

This form must be completed entirely and notarized. Any applicable attachments must be included as indicated below.

## **CITIZENSHIP AFFIDAVIT**

Affidavit of: \_\_\_\_\_  
(Applicant Name- First, Middle, Last)

STATE OF: \_\_\_\_\_

COUNTY OF: \_\_\_\_\_

\_\_\_\_\_, of lawful age, being duly sworn, upon oath, states,  
under penalty of perjury, as follows: *(PLEASE SELECT ONE OF THE FOLLOWING)*

\_\_\_\_\_ **I am a United States Citizen**

\_\_\_\_\_ **I am a qualified alien under Federal Immigration and Naturalization Act, and I am lawfully present in the United States. (SEE BELOW)**

Subscribed and sworn to or affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

By: \_\_\_\_\_  
Notary Name (printed)

Notary Signature: \_\_\_\_\_ (NOTARY SEAL)

My Commission Expires: \_\_\_\_\_

### **IF QUALIFIED ALIEN STATUS INDICATED, PLEASE COMPLETE THE FOLLOWING:**

ALIEN REGISTRATION NUMBER: \_\_\_\_\_

COUNTRY OF ORIGIN: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

U.S. SOCIAL SECURITY NUMBER: \_\_\_\_\_

**\*APPLICATION MUST BE ACCOMPANIED BY A COPY OF FRONT AND BACK OF THE FEDERAL DOCUMENT THAT AUTHORIZES APPLICANT TO WORK IN THE UNITED STATES. STUDENTS NOT GAINFULLY EMPLOYED MUST ATTACH A COPY OF I-94 OR I-20, WHICHEVER IS APPLICABLE. ALL COPIES MUST BE LEGIBLE.**