Application for Replacement Naturalization/Citizenship Document

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form N-565
OMB No. 1615-0091
Expires 06/30/2019

For USCIS Use Only		Fee Stamp	Action Block
	Returned		
	Resubmitted		
	Relocated Sent		
	Relocated Received		
	☐ **Applicant Interviewed** ☐ **Declaration of Intention Verified by:** _____ ☐ **Citizenship Verified by:** _____	**Remarks:**	

To be completed by an attorney or BIA-accredited representative (if any)	☐ **Select this box if Form G-28 is attached to represent the applicant.**	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)

►**START HERE - Type or print in black ink.**

Part 1. Information About You

1. Full Legal Name

Family Name (Last Name) | Given Name (First Name) | Middle Name

2. Date of Birth (mm/dd/yyyy)

3. Country of Birth

4. Certificate Number

5. Alien Registration Number (A-Number)

► **A-**

6. Mailing Address

In Care Of Name

Street Number and Name | Apt. Ste. Flr.

City or Town | State | ZIP Code

Province | Postal Code | Country

Part 2. Type of Application

1. I hereby apply for (select **only one** box)**:**

A. ☐ New Certificate of Citizenship

B. ☐ New Certificate of Naturalization

C. ☐ New Certificate of Repatriation

D. ☐ New Declaration of Intention

E. ☐ Special Certificate of Naturalization to obtain recognition of my U.S. citizenship by a foreign country. (Skip **Item Number 2.** and complete **Part 3.**, **Part 8.**, and **Part 9.**)

2. Basis for application (Select **all applicable** boxes):

A. ☐ My certificate was lost, stolen, or destroyed. Explain when, where, and how. (Complete **Part 3.** and **Part 9.**, and attach a copy of the certificate (if any), police report, or sworn statement.)

B. ☐ My certificate is mutilated. (Complete **Part 3.**, **Part 9.**, and attach the certificate.)

C. ☐ My certification or declaration is incorrect due to typographical/clerical error. (Complete **Part 3.**, **Part 4.**, and **Part 9.**, and attach the documents.)

D. ☐ My name has legally changed. (Complete **Part 3.**, **Part 5.**, and **Part 9.**, and attach the certificate and documents.)

E. ☐ My date of birth has legally changed due to a court order or other state-issued documents. **NOTE:** Only applicants applying for a replacement Certificate of Citizenship may select this option. (Complete **Part 3.**, **Part 6.**, and **Part 9.**, and attach the certificate and documents.)

F. ☐ My gender has legally changed. (Complete **Part 3.**, **Part 7.**, and **Part 9.**, and attach the certificate and documents.)

G. ☐ Other: Explain (Complete **Part 3.**, **Part 4.**, and **Part 9.**, and attach the documents.)

Part 3. Processing Information

1. Gender ☐ Male ☐ Female

2. Height Feet ____ Inches ____

3. Marital Status ☐ Single ☐ Married ☐ Divorced ☐ Widowed

My last certificate or Declaration of Intention was issued to me by:

4. USCIS Office or Name of Court

5. Date (mm/dd/yyyy)

6. Name in Which the Document Was Issued

7. Other Names I Have Used (if none, type or print "None")

Family Name (Last Name)	Given Name (First Name)	Middle Name

8. Since becoming a citizen, have you lost or renounced your citizenship in any manner? ☐ Yes (attach an explanation) ☐ No

Part 4. Complete If Applying To Correct Your Document

If you are applying for a new certificate or Declaration of Intention because your current one is incorrect, explain why it is incorrect and attach copies of any documents supporting your request.

Part 5. Complete If Applying for a New Document Because of a Name Change

Name changed because of (select **only one** box)**:**

A. ☐ Marriage or divorce on (Attach a copy of marriage or divorce certificate) (mm/dd/yyyy)

B. ☐ Court Order (Attach a certified copy of the document) (mm/dd/yyyy)

Part 6. Complete If Applying for a New Certificate of Citizenship Because of a Date of Birth Change

Date of birth changed by:

A. ☐ Court Order (Attach a certified copy of the document) (mm/dd/yyyy)

B. ☐ State-issued document (For example, birth certificate, certificate recognizing the foreign birth, certificate of birth abroad, or other similar records issued by the child's state of residence.) (mm/dd/yyyy)

Part 7. Complete If Applying for a New Document Because of a Change in Gender

Evidence of official recognition of gender change recognized by (select **all applicable** boxes)**:**

A. ☐ Court Order (Attach a certified copy of the document)

B. ☐ Amended birth certificate (Attach a certified copy of the document)

C. ☐ Other official documentation recognizing the new gender by U.S. state, local jurisdiction, or foreign state, such as a passport or driver's license.

D. ☐ Medical certification by a licensed physician (doctor of medicine (M.D.) or doctor of osteopathy (D.O.)

Part 8. Complete If Applying for a Special Certificate of Recognition as a Citizen of the United States by the Government of a Foreign Country

1. Name of Foreign Country

Information about official of the country who has requested this certificate (if known)

2. Family Name (Last Name) | Given Name (First Name) | Middle Name

Official Title | Name of Government Agency

Part 8. Complete If Applying for a Special Certificate of Recognition as a Citizen of the United States by the Government of a Foreign Country (continued)

3. Address of Foreign Official

Street Number and Name | Apt. Ste. Flr.

City or Town | State | ZIP Code

Province | Postal Code | Country

USCIS or Consular Official's Certification

4. USCIS or Consular Official's Signature | Date of Signature (mm/dd/yyyy)

Part 9. Applicant's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form N-565 Instructions before completing this part.

Applicant's Statement

NOTE: 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 10.** 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 11.**, _____, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number

4. Applicant's Mobile Telephone Number (if any)

5. Applicant's Email Address (if any)

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I further authorize release of information contained in this application, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

Part 9. Applicant's Statement, Contact Information, Certification, and Signature (continued)

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and provided or authorized all of the information in my application;

2) I understood all of the information contained in, and submitted with, my application; and

3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

Applicant's Signature

6. Applicant's Signature

Date of Signature (mm/dd/yyyy)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 10. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter'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)

Interpreter's Mailing Address

3. Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

Part 10. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and [ ], which is the same language specified in **Part 9.**, **Item B.** in **Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature

Date of Signature (mm/dd/yyyy)

Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer'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)

Preparer's Mailing Address

3. Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5. Preparer's Mobile Telephone Number (if any)

6. Preparer's Email Address (if any)

Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)

Preparer's Statement

7. **A.** ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

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 be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Signature of Preparer

Date of Signature (mm/dd/yyyy)