

**Financial Aid Office, Health Sciences Campus**

Building 120, Room 210 2160 South First Avenue

Maywood, IL 60153 Phone: 708.216.3227

Scan completed form and upload to <https://forms.luc.edu/faupload>



*Preparing people to lead extraordinary lives*

**2020–2021 Citizenship Certification**

<b>Student Name:</b> _____ (Please print)	<b>Loyola ID:</b> _____ (Your 11-digit Loyola ID number begins 0000)
----------------------------------------------	-------------------------------------------------------------------------

The Financial Aid Office must verify your Citizenship status in order for you to be eligible for Federal and/or State aid. The status you indicated on your FAFSA application did not match data listed with the Department of Homeland Security and/or the Social Security Administration.

I certify that I, \_\_\_\_\_, am the individual signing this statement,  
(Print Student’s full name)

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.

List of document(s):

Name of Valid Photo ID	Expiration Date of Valid Photo ID	Issuing Authority of Valid Photo ID

Name of Citizenship and/or Immigration Document(s)	Expiration 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.

\_\_\_\_\_  
Student Signature                      Date

SWORN TO AND SUBSCRIