XII. RELATIVES

All applicants must give complete information concerning their close relatives and in-laws. Relatives include spouse, parents, stepparents, siblings, step and half siblings, children, and stepchildren. This information will be verified through a background investigation. If you have been married more than once, give the requested information for each former spouse. For deceased relatives, give the requested information and indicate the decedent's last residence and year of death. If you or your spouse were raised by legal guardians or others, give the requested information on them as well as the biological parents. If you are engaged to be married, indicate this in Part 1, Block 8, and give information on your future spouse and future in-laws in Part XII, Blocks 21 through 26, clearly indicating that they are future relationships. For any relatives (excluding in-laws) who were born outside the United States to American parents, attach a copy of State Department Form - 240.

1. **FATHER** (Last, First, Middle)	2. **MOTHER** (Last, First, Middle) (Maiden)
Address (City, State, Zip Code)	Address (City, State, Zip Code)
Name of Firm or Employer	Name of Firm or Employer
Address of Employer (City, State, Zip Code)	Address of Employer (City, State, Zip Code)
Date of Birth Place of Birth	Date of Birth Place of Birth
3. **SPOUSE** (Last, First, Middle) (Maiden)	4. **FORMER SPOUSE** (Last, First, Middle) (Maiden)
Address (City, State, Zip Code)	Address (City, State, Zip Code)
Name of Firm or Employer	Name of Firm or Employer
Address of Employer (City, State, Zip Code)	Address of Employer (City, State, Zip Code)
Date of Birth Place of Birth	Date of Birth Place of Birth
5. **CHILD** (Last, First, Middle) (Maiden)	6. **CHILD'S SPOUSE** (Last, First, Middle) (Maiden)
Address (City, State, Zip Code)	Address (City, State, Zip Code)
Name of Firm or Employer	Name of Firm or Employer
Address of Employer (City, State, Zip Code)	Address of Employer (City, State, Zip Code)
Date of Birth Place of Birth	Date of Birth Place of Birth