

St. John's University Office of Student Financial Services

U.S. Citizenship Status Form

Student Name:	ID Number X:		
Student Contact Number:	Alternate/Cell Number:		
Please present the requested documentation to	St. John's University		
	Bent Hall Student Financial Services Center		

As part of the federal financial aid verification process you have been selected by the federal government to confirm your citizenship status. You are requested to appear in person at the University and present valid, original citizenship documentation.

8000 Utopia Parkway Queens, NY 11439

Please note that your eligibility for receipt of U.S. Federally funded student aid is based on confirmation by the U.S. Citizen and Immigration Services (USCIS) or Department of Homeland Security (DHS) of your Citizenship Status.

PLEASE SEE BELOW FOR ACCEPTABLE DOCUMENTATION TO VALIDATE CITIZENSHIP STATUS:

- US Birth Certificate
- US Passport
- US Naturalization Certificate
- Other original citizenship documentation

If you are unable to appear in person please submit the accompanying form notarized, signed and dated along with a clear copy of the documentation to:

St. John's University 8000 Utopia Parkway Queens, NY 11439 Attn. Office of Student Financial Services



St. John's University Office of Student Financial Services

Certification of True, Exact, and Complete Copy of the Original Documents

Student's Last Name	Student's First Nar	ne	Student	lent's St. John's X ID Number		
Student's Home Phone Nu	ent's Home Phone Number (include area code)		Student's Alternate or Cell Phone Number			
This form is for the collection students unable to property A student who is unable to citizenship documentation.	esent their documents in appear at the University	perso	on. complete this fo	orm AND submit clear o	copies of original	
I certify that I,		, am the individual signing this statement, and I am				
providing a copy of my doc portrait (or likeness).	rint student's full name) uments along with a cop	y of a	valid governme	nt-issued photo identific	cation card bearing my	
I certify that the attached do of the originals issued to m		ent issu	ued photo identi	fication are the true, ex	act, and complete copies	
List of document(s):						
NAME OF VALIE	PHOTO ID	EXPIRATION DATE OF VALID PHOTO ID		ISSUING AUTHORITY OF VALID PHOTO ID		
			EXPIRAT	XPIRATION DATE (IF ANY) OF CITIZENSHIP AND/OR		
DOCU	MENT(S)			IMMIGRATION DO	CUMENT(S)	
I understand that providing make me liable for repayme						
Student's Signature	St	Student's X ID Number			Date	
*Sign in the presence of a	notary public				Seal/Stamp	
WITNESS my hand and offic				-	_	
	(Notary'	s Sigr	nature)	(Date)		

Please return this form to:

St. John's University
Office of Student Financial Services
8000 Utopia Parkway
Queens, NY 11439