

## Naturalization Services Pre-Screening

LAST NAME		FIRST NAME		MIDDLE INITIAL	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
MAILING ADDRESS (STREET)		APARTMENT NUMBER	CITY	STATE	ZIP CODE
SOCIAL SECURITY NUMBER		DATE OF BIRTH (MM/DD/YYYY)	COUNTRY OF BIRTH	ALIEN REGISTRATION NUMBER	
DSHS CLIENT ID	DATE OF ENTRY TO US	HOME PHONE NUMBER (AREA CODE) (    )		MESSAGE PHONE NUMBER (AREA CODE) (    )	
CONTACT PERSON'S NAME				CONTACT PHONE NUMBER (AREA CODE) (    )	
RELATIONSHIP <input type="checkbox"/> Family <input type="checkbox"/> Friend <input type="checkbox"/> Other (specify):					
CONTACT PERSON'S MAILING ADDRESS (STREET)			CITY	STATE	ZIP

### ORIA Eligible

PUBLIC BENEFIT RECIPIENT (PROOF OF RECEIPT OF PUBLIC BENEFIT MUST BE IN CLIENT FILE)

Food Assistance  Medicaid  TANF  ABD  Other (specify):

OTHER ELIGIBILITY REQUIREMENTS

Washington State Resident

Are eligible to naturalize within one (1) year (four years of continuous legal U.S. residency or two year if married to, and living with, a U.S. citizen)

### Basic Naturalization Requirements. Please answer all questions.

The client:

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| 1. Has been a lawful permanent resident of the U.S. for five years (three years if married to U.S. citizen)?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has lived in the U.S. for at least five years (three years if married to a U.S. citizen)? .....                | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has lived in the USCIS District for at least three months? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has been physically present in the U.S. for at least half of the five year period?.....                        | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Has not been absent from the U.S. for six months or more? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is a person of good moral character (inappropriate behavior, immigration violations, etc.)? .....              | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Can read, write, or speak basic English (conduct language assessment)? .....                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is able to pass a test on U.S. history and government? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Is at least 18 years old? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Believes in the principles of the U.S. Constitution and would take an oath of loyalty to the U.S.?.....       | <input type="checkbox"/> | <input type="checkbox"/> |
- (If no, must complete additional paperwork for oath waiver based on beliefs. If the person can't take the oath because of a disability, a waiver is available but requires extensive documentation.)

### Legal Issues. Please answer all questions.

The applicant:

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| 1. Was absent from U.S. for six months or more while a permanent resident?.....                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has moved to live in another country while a permanent resident? .....                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has been deported or is now in deportation proceedings? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has failed to file federal income taxes, or paid as a non resident, since becoming a permanent resident? ... | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Has willfully failed or refused to support dependents? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Has failed to register for the Selective Service (for men only)? .....                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is on probation or parole for a criminal conviction? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Has been a drug abuser or addict? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Has information on citizenship application different from other information previously given to USCIS? ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Has committed fraud or lied to get green card (including marriage) or other immigration benefit? .....      | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Has been arrested for, charged with, convicted of, or admitted to having committed a crime? .....           | <input type="checkbox"/> | <input type="checkbox"/> |

