

## Citizenship or Eligible Non-Citizenship Affidavit

## To Be Signed in the Presence of a Notary Certification of True, Exact, and Complete Copy of the Original Documents

		this statement, and I am providing a copy of	
		identification card bearing my portrait (or likenes cation are the true, exact, and complete copies or	
TYPE OF VALID PHOTO ID	EXPIRATION DATE OF VALID PHOTO ID	ISSUING AUTHORITY OF VALID PHOTO ID	
(Attach a copy of the photo ID)			
NAME OF CITIZENSHIP A AND/OR ELIGIBLE NON-CIT		EXPIRATION DATE (IF ANY) OF DOCUMENT	
(Attach a copy of the Citizenship/Immi			
IMPORTANT: This stater	nent must be completed and sig	gned in the presence of a Notary Public.	
DO I	NOT COMPLETE THE FORM		
I certify that the information submitted	is true and correct to the best of my ments is punishable by fine or impr	M IN ADVANCE.  knowledge and belief. I understand that providing isonment and may make me liable for repayment of	
I certify that the information submitted false or misleading information or docu any funds received on the basis of the in	is true and correct to the best of my ments is punishable by fine or imprinformation and documents I have presented.	M IN ADVANCE.  knowledge and belief. I understand that providing isonment and may make me liable for repayment of	
I certify that the information submitted false or misleading information or docu any funds received on the basis of the in	is true and correct to the best of my ments is punishable by fine or imprinformation and documents I have presented.	knowledge and belief. I understand that providing isonment and may make me liable for repayment crovided.	
I certify that the information submitted false or misleading information or docu any funds received on the basis of the in Student Signature:  To be completed by Notary Public:	is true and correct to the best of my ments is punishable by fine or imprenformation and documents I have precedent the property of the proper	knowledge and belief. I understand that providing isonment and may make me liable for repayment covided.  PSU ID#:  on	
I certify that the information submitted false or misleading information or docu any funds received on the basis of the in Student Signature:  To be completed by Notary Public:  State of	is true and correct to the best of my ments is punishable by fine or improformation and documents I have put Date City/County of personally appeared,	knowledge and belief. I understand that providing isonment and may make me liable for repayment covided.  PSU ID#:  On  (Date)	
I certify that the information submitted false or misleading information or docu any funds received on the basis of the in Student Signature:  To be completed by Notary Public:  State of	is true and correct to the best of my ments is punishable by fine or improformation and documents I have put Date City/County of personally appeared,	knowledge and belief. I understand that providing isonment and may make me liable for repayment covided.  PSU ID#:  On  (Date)	
I certify that the information submitted false or misleading information or docu any funds received on the basis of the in Student Signature:  To be completed by Notary Public:  State of	is true and correct to the best of my ments is punishable by fine or improformation and documents I have proformation and documents I have pro	knowledge and belief. I understand that providing isonment and may make me liable for repayment covided.  PSU ID#:  On  (Date)	
I certify that the information submitted false or misleading information or docu any funds received on the basis of the in Student Signature:  To be completed by Notary Public:  State of	is true and correct to the best of my ments is punishable by fine or improformation and documents I have proformation and documents I have pro	knowledge and belief. I understand that providing isonment and may make me liable for repayment covided.  PSU ID#:  On  (Date)	
I certify that the information submitted false or misleading information or document any funds received on the basis of the instance of the instance of the instance of the completed by Notary Public:  State of	is true and correct to the best of my ments is punishable by fine or improformation and documents I have pure	knowledge and belief. I understand that providing isonment and may make me liable for repayment covided.  PSU ID#:  On  (Date)	

Phone 877-846-5755 - Fax 603-535-2627 - finaid@plymouth.edu - go.plymouth.edu/aid