

Request for a Hearing on a Decision in Naturalization Proceedings Under Section 336

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

USCIS Form N-336 OMB No. 1615-0050 Expires 05/31/2019

		J	For USCIS	S Use Only		
		Barcode			Date S	Stamp
R	e-Affirm N-400 Der	Remarks	-400 Denial			
To be	e completed by an ney or accredited esentative (if any).	Select this box if Form G-28 is attached.	Attorney (if applical	State Bar Number ble)		or Accredited Representative aline Account Number (if any)
NOTE			e. Type or p	orint "None" if the ar		. Failure to answer all of the Your 9 Digit A-Number:
Part 1	1. Information A	About You, the Natura	alization A	Applicant	► A-	
1. Cu	rrent Legal Name (do	not provide a nickname)				
Fai	mily Name (Last Nan	ne)	Given Na	ame (First Name)		Middle Name
2. Otl	ner Names Used (if a	ny)				
		have ever used, including ovided in Part 9. Addition			ames. If you	need extra space to complete this
Fai	mily Name (Last Nan	ne)	Given Na	ame (First Name)		Middle Name
3. Da	te of Birth (mm/dd/y	yyy) 4. USCIS On	nline Accour	t Number (if any)		
5. Ph	ysical Address (do n o	ot provide a PO Box in this	space unles	s it is your only addr	ess)	
Str	eet Number and Nam	ne			Apt. St	te. Flr. Number
Cit	y or Town	C	County		State	ZIP Code + 4
						-
	ovince or Region reign address only)	Postal Co	ode address only	Country (foreign add	dress only)	
(10	ioigii uddioss omy)	(Toroigh a	addiess only	, (Torongii aux	aross omy	

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	art 1. Information About You, the Naturalization Applicant continued)	► A-
└─ 6.	Mailing Address	
•	In Care Of Name (if any)	
	Street Number and Name	Apt. Ste. Flr. Number
	City or Town County	State ZIP Code + 4
	Province or Region Postal Code Cour	
	(foreign address only) (foreign address only) (fore	ign address only)
7.		
	A. Daytime Telephone Number B. World	k Telephone Number (if any)
	C. Evening Telephone Number D. Mob	ile Telephone Number (if any)
	E. Email Address (if any)	
n	AND THE MARKET NAME OF THE STATE OF THE STAT	
	art 2. Information About Form N-400 Denial On Which You equesting a Hearing	(the Naturanzation Applicant) Are
	1 0 0	3. USCIS Office That Issued Form N-400
1.	Form N-400 Receipt Number 2. Date of Form N-400 Denial Notice (mm/dd/yyyy)	Denial Notice
Pa	art 3. Biographic Information	
1.	Ethnicity (Select only one box)	
	Hispanic or Latino Not Hispanic or Latino	
2.	Race (Select all applicable boxes)	
	☐ White ☐ Asian ☐ Black or African ☐ American Indian or	Native Hawaiian or
	American Alaska Native	Other Pacific Islander
3.	Height Feet Inches	
4.	Weight Pounds	
5.	Eye Color (Select only one box)	
	☐ Black ☐ Blue ☐ Brown ☐ Gray ☐ Green ☐ Haze	el Maroon Pink Unknown/Other
6.	Hair Color (Select only one box)	
	Bald (No Black Blond Brown Gray hair)	Red Sandy White Unknown/Other

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Part 4. Reason You Are Requesting a Hearing ► A-
Provide the reasons you are requesting a hearing on your denied Form N-400. If you need extra space to complete this section, use the space provided in Part 9. Additional Information .
NOTE: Refer to the What Evidence Must You Submit section of Form N-336 Instructions for documents to submit with your Form N-336.

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	rt 5. A	ccommodations for Individuals With Disabilities and/or ents		• A-[
NO	TE: Rea	d the information in the Form N-336 Instructions before completing this p	art.					
1.	Are you	requesting an accommodation because of your disabilities and/or impairm	nents?				Yes [No
	If you ar	nswered "Yes" to Item Number 1., select any applicable box.						
	A.	I am deaf or hard of hearing and request the following accommodation. (interpreter, indicate for which language (for example, American Sign Language)		e reques	sting a	sign-lang	uage	
	В. 🗌	I am blind or have low vision and request the following accommodation:						
	С.	I have another type of disability and/or impairment. (Describe the nature accommodation you are requesting.)	of your d	lisabilit	y and/o	or impair	ment an	d the
Pa	rt 6. N	aturalization Applicant's Statement, Contact Information	n, Certi	ificati	on, a	nd Sign	ature	<u>,</u>
NO	TE: Rea	d the Penalties section of the Form N-336 Instructions before completing	this part.					
Na	turaliz	ation Applicant's Statement						
NO	TE: Sele	ect the box for either Item A. or B. in Item Number 1. If applicable, select	ct the box	for Ite	m Nu	mber 2.		
1.		zation Applicant's Statement Regarding the Interpreter						
	A	I can read and understand English, and I have read and understand every and my answer to every question.	question a	and inst	ruction	n on this	equest	
	В.	The interpreter named in Part 7. read to me every question and instructio	n on this	request	and m	ny answer	to	
	_	every question in, a la understood everything.	anguage ii	n which	I am f	fluent, and	lΙ	
2.	Naturali	zation Applicant's Statement Regarding the Preparer						
_,		my request, the preparer named in Part 8. ,						,
	prep	pared this request for me based only upon information I provided or author	rized.					
Na	turaliz	ation Applicant's Contact Information						
3.	Naturali	zation Applicant's Daytime Telephone Number 4. Naturalization	n Applica	nt's Mo	bile T	elephone	Numbe	r (if any)
5.	Naturali	zation Applicant's Email Address (if any)						

