach a	sepa	rate sl	neet of	pape	er. Ty	pe or
1.	Fan	nily Name (Last	Name)	Giv	en Name (First	Name)	Mide	dle N	ame				
2.	A-N	Number (if any)	► A											
3.	A.	Page Number	В.	Part Number	C.	Item Number								
	D.													
4.	A.	Page Number	В.	Part Number	C.	Item Number								
	D.		•											
5.	A. D.	Page Number	В.	Part Number	C.	Item Number								
6.	A. D.	Page Number	В.	Part Number	C.	Item Number								
7.		Page Number	В.	Part Number	C.	Item Number								
	D.													

Part 12. Affidavit (At the time of Interview)	A-
I, the parent/grandparent/legal guardian, penalty of perjury under the laws of the United States, that I know and understand the contents of this the attached supplementary pages number to inclusive, that the same are true and corr and that corrections number to were made by me or at my request.	
Parent's, Grandparent's, or Legal Guardian's Signature	Date of Signature (mm/dd/yyyy)
Subscribed and sworn or affirmed before me upon examination of the applicant (U.S. citizen parent, g at Date (mm/dd/yyyy) (Location) Interviewing USCIS Officer's Name Interviewing USCIS Officer's T	
Interviewing USCIS Officer's Signature	Date of Signature (mm/dd/yyyy)
Part 13. USCIS Officer Report and Recommendation	
underage beneficiary, I find that all the facts and conclusions set forth under oath in this application are: 1.	
I recommend that this Form N-600K be: Approved Denied	
Issue Certificate of Citizenship in the Name of Family Name (Last Name) Given Name (First Name) Middle N	Name
USCIS Officer's Printed Name USCIS Officer's Title	
USCIS Officer's Signature Date of	of Signature (mm/dd/yyyy)
☐ I do ☐ do not concur with the USCIS officer's recommendation of the Form N-600K. USCIS Field Office Director's Signature Date of	of Signature (mm/dd/yyyy)