

Student Information

 Student's Last Name Student's First Name M.I.

 Student ID# (or Social Security Number)

This form is for the collection of DHS or other U.S. citizenship/nationality documents from students unable to present their documents in person. The original of this form must be submitted along with the true, exact and complete copies of the original citizenship/nationality documents.

I certify that I, (print student's full name) _____, 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.

List of document(s):

| <u>NAME OF VALID PHOTO ID</u> | <u>EXPIRATION DATE</u> | <u>ISSUING AUTHORITY OF VALID PHOTO ID</u> |
|-------------------------------|------------------------|--------------------------------------------|
| | | |
| | | |

| <u>NAME OF CITIZENSHIP AND/OR IMMIGRATION DOCUMENT(S)</u> | <u>EXPIRATION DATE (IF ANY)</u> |
|-----------------------------------------------------------|---------------------------------|
| | |
| | |

I understand 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 have provided.

 Student's Signature

 Date

TO BE COMPLETED BY NOTARY PUBLIC
If state mandated, must include embossed Notary Public seal

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| State of: | |
| County of: | Exp: |
| The above named person personally appeared before me and proved to me satisfactory evidence of identification, to be the above-named person who signed the foregoing instrument: | |
| List Type of government-issued photo ID provided: | |
| Printed Name: | |
| Signature: | Date: |