

TO BE COMPLETED ONLY BY USCIS AFTER APPLICANT HAS COMPLETED THE BOTTOM PORTION

To The Attention of: _____ CSC NSC TSC VSC
Point of Contact Specify Service Center

Applicant was scheduled for fingerprinting at local ASC:
Yes (give ASC location and date of appointment): _____
No Waived/Other: _____

I, the undersigned, hereby authorize the expediting of the Application for Naturalization, Form N-400, related to the applicant identified below.

Signature of Authorizing USCIS official: _____

Title of Authorizing Official and USCIS office: _____
Title USCIS office

Date: _____

RETURN APPL/FILE TO _____ (POC at District)

TO BE COMPLETED BY APPLICANT

Applicant's A# _____

Applicant's Name: _____
Last First Middle

Applicant's Address: _____

Applicant's phone number: _____

Multiple dates applicant will be in the U.S. Dates must be at least four months out from date of filing, if applicable: _____

Date applicant departs from the U.S. if applicable: _____

USCIS office where applicant wishes to be interviewed: _____

Applicant: please refer to attached checklist for required documentation