2025-2026 Citizenship Documentation Affidavit (Notary)



Complete Form & Return via:

Mail: Financial Aid Office
9201 University City Blvd. Charlotte, NC 28223
On Campus: Niner Central, 380 Cone Center

This form is for the collection of Department of Homeland Security (DHS) or other U.S. citizen/eligible noncitizen documents from students unable to present their documents in person. Student must be in the presence of a notary with an unexpired, valid United States government-issued photo identification (driver's license, state identification card, or passport) to sign the statement below. The Office of Financial Aid will also need a copy of the photo identification presented to the notary.

| (Last Name) | (First Name) | (Student ID) |
|--|---|--|
| I certify that I, | (Print student's full name) | , am the individual signing this statement, and I ar |
| | tached documents and US government issu | e-issued photo identification card bearing my portrainued photo identification are the true, exact, and |
| Required document(s): | | |
| NAME OF VALID PHOTO ID | EXPIRATION DATE OF VALID PHOTO ID | ISSUING AUTHORITY OF VALID PHOTO ID |
| NAME OF CITIZENSHIP AND | D/OR IMMIGRATION DOCUMENT(S) | EVDIDATION DATE (IF ANV) |
| NAIVIE OF CITIZENSHIP AN | D/OK IMMINIGRATION DOCUMENT(3) | EXPIRATION DATE (IF ANY) |
| meet either of these criteria I winderstand that providing false | Il be required to present my original citizer | rth Carolina at Charlotte's main campus. If I do not a high properties in the commentation and the comments I have provided. |
| Student signature | | Date |
| Notary's Certificate of Ackno | wledgement | |
| State of | City/County of | on, |
| Before me, | , personally appea | |
| (Notary's name and provided to me on the basis | of satisfactory evidence of identification _ | (Printed name of signer) to be the expired government-issued photo ID provided) |
| above-named person who signe | d the foregoing instrument. | |
| WITNESS my hand and official se | eal | |
| My commission expires on | (Notary signat | cure) |
| (Date) | | (seal) |