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	art 6. Naturalization Applicant's Statement, Contact ertification, and Signature (continued)	Information,	► A	-			
Na	aturalization Applicant's Certification		_				
requ	bies of any documents I have submitted are exact photocopies of unal uire that I submit original documents to USCIS at a later date. Further records that USCIS may need to determine my eligibility for the imm	ermore, I authorize t	he releas				
	rther authorize release of information contained in this request, in supersons where necessary for the administration and enforcement of			ny USCI	S records to	other ent	ities
	nderstand that USCIS may require me to appear for an appointment to nature) and, at that time, if I am required to provide biometrics, I will					nd/or	
	1) I reviewed and provided or authorized all of the information in	my request;					
	2) I understood all of the information contained in, and submitted	with, my request; ar	nd				
	3) All of this information was complete, true, and correct at the tir	ne of filing.					
	ertify, under penalty of perjury, that I provided or authorized all of the ormation contained in, and submitted with, my request, and that all of					le	
Na	aturalization Applicant's Signature						
6.	Naturalization Applicant's Signature			Date of	Signature (mm/dd/yy	ууу)
\Rightarrow	•						
	TE TO ALL NATURALIZATION APPLICANTS: If you do not uments listed in the Instructions, USCIS may deny your request.	t completely fill out	this requ	est or fai	l to submit	required	
Pa	rt 7. Interpreter's Contact Information, Certification	, and Signature					
Pro	vide the following information about the interpreter.						
In	terpreter's Full Name						
1.	Interpreter's Family Name (Last Name) Interpreter's Family Name (Last Name)	nterpreter's Given Na	ıme (Firs	t Name)			
		1					
2.	Interpreter's Business or Organization Name (if any)						
	(ii dis)						
In	terpreter's Mailing Address						
3.	Street Number and Name		Apt. St	e. Flr.	Number		
	City or Town		State		ZIP Code	+4	
	Province Postal Code	Country					

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	art 7. Interpreter's Contact Information, Certific	cation	, and Signature A-
In	terpreter's Contact Information		
4.	Interpreter's Daytime Telephone Number	5.	Interpreter's Mobile Telephone Number (if any)
6.	Interpreter's Email Address (if any)		
In	terpreter's Certification		
I ce	ertify, under penalty of perjury, that:		
on inst	m fluent in English and	ralizati	on applicant informed me that he or she understands every
In	terpreter's Signature		
7.	Interpreter's Signature		Date of Signature (mm/dd/yyyy)
	han the Naturalization Applicant ovide the following information about the preparer.	natur	e of the Person Preparing this Request, if Other
	• • • • • • • • • • • • • • • • • • • •		
Pr	reparer's Full Name		
	• • • • • • • • • • • • • • • • • • • •	P1	reparer's Given Name (First Name)
Pr	reparer's Full Name	P ₁	reparer's Given Name (First Name)
<i>Pr</i> 1. 2.	Preparer's Family Name (Last Name)	P ₁	reparer's Given Name (First Name)
Pr. 1. 2. Pr.	Preparer's Family Name (Last Name) Preparer's Business or Organization Name (if any)	P1	reparer's Given Name (First Name) Apt. Ste. Flr. Number
<i>Pr</i> 1. 2.	Preparer's Family Name (Last Name) Preparer's Business or Organization Name (if any) Preparer's Mailing Address	Pı	

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Pr	art 8. Contact Information, Declaration, and Signature of the Person reparing this Request, if Other Than the Naturalization Applicant continued)
Pr	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)
Pr	eparer's Statement
7.	A. I am not an attorney or accredited representative but have prepared this request on behalf of the naturalization applicant and with the naturalization applicant's consent.
	B. I am an attorney or accredited representative and my representation of the naturalization applicant in this case extends does not extend beyond the preparation of this request.
	NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this request, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this request.
Pr	eparer's Certification
natu con info	my signature, I certify, under penalty of perjury, that I prepared this request at the request of the naturalization applicant. The uralization applicant then reviewed this completed request and informed me that he or she understands all of the information tained in, and submitted with, his or her request, including the Naturalization Applicant's Certification , and that all of this ormation is complete, true, and correct. I completed this request based only on information that the naturalization applicant wided to me or authorized me to obtain or use.
Pr	eparer's Signature
8.	Preparer's Signature Date of Signature (mm/dd/yyyy)

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Part U	Addition	aal Inta	armatian
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If you need extra space to provide any additional information within this request, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this request or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.	Fan	nıly Name (Last N	ame)		Given Na	ime (First Name)	Middle Name	
2.	A-N	Number (if any)	• A-					
3.	A. D.	Page Number	В.	Part Number	C.	Item Number		
4.	A. D.	Page Number	В.	Part Number	C.	Item Number		
5.	A. D.	Page Number	В.	Part Number	C.	Item Number		
6.	A. D.	Page Number	В.	Part Number	C.	Item Number		

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