CATHOLIC CHARITIES OF ORANGE COUNTY
Citizenship & Immigration Services

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_____

CATHOLIC CHARITIES OF ORANGE COUNTY
Citizenship & Immigration Services

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!*

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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 offer (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:_____

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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

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V.Address History:

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

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

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.

Date you left the U.S. (mm/dd/yy)	*Date retuned to the U.S. (mm/dd/yy)*	*Country or Countries Visited*	*Total Days Outside of U.S.*

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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:*

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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:

Date	*Location (City, State, Country)*	*Nature of Offense*	*Outcome*

**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:

Date	*Location (City, State, Country)*	*Outcome*

XII. Additional Space:

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