



1800 E. 17TH STREET, SANTA ANA, CA 92701
TEL. 714-347-9610

CITIZENSHIP

IMPORTANT:

*You must have this form completed by the day of your appointment. We don't want to delay your process.
Thank you for your cooperation!*

Appointment Date: _____

Time: _____

Date/Fecha _____

Income Reporting Sheet/ Treatment Plan

Beneficiary or Applicant/Beneficiario o Solicitante:

First Name/Primer Nombre _____ Middle Name/Segundo Nombre _____

Last Name/APELLIDO _____ A#: _____

Phone #/Número de teléfono _____

Address/Dirección _____

Email/Correo electrónico _____

Date of Birth/Fecha de Nacimiento _____ Age/Edad _____

Gender/Género _____ Years of School/Años de Educación _____

Country of Origin/País de Origen _____ Race/Raza _____

Language of Service/Idioma de Servicio _____

Household Size (Including Children)/Tamaño del Hogar (incluyendo niños) _____

Total Gross Annual Household Income/Total de ingresos anuales antes de recortes _____

2020 Federal Poverty Level Chart							
Household Size	100%	> 138%	150%	200%	250%	300%	400%
1	\$12,760	\$16,971	\$19,140	\$25,520	\$31,900	\$38,280	\$51,040
2	\$17,420	\$22,791	\$25,860	\$34,480	\$43,100	\$51,720	\$68,960
3	\$21,720	\$29,974	\$32,580	\$43,440	\$54,300	\$65,160	\$86,880
4	\$26,200	\$36,156	\$39,300	\$52,400	\$65,500	\$78,600	\$104,800
5	\$30,680	\$42,338	\$46,020	\$61,360	\$76,700	\$92,040	\$122,720
6	\$35,160	\$48,521	\$52,740	\$70,320	\$87,900	\$105,480	\$140,640
7	\$39,640	\$54,703	\$59,460	\$79,280	\$99,100	\$118,920	\$158,560
8	\$44,120	\$60,886	\$66,180	\$88,240	\$110,300	\$132,360	\$176,480



For Internal Use Only:

Counselor: _____

Case #: _____

A#: _____

Identified Problem/Service Need: _____

Client's Objective: _____

Steps taken to Meet Objectives: _____

Date	Services	Fees	Amount Paid	Balance	Receipt #/ Funding Source

Citizenship Application Information Sheet and Requirements

To apply for Citizenship, you must be a least 18 years old, and meet the following requirements:

5 Year Rule:

1. Be a legal Permanent Resident for at least 5 years

3 year Rule (if you are married to a U.S. Citizen):

1. Be a Legal Permanent Resident for at least 3 years, and
2. Living with your U.S. citizen spouse at least 3 years, and
3. Your spouse must have been a U.S. citizen for at least 3 years

If you have served in the U.S. Armed Forces:

1. Have served for 3 years in active duty, or
2. Have been honorably discharged within 6 months before applying, or
3. A person who has served during a period of recognized hostilities (war) and enlisted or reenlisted in the U.S. (you do not have a lawful permanent residence).

The following information is required:

1. Copy of Legal Permanent Resident Card
2. Copy of California Driver's License or CA ID
3. Social Security Number
4. **This intake filled out COMPLETELY**

Interview Language Exemption:

I am _____ years old and have had my green card for _____ years.

Categories to take interview in your own language				
Age		Years of Residency	Amount of Questions to Study	Amount of Questions answered correctly to pass
1	55 years or older	15 years or more	100	6
2	50 years or older	20 years or more	100	6
3	65 years or older	20 years or more	20	6

English Interview and Civic Exemption:

1. If you have a medical disability or impairment and you believe qualify for a waiver of the English and/or U.S. government and history test, attach properly completed N-648 form. If you ask for this waiver, it does not guarantee that you will be excused from the testing requirements.

Fees:

For United States of Immigration Services

1. Money Order, Personal Check or Credit Card accepted. Payable to the U.S. Department of Homeland Security
 - a. If you are 18 to 74 years old - **\$725.00**
 - b. If you are 75 years or older - **\$640.00**
2. Fee waiver is available to those who qualify.

Note: These fees will change in the future but is unknown when.

For Catholic Charities there is No Cost!

U.S. Citizenship Screening Questionnaire:

Check the appropriate response to the following questions.

1. Have you made any trips outside of the U.S. in the last 5 years that lasted 6 months or more? ☐ Yes ☐ No
2. Since becoming a Legal Permanent Resident have you moved to another country? ☐ Yes ☐ No
3. Are you in deportation proceedings? ☐ Yes ☐ No
4. Have you ever been deported or removed? ☐ Yes ☐ No
5. Since becoming a Legal Permanent Resident have you ever failed to file a federal, state or local tax, or do have any taxes that are overdue? ☐ Yes ☐ No
6. Have you failed to support your children, or do you owe child support? ☐ Yes ☐ No
7. Are you on probation or parole for a criminal conviction? ☐ Yes ☐ No
8. Have you ever given false or misleading information to any U.S. Government official while applying for any immigration benefit or to prevent deportation, exclusion, or removal? ☐ Yes ☐ No
9. Have you lied to any U.S. Government official to gain entry or admission into the U.S.? ☐ Yes ☐ No
10. Have you lied or committed fraud to receive or to continue to receive public benefits? ☐ Yes ☐ No
11. Have you helped someone enter the U.S. illegally, even if it was a relative? ☐ Yes ☐ No
12. Have you claimed to be a U.S. citizen? ☐ Yes ☐ No
13. Have you voted illegally or registered to vote in the U.S.? ☐ Yes ☐ No
14. Have you made a living by illegal gambling? ☐ Yes ☐ No
15. Have you been a habitual drunkard, drug abuser or drug addict? ☐ Yes ☐ No
16. Have you ever been **arrested, cited (tickets) or detained** by any law enforcement officer (including USCIS or former INS and military officers) for any reason? ☐ Yes ☐ No
17. Have you ever been charged or convicted of a crime or offense? ☐ Yes ☐ No

If you have marked "Yes" to any of the questions, we will need more information from you.