**Legal Issues (continued). Please answer all questions.**

The applicant:	YES	NO
12. Has had any contact with the police? .....	<input type="checkbox"/>	<input type="checkbox"/>
13. Has committed fraud to receive welfare or other public benefits? .....	<input type="checkbox"/>	<input type="checkbox"/>
14. Has helped smuggle someone into the U.S. even if it was a relative? .....	<input type="checkbox"/>	<input type="checkbox"/>
15. Has falsely claimed to be a U.S. citizen? .....	<input type="checkbox"/>	<input type="checkbox"/>
16. Has voted or registered to vote in the U.S.? .....	<input type="checkbox"/>	<input type="checkbox"/>
17. Came to the U.S. to practice polygamy? .....	<input type="checkbox"/>	<input type="checkbox"/>
18. Has been charged with committing domestic violence, child abuse, or child neglect? .....	<input type="checkbox"/>	<input type="checkbox"/>
19. Has had a court determine that the applicant violated a protection order? .....	<input type="checkbox"/>	<input type="checkbox"/>
20. Has been engaged in prostitution, illegal gambling, drug sales, or habitual drinking? .....	<input type="checkbox"/>	<input type="checkbox"/>
21. Has been in jail for 180 days or more? .....	<input type="checkbox"/>	<input type="checkbox"/>
22. Has been involved in certain political activities such as anarchism, totalitarianism, or communism, or been a member of an organization that could be considered a terrorist group or involved in what USCIS calls "terrorist activity?" .....	<input type="checkbox"/>	<input type="checkbox"/>

**If answer is yes to any of the questions in the previous section, advise applicant to seek legal assistance before applying for citizenship. Do not submit N-400 Application for Naturalization until an attorney knowledgeable in immigration says it is OK to do so.**

**Documentation of Initial Services**

<b>N-400 APPLICATION FOR NATURALIZATION</b>	N400 completion date: _____ Submission date: _____ <input type="checkbox"/> Photographs included <input type="checkbox"/> Fee waiver request included <input type="checkbox"/> Fingerprint fee included <input type="checkbox"/> N400 application fee included <input type="checkbox"/> Other: _____
<b>ENGLISH LANGUAGE EXEMPTIONS (Must still take the civics test and may be permitted to use interpreter to take the test in own language)</b>	<input type="checkbox"/> Age 55 or older at the time of filing for naturalization and lived as permanent resident in U.S. for 15 years <input type="checkbox"/> Age 50 or older at the time of filing for naturalization and lived as permanent resident in U.S. for 20 years <input type="checkbox"/> Age 65 or older and have been a permanent resident for 20 years at the time of filing for naturalization - given a shorter test using interpreter
<b>DISABILITY WAIVER (Must meet USCIS definition of disability)</b>	<input type="checkbox"/> N-648 Disability Waiver needed <input type="checkbox"/> N-648 completed <input type="checkbox"/> N-648 sufficient (have N-648 screened by someone knowledgeable of N-648 issues).  <input type="checkbox"/> N-648 submitted; date: _____; result: <input type="checkbox"/> Approved <input type="checkbox"/> Denied  Note: _____
<b>FEE WAIVER REQUEST</b>	<input type="checkbox"/> I-912 Fee Waiver Request needed <input type="checkbox"/> I-912 completed and submitted, date: _____ <input type="checkbox"/> Approved, date: _____ <input type="checkbox"/> Resubmitted if denied due to insufficient information, date: _____ <input type="checkbox"/> Exception to Policy submitted to ORIA if waiver is denied  Note: _____
<b>FEE REIMBURSEMENT</b>	<input type="checkbox"/> Fingerprint fee needed (75 years old or younger); Paid by: _____ <input type="checkbox"/> N400 fee needed (FW denied or income ineligible); Paid by: _____  Note: _____

CLIENT'S NAME

CLIENT'S IDENTIFICATION NUMBER

- Eligible to apply for naturalization
- Client appears ineligible for naturalization, reason:

- Technical Assistance, or brief legal consultation, received from \_\_\_\_\_ on \_\_\_\_\_.
- Client needs legal assistance, referred to \_\_\_\_\_ on \_\_\_\_\_.

- English class needed (unless applicant is verified as Outreach, please refer pre-literate applicants to an ESL provider).

- Client is enrolled in naturalization services at this agency.
- Client received naturalization services from another DSHS contracted service provider prior to intake screening date.

If yes, client received the following naturalization services:

- 1) \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_.
- 2) \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_.
- 3) \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_.
- 4) \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_.
- 5) \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_.

**Service Plan**

**Pre-Screening Completed by:**

AGENCY'S NAME

AGENCY STAFF'S NAME

PHONE NUMBER (INCLUDE AREA CODE)

DATE