

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

DATE

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