

U.S. Department of Homeland Security  
 Bureau of Citizenship and Immigration Services

**N-336, Request for a Hearing on a Decision  
 in Naturalization Proceedings Under Section 336 of the Act**

Decision: <input type="checkbox"/> Grant <input type="checkbox"/> Denial	Fee:
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<b>1. In the Matter of:</b> (Name of Naturalization Applicant)	File Number: <b>A-</b>
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**2. I am filing a request for hearing on the decision dated:**

**3. Please check the one block which applies:**

- a.  I am *not submitting* a separate brief, statement or evidence.
- b.  I *am submitting* a separate brief, statement and/or evidence with this form.
- c.  I need \_\_\_\_\_ days to submit a brief, statement and/or evidence to the CIS. (May be granted only for good cause shown. Explain in a separate letter.)

**4. Person filing request:**

\_\_\_\_\_  
 Name (Please Type or Print in Black Ink.)

\_\_\_\_\_  
 Address (Street Number and Name)

\_\_\_\_\_  
 (Apt. Number)

\_\_\_\_\_  
 (City)

\_\_\_\_\_  
 (State)

\_\_\_\_\_  
 (Zip Code)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date (mm/dd/yyyy)

I am an attorney or representative and I represent the applicant requesting a hearing on a naturalization proceeding. [You must attach a Notice of Entry or Appearance (Form G-28) if you are an attorney or representative and did not previously submit such a form.]

\_\_\_\_\_  
 (Person for whom you are appearing)

**5. Briefly state the reason(s) for this request for a hearing:**

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**INSTRUCTIONS**

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**1. Filing.** You must file your request for a hearing within 30 calendar days after service of the decision (33 days if your decision was mailed) with the local office of the Bureau of Citizenship and Immigration Services (BCIS) that made the unfavorable decision. (The CIS is comprised of offices of former Immigration and Naturalization Service.) The date of service is normally the date of the decision. Submit an original request only. Additional copies are not required.

**2. Fee.** You must pay **\$250.00** to file this form. This form is to be used to appeal an unfavorable decision for an individual applicant. **The fee will not be refunded, regardless of the action taken in your case. Do not mail cash.** All checks or money orders, whether United States or foreign, must be payable in U.S. currency at a financial institution in the United States. When a check is drawn on the account of a person other than yourself, write your name on the face of the check. If the check is not honored, the CIS will charge you \$30.00.

Pay by check or money order in the exact amount. Make the check or money order payable to the **U.S. Department of Homeland Security**; unless:

- If you live in Guam and are filing this form there, make the check or money order payable to the "Treasurer, Guam."
- If you live in the U.S. Virgin Islands and are filing this form there, make the check or money order payable to the "Commissioner of Finance of the Virgin Islands."

When preparing your check or money order, spell out U.S. Department of Homeland Security. Do not use the initials "USDHS" or "DHS."

**3. Attorney or Representative.** You may, if you wish, be represented, at no expense to the government, by an attorney or other duly authorized representative. If so, that person must submit a Notice of Appearance (Form G-28) with the request for a hearing. Form G-28 can be obtained by calling **1-800-375-5283** or from the CIS internet website at **www.uscis.gov**.

**4. Brief.** You do not need to submit a brief in support of your request, but you may submit one. You may submit a simple written statement instead of a brief. You may also submit evidence. You must send your request and accompanying fee and documentation to the CIS office which made the unfavorable decision. If you need more than 30 days, you must, within the initial 30 day period, explain why in a separate letter attached to this form. The CIS may grant more time for good cause.

**5. Paperwork Reduction Act Notice.** A person is not required to respond to a collection of information unless it displays a currently valid OMB control number. This collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Bureau of Citizenship and Immigration Services, HQRF5, 425 I Street N.W., Room 4034, Washington, DC 20529; OMB No.1615-0050. **Do not mail your completed application to this address.**