Citizenship and Immigration Status Confirmation

Student Name: ____________________________  Student ID: ____________

This form is for the collection of Department of Homeland Security (DHS) or other U.S. citizenship/nationality documents from students unable to present their documents in person. I understand that providing false or misleading information or documents is punishable by fine or imprisonment and may make me liable for repayment of any funds received on the basis of the information and documents I am providing.

Statement of Certification

I certify that I ____________________________ am the individual signing this statement, and I am providing a copy of my documents along with a copy of a valid government-issued photo identification card bearing my portrait (or likeness). I certify that the attached documents and government-issued photo identification are the true, exact, and complete copies of the originals issued to me.

________________________  __________________________
Student’s Signature                Date

*Note: Must be signed in the presence of a Notary Public.

List of Document(s):

<table>
<thead>
<tr>
<th>Name of Valid ID</th>
<th>Expiration Date of Valid Photo ID</th>
<th>Issuing Authority of Valid Photo ID</th>
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<tr>
<td>Name of Citizenship and/or Immigration Document(s)</td>
<td>Expiration Date (if any) of Citizenship and/or Immigration Document(s)</td>
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Notary’s Certificate of Acknowledgement

State of ____________________________
City/County of ____________________________

On ____________________________, before me, ____________________________ (Notary’s Name),
personally appeared ____________________________, (Student’s Printed Name)
satisfactory evidence of identification ____________________________ to be the
Type of government –issued photo ID provided
above-named person who signed the foregoing instrument.

WITNESS my hand and official seal ____________________________
(seal)                                         (Notary’s Signature)

My commission expires on ____________________________
(Date)