STATEMENT - EVIDENCE OF CITIZENSHIP STATUS

For use of this form, see AR 135-101; the proponent agency is The Office of The Surgeon General

APPLICANT _____
(Typed Name; last, first, middle)

for appointment and assignment to the _____
(AMEDD Branch)

NOTE: Individuals not citizens of the United States by birth will submit a statement as indicated in 1, 2, or 3 below, as appropriate, which is signed by an officer of the U. S. Army or a Notary Public.

1. NONCITIZENS WHO HAVE DECLARED THEIR INTENTION OF BECOMING A CITIZEN OF THE UNITED STATES:

I have, this date, seen the original Alien Registration Receipt Card, Form No. 1-151, bearing No. _____

issued to _____ *on* _____
(Name) *(Date)*

DATE	SIGNATURE *(Officer of the Army or Notary Public)*

2. CITIZENS BY NATURALIZATION:

I have this date seen the original certificate of citizenship, No. _____ *(or certified copy of the court order establishing citizenship) stating that* _____
(Name)
was admitted to United States citizenship by the court of _____

at _____ *on* _____
(City and State) *(Date)*

DATE	SIGNATURE *(Officer of the Army or Notary Public)*

3. CITIZENS THROUGH NATURALIZATION OF PARENT:

I have this date seen the original certificate of citizenship, No. _____ *issued to*

_____ *, by the Immigration and Naturalization*
(Name)
Service, Department of Justice, stating that _____ *acquired citizenship on*
(Name of Applicant)

_____
(Date)

DATE	SIGNATURE *(Officer of the Army or Notary Public)*