

FINANCIAL AID OFFICE
 STUDENT SERVICES BUILDING
 MAIL CODE 4702
 1263 LINCOLN DRIVE
 CARBONDALE, IL 62901

618/453-4334
 FAX: 618/453-7305
 FAO@SIU.EDU
 FAO.SIU.EDU

This form is for the collection of DHS or other U.S. citizenship/nationality documents from students unable to present their documents in person.

I certify that I, _____, am the individual
 (Print student's full name)

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 OF VALID PHOTO ID</u>	<u>ISSUING AUTHORITY OF VALID PHOTO ID</u>

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

 (Signature of Student) (Dawg Tag Number)

 Date

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
 (Date) (Notary's name)

personally appeared, _____, and provided to me
 (Printed name of signer)

on basis of satisfactory evidence of identification _____
 (Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal
 (seal)

 (Notary signature)

My commission expires on _____
 (Date)