Student - Affidavit of Citizenship, Permanent Residence, or Other Eligible Non-Citizenship

Section 1: Student Certification

Name of Valid Photo ID | Expiration Date of Valid Photo ID | Issuing Authority of Valid Photo ID
---|---|---

Name of Citizenship and/or Immigration Document(s) | Expiration Date (if any) of Citizenship and/or Immigration Document(s)
---|---

Certification Statement

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 further certify that the attached documents and government issued photo identification are the true, exact, and complete copies of the originals issued to me.

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 information and documents I have provided.

Student Signature: ___________________________ Date: ________________

*Sign in the presence of a notary public

Notary must complete page 2
Section II: Notary’s Certificate Of Acknowledgement

The statement on the reverse page must be signed in the presence of a notary if the student is unable to appear in person at CSU, Chico to submit citizenship or immigration documents. Notary must view and photocopy original documents (not photocopied documents).

State of ______________________________ City/County of _______________________ On _______________ (date), before me, ____________________________________________________________________________ (Notary’s printed name), personally appeared, ____________________________________________________________________________ (Printed name of signer), and provided to me on basis of satisfactory evidence of identification ____________________________________________ (Type of government-issued photo ID provided) and ________________________________________________ (Type of citizenship or immigration documentation provided) to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(seal)

Notary’s signature _________________________________________________________________

My commission expires on ___________________(date)

Do NOT fax this form or any of the required attached documents. They must be mailed to:

Financial Aid and Scholarship Office
CSU, Chico
400 W 1st Street
Chico, CA 95929-0705