Selective Service Information:

Are you a male who lived in the U.S. at any time between your 18th and 26th birthdays? ☐ Yes ☐ No

If you answered "Yes," when did you register for the Selective Service?

Date Registered: _____ Selective Service Number: _____

Applicant Intake

I. Applicant's Information:

Social Security #: _____

Resident Since: _____ LPR Category (next to USCIS#): _____

Other names used: _____

Marital Status: _____

If you would like to change your name, print the name you would like to use:

First Name: _____ Middle Name: _____ Last Name: _____

Is your mailing address the same as your physical address? ☐ Yes ☐ No

If not, what is your mailing address?

Street Address: _____

City: _____ State: _____ Zip: _____

II. Current Spouse's Information:

First Name: _____ Middle Name: _____ Last Name: _____

Other Names Used: _____

Date of Birth: _____ Country of Birth: _____

Date of Marriage: _____

Immigration Status: ☐ U.S. Citizen ☐ LPR ☐ Other: _____

If spouse is a Legal Permanent Resident, has a work permit or is a U.S. Citizen, please provide the following:

A#: _____ Date of Citizenship: _____

Spouse's Current Employer: _____

III. Applicant's Marital History:

Prior spouse's information (if you have additional ex-spouses, please add to last page of packet):

First Name: _____ Middle Name: _____ Last Name: _____

Other Names Used: _____

Date of Birth: _____ Country of Birth: _____

Date of Marriage: _____ Date of Marriage Termination: _____

Immigration Status (at time marriage ended): ☐ U.S. Citizen ☐ LPR ☐ Other: _____

How did Marriage end? ☐ Divorce ☐ Death ☐ Annulment

IV. Spouse's Marital History

First Name: _____ Middle Name: _____ Last Name: _____

Other Names Used: _____

Date of Birth: _____ Country of Birth: _____

Date of Marriage: _____ Date of Marriage Termination: _____

Immigration Status (at time marriage ended): ☐ U.S. Citizen ☐ LPR ☐ Other: _____

How did Marriage end? ☐ Divorce ☐ Death ☐ Annulment

V.Address History:

List where you have lived in the last 5 years (*from most recent to the oldest*):

<i>Address: Street, Apt #, City, State, Zip Code, Country</i>	<i>From: (Month/Year)</i>	<i>To: (Month/Year)</i>

VI.Employment and School History:

List where have you worked or gone to school in the last 5 years (*from the most recent to the oldest*):

1	Employer or School:	Address:	
	From: (Month/Year)	To: (Month/Year)	Title or Occupation:
2	Employer or School:	Address:	
	From: (Month/Year)	To: (Month/Year)	Title or Occupation:
3	Employer or School:	Address:	
	From: (Month/Year)	To: (Month/Year)	Title or Occupation:
4	Employer or School:	Address:	
	From: (Month/Year)	To: (Month/Year)	Title or Occupation:

VII.Exits and Entries:

List your exits and entries outside the U.S. that were 24 hours or more in the last 5 years (from the most recent to the oldest). If you don't remember the exact dates, please provide the month and year and total amount of days outside.

<i>Date you left the U.S. (mm/dd/yy)</i>	<i>Date returned to the U.S. (mm/dd/yy)</i>	<i>Country or Countries Visited</i>	<i>Total Days Outside of U.S.</i>

VIII. Children Information:

List all your children (including stepchildren, deceased, missing, alive, living abroad).

How many children do you have? _____

1	Name:	Address:		
	Date of Birth:	Country of Birth:	USCIS# or A#:	Biological Child? Yes No
2	Name:	Address:		
	Date of Birth:	Country of Birth:	USCIS# or A#:	Biological Child? Yes No
3	Name:	Address:		
	Date of Birth:	Country of Birth:	USCIS# or A#:	Biological Child? Yes No
4	Name:	Address:		
	Date of Birth:	Country of Birth:	USCIS# or A#:	Biological Child? Yes No
5	Name:	Address:		
	Date of Birth:	Country of Birth:	USCIS# or A#:	Biological Child? Yes No

*If you need additional space, please write information at the end of this packet.

IX. Parent Information:

Are any of your parents U.S. citizens? ☐ Yes ☐ No

If you marked yes, please fill out the following information:

Mother's Name:		
Date of Birth:	Country of Birth:	Date of Citizenship:
Father's Name:		
Date of Birth:	Country of Birth:	Date of Citizenship:

X. Traffic and Criminal Information:

Have you been arrested, detained or cited (including traffic tickets)? ☐ Yes ☐ No

Have you been convicted of a crime? ☐ Yes ☐ No

If you answered "Yes" to any of the above, provide the following information:

<i>Date</i>	<i>Location (City, State, Country)</i>	<i>Nature of Offense</i>	<i>Outcome</i>

**Note: We will need certified court records to mail with the application.*

XI. Removal Proceedings Information:

Have you ever been removal proceedings? ☐ Yes ☐ No

Have you ever been deported, removed or excluded from the U.S.? ☐ Yes ☐ No

If you answered "Yes" to any of the above, provide the following information:

<i>Date</i>	<i>Location (City, State, Country)</i>	<i>Outcome</i>

XII. Additional Space: