

**Certification of DHS or other**

**U.S. Citizenship/Nationality Documents**

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

This form is for the collection of DHS or other U.S. citizenship/nationality documents from students unable to present their documents in person. **Please sign in the presence of a notary public and provide a copy of front and back of the valid government-issued unexpired ID that was verified by the notary below.**

**A: STUDENT INFORMATION**

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

Type of Valid Photo ID:	Exp. Date of Valid Photo ID:	Issuing Authority of Valid Photo ID:
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Name of Citizenship and/or Immigration Document(s)	Exp. Date (if any) of Citizenship and/or 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.

**\*Sign in the presence of a notary public**

Student Signature:	ctcLink # :	Date:
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**B: NOTARY’S CERTIFICATE OF ACKNOWLEDGMENT**

Only applicable if student is not able to appear in person with government issued ID to Financial Aid Office.

State of \_\_\_\_\_, City/County of \_\_\_\_\_ on \_\_\_\_\_ (date), before me, \_\_\_\_\_ (notary’s 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) to be the above-named person who signed the foregoing instrument.

**WITNESS my hand and official seal** \_\_\_\_\_  
*notary signature*

**My commission expires on** \_\_\_\_\_  
*date*



**Financial Aid Office | 16101 Greenwood Avenue North, Shoreline WA 98133 | Email: [financialaid@shoreline.edu](mailto:financialaid@shoreline.edu)**

Shoreline College is committed to nondiscrimination and to providing access and reasonable accommodation in its services, programs, and activities for individuals with disabilities. To request disability accommodation contact Student Accessibility Services, at least ten days in advance at: 206.546.4545, or e-mail at [sas@shoreline.edu](mailto:sas@shoreline.edu).