AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Instructions for Required Affidavit:

All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma State Board of Licensed Social Workers are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Board with verification of lawful presence in the United States by executing one of the Affidavits below before a notary public or other officer authorized to notarize affidavits under State law.

Option 1 - Verification of Citizenship

Affidavit of

_____
[Applicant's Name] – Please Print

STATE OF)
) ss:
COUNTY OF _____)

_____, of lawful age, being first duly sworn, upon
[Applicant's Name] – Please Print

oath states, under penalty of perjury, as follows:

I am a United States Citizen. _____
[Signature of Applicant]

Subscribed and sworn to or affirmed before me this _____ day of _____, 20___, by _____.
[Applicant]

_____
NOTARY

My Commission Expires: _____ Commission Number:_____

(Seal)

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Instructions for Required Affidavit:

All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma State Board of Licensed Social Workers are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Board with verification of lawful presence in the United States by executing one of the Affidavits below before a notary public or other officer authorized to notarize affidavits under State law.

Option 2 - Affidavit Verifying Qualified Alien Status

Affidavit of

_____
[Applicant's Name] – Please Print

STATE OF)
) ss:
COUNTY OF _____)

_____, of lawful age, being first duly sworn, upon
[Applicant's Name] – Please Print

oath states, under penalty of perjury, as follows:

I am a qualified alien under the federal Immigration and Naturalization Act and I am lawfully present in the United States.

_____
[Signature of Applicant]

Subscribed and sworn to or affirmed before me this _____ day of _____, 20___, by _____.
[Applicant]

_____
NOTARY

My Commission Expires: _____ Commission Number:_____

(Seal)