

St. John's University Office of Student Financial Services Eligible Non-Citizen Status Form

Student Name:		ne:	ID Number X				
Student Contact Number:		tact Number:	Alternate/Cell Number:				
<u>Please</u>	pres	ent the requested documentation to::	St. John's University Bent Hall Student Financial 8000 Utopia Parkway Queens, NY 11439	Services	Center		
status. ` Please Immigra	You ar note th ation S	federal financial aid verification process you have re requested to appear in person at the Universinat your eligibility for receipt of U.S. Federally fur services (USCIS) or Department of Homeland Se ent Name)	sity and present valid, original citiz inded student aid is based on cont ecurity (DHS) of your Eligible Non	enship doo firmation b -Citizensh	cumentation. by the U.S. Citizen and lip Status.	р	
on (Da	te of I	ent Name) Birth)/ have resided	in the United States since	/	/		
	Ple	ase check the status below that app	lies to you and attach app	ropriate	documentation.		
1. 🗆	U.S. year:	National - Attach a copy of your Naturalization s).	Papers or United States Passport	t (Passport	t must be valid for at least	five	
	-OR-						
		port of Birth Abroad (Form FS-240). The form rica" and "State Department".	n must bear an embossed seal inc	luding the	words "United States of		
2. 🗆	U.S.	Permanent Resident (Check the type of perma	anent resident status you hold and	d attach ap	opropriate proof to this forn	n):	
		Permanent Resident or Resident Alien card (Form	I-551 or I-151) Attach a copy of both	sides.			
		Conditional permanent resident with a Conditional G	Freen Card (I- 551C) <u>Attach a copy</u> of I	ooth sides.		p five n): of <u>h a</u> on	
		A passport stamped Processed for I-551. "Tempol stamped page as well as Biographic page .	rary Evidence of Lawful Admission for	Permanent	t Residence." <u>Attach a copy</u> c	of	
		An un-expired Arrival/Departure Record (Form I- copy.	94) with stamp indicating admission fo	r permanen	nt residence in the U.S. Attact	<u>h a</u>	
3. 🗆	Othe Form	er Eligible Non-Citizen, and living in the U.S. for n I-94 . (Those granted Asylum/Refugee, Parole	other than a temporary purpose w Status, or Cuban-Haitian Entrant)	ith the follo	owing Immigration status c copy.	on	
4. 🗆		fication Letter or Eligibility Letter from the U.S. I Trafficking Victims Protection Act of 2000. T-Visa		Services ((HHS) under Section 107(b	o) of	
5. 🗆	Othe	r					
STUDE	ENT'S	SIGNATURE:	DA	TE:			
If you o		able to appear in person please submit the	accompanying form notorized	Leigned	and dated along with a		

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



Student's Last Name

Student's First Name

Student's St. John's X ID Number

Student's Home Phone Number (include area code)

Student's Alternate or Cell Phone Number

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.

A student who is unable to appear at the University must complete this form **AND** submit clear copies of original citizenship documentation. The University may be required to forward the documentation collected to DHS for secondary confirmation.

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

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):

NAME OF VALID PHOTO ID	EXPIRATION DATE OF VALID PHOTO ID	ISSUING AUTHORITY OF VALID PHOTO ID

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

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 have provided.

Student's Signature	Student's X ID Number		Date	
*Sign in the presence of a notary public				Seal/Stamp
WITNESS my hand and official seal				
	(Notary's Signature)	(Date)		
	Please return this form to:			
	St. John's University			
	Office of Student Financial Services			
	8000 Utopia Parkway			
	Queens, NY 11439			