

U. S. Department of State

OMB NO. 1405-0178 EXPIRES: 12/31/2013 Estimated Burden -15 minutes

BUREAU OF CONSULAR AFFAIRS

REQUEST FOR DETERMINATION OF POSSIBLE LOSS OF UNITED STATES CITIZENSHIP

The following information is needed to determine your present citizenship status and possible loss of U.S. citizenship. You cannot lose U.S. citizenship unless you VOLUNTARILY perform an act designated by U.S. statute and do so with the intent to relinquish U.S. citizenship. You are advised to consult an attorney before completing this form. If you have any questions about the form, you should discuss them with a member of our consular staff before completing the form. You are requested to complete this form carefully. Use extra paper as needed and attach any supporting documents to this form.

PARTI						
1. Name (Last, First, MI)			2. Date of Birth (<i>mm-dd-yyyy</i>)	3. Place of Birth		
4. (a) Last U.S. Passport Number (b) Issue			ed at (<i>Place</i>) (c) Issued on (<i>Date</i>) (<i>mm-dd-yyyy</i>)			
 5. If not born in the United States, did you acquire citizenship by birth outside the United States to U. S. citizen parent(s): Yes No; or Naturalization. (Naturalization petitions prior to 11/29/1990 were submitted to and adjudicated by a court. After that date they were submitted to and adjudicated by INS/USCIS.) Yes No (a) Name of Naturalizing Court/Office);
Date (From) (mm-dd-yyyy)	Dates and Countries of Date (To) (mm-dd-y		side the United States Sind	ce Birth Country		
 6. When did you first become awa 7. How did you find out that you at <i>If not, when did you learn about</i> 	re a citizen of the United S	States? (For exa	ample, did you always kno	w you were a U.S. citiz	zen?	
 8. Are you a national or citizen of (a) If yes, of what country?			tates?		Yes	No
(i) Birth?				No		
(ii) Marriage?					Yes	No
				No		

(c) If other, explain.		
(d) If you checked YES to question 8 (B) part (iii) by what means, or in what kind of proceeding, were you naturalized as a foreign state?	citizen of a	
9. Have you taken an oath or made an affirmation or other formal declaration of allegiance to a foreign state? If yes, please provide a date <i>(mm-dd-yyyy)</i> and country	Yes	No
(a) If you checked YES to question 8 or 9 or both, what was the nature of the oath you took? What were the words used? the oath please attach it.	lf you have	e a copy of
10. Have you served in the armed forces of a foreign state?	Yes	No
(a) If so, what country?		
(b) In which branch of the armed forces did you serve?		
(c) Dates of Service (mm-dd-yyyy)		
(d) What ranks did you hold?		
(e) What was your highest rank?		
(f) What responsibilities did you have and what functions and activities were you engaged in?		
(g) Did you take an oath? If so, describe the oath.	Yes	No
11. Have you accepted, served in, or performed the duties of any office, post or employment with the government of a foreign state?	Yes	No
(a) If yes, please provide dates of service, country and the job title		
(b) What were your duties and responsibilities for each of the foreign government jobs you held?		
(b) what were your duttes and responsibilities for each of the foreign government jobs you new?		

(c) Did you take an oath, affirr affirmation, declaration or all	nation, declaration or allegiance in conn egiance.	ection with the job?	If yes, describe the oath,	Yes	No
 What ties did you have to the (a) Did you maintain a resider 	e country where you performed the act o	or acts indicated in C	Questions 8-11? For example	: Yes	No
(b) Did you own property? If y				Yes	No
(c) Do you have family or soci	al ties? If yes, please explain.			Yes	No
(d) Do you vote? If yes, please	explain.			Yes	No
(e) What other ties did you ha	ve to the country where you performed t	he act or acts indica	ated in Questions 8-11?		
13. What ties do you retain with (a) Do you maintain a residen				Yes	No
(b) Do you own property? If ye	s, please explain.			Yes	No
(c) Do you have family or soci	al ties? If yes, please explain.			Yes	No
(d) Do you vote? If yes, please	explain.			Yes	No
(e) Do you file U.S. income or	other tax returns? If yes, please explair	ı.		Yes	No

(f) Do you maintain a	profession, occupation, or license in the United St	tates? If yes, please explain.	Yes	No
(a) Have you register	ed your children as citizens of the United States?		Yes	No
	you use to travel to and from the United States?		103	
15. What passport do y	you use to travel to and from other countries?			
16. Have you renounce	ed your U.S. nationality at a U.S. Consulate or Em	bassy? If yes, provide a date and place.	Yes	No
17. Describe in detail th	ne circumstances under which you performed the a	act or acts indicated in Questions 8-16.		
19 Did you porform the	a pot or poto voluptorilu?		Yes	No
	e act or acts voluntarily? hse was your performance of the act or acts involu	ntary?	103	
()		,		
(b) Did you perform t	he acts with the intent to relinquish U.S. citizenship	p? If so, please explain your answer.	Yes	No
19. Did you know that	by performing the act described in Questions 8-18	3 you might lose U.S. citizenship? Please exp	olain your ans	swer.
	his form will become part of the official record in yo rney, and to read over your answers to make certa			
to provide additional information you believe relevant to a determination of your citizenship status, and in particular to your intention or lack of intention to relinquish U.S. citizenship, you may attach separate sheets with that information.				
If your answer to each of the questions above is "No," please sign below before a Consular Officer at a U.S. Embassy or Consulate. If you answered "Yes", to one or more of questions 8-19 and your intent was completely VOLUNTARY, please continue with PART II.				
Subscribed a				
	Signature			
[SEAL]				
	Signature of Consular Officer			

21.	21. You should be aware that under United States law, a citizen, may lose U.S. citizenship if he/she voluntarily performs any of the acts specified above with the intent of relinquishing United States citizenship. If you voluntarily performed an act stated above with the intent to relinquish United States citizenship, you may sign Part II of this statement before a Consular Officer at a U.S. Embassy or Consulate. The U.S. Consulate or Embassy will prepare the forms necessary to document your loss of U.S. citizenship.				
		PART II			
	STATEMENT OF VOLUNTARY R	ELINQUISHMENT OF U.S. CITIZENSHIP			
Sub	scribed and Sworn				
I,		, performed the act of expatriation indicated in Questions 8-19,			
volu	untarily and with the intent to relinquish my U.S. citizenship.				
	Signature	Date (mm-dd-yyyy)			
[S	SEAL]				
	Signature of Consular Officer	Date (mm-dd-yyyy)			
		ΔΩΤ STATEMENT			
AUTH	PRIVACY A	Date (mm-dd-yyyy) ACT STATEMENT Nested under the authority of 8 U.S.C. 1104, 1481, 1483, 1488			

AUTHORITIES: The information on this form is requested under the authority of 8 U.S.C. 1104, 1481, 1483, 1488, and 1501, and 22 U.S.C. 212. Although furnishing the information is voluntary, applicants may not be eligible for a U.S. passport or for relinquishment or renunciation of U.S. nationality if they do not provide the required information.

PURPOSE: The principal purpose of gathering this information is to determine if the individual performed a potentially expatriating act as defined in 8 U.S.C. 1481 voluntarily and with the intention of relinquishing U.S. nationality.

ROUTINE USES: The information solicited on this form may be made available to foreign government agencies to fulfill passport control and immigration duties, to investigate or prosecute violations of law, or when a request for information is made pursuant to customary international practice. In the event a finding of loss of nationality is made, the information solicited on this form may be made available to other federal entities with law enforcement responsibilities relating to or affected by nationality, including but not limited to the U.S. Citizenship and Immigration Service, the Internal Revenue Service, and the Federal Bureau of Investigation. The information provided also may be released to federal, state or local agencies for law enforcement, counter-terrorism and homeland security purposes; to Congress and courts within their sphere of jurisdiction; and to other federal agencies for certain personnel and records management matters.

Paperwork Reduction Act (PRA) Statement

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: A/GIS/DIR, Room 2400 SA-22, U.S. Department of State, Washington, DC 20522-2202.