(Family Name) (First Name)	Male Birth Date (mm/dd/yyyy) Citizenship/Nationality File Number  Female A										
All Other Names Used (Including names by		City and Country of Birth  U.S. Social Security # (If any)									
Family Name	First Na	ame	Date,	City and Country	of Birth (If kno	own)	City ar	d Country	of Residence	;	
Father		,									
Mother (Maiden Nama)											
	(Maiden Name)										
Husband or Wife (If none, so state.) Family Name (For wife, give maiden name) First Name				Birth Date (mm/dd/yyyy)	ntry of Birth	th Date of Marriage Place of Marriage					
P. Hardanda - Wisses (If none as state) Fig.	· NT	Disth Dot		 	1	In 1 D	· -£T.	4:	C3.5		
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This form is submitted in connection with an application for:    Signature of Applicant   Signature of Applicant									Date		
Naturalization Other (Specify):											
Status as Permanent Resident											
Submit all copies of this form.  If your native alphabet is in other than Roman letters, write your name in your native alphabet below:											
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.											
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(Maiden Name)		City and Country of Birth (If known)				City and Country of Residence					
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Former Husbands or Wives (If none, so state) First Name Family Name (For wife, give maiden name)				Date and Place of Marriage Date and			d Place of Termination of Marriage				
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This form is submitted in connection with an application for:  Naturalization Other (Specify): Status as Permanent Resident  Signature of Applicant  Date											
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Complete This Box (Family Name)	(Given Name		(Middle Name)			(Alien Registration Number)					

Family Name Father Mother (Maiden Name)  First Name Date, City and Country of Birth (If known) City and Country City and Coun	Place of Marriage								
Father Mother (Maiden Name)  Husband or Wire (If none, Family Name so state.)  First Name    First Name   Birth Date (mm/dd/yyyy)   Date and Place of Marriage   Date and Place of Termination of Marriage   Date and Place of Marriage   Date and Place of Termination of Marriage   Date and Place of Marriage   Date and Place of Termination of Marriage   Date and Place of Marriage   Date and Plac	Place of Marriage  of Marriage  To  Month Year								
So state.) (For wife, give maiden name)  Former Husbands or Wives (If none, so state) First Name  Family Name (For wife, give maiden name)  Applicant's residence last five years. List present address first.  City  Province or State  Province or State  Applicant's last address outside the United States of more than one year.  Applicant's employment last five years. (If none, so state.) List present employment first.  From  Marriage  Date and Place of Marriage  Date and Place	of Marriage  To  Month Year								
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Show below last occupation abroad if not shown above. (Include all information requested above.)									
This form is submitted in connection with an application for:  Naturalization Other (Specify): Status as Permanent Resident  Signature of Applicant  Date									
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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 Regis	(Alien Registration Number)								

(Family Name) (First Name) (Middle Name) Male Birth Date (mm/dd/yyyy) Citizenship/Nationality File Number													
					Female								
All Other Names Used (Including names by previous marriages)					City and Country of Birth  U.S. Social Security # (If any)								
Family Name	First ?	Name	1	Date, (	City and Country	of Birth	(If kno	wn)	City a	City and Country of Residence			
Father Mother													
Mother (Maiden Name)													
		Trong Mar			Birth Date City and Country of Birt				1. Data o	C3 famings	la - afMa	• _	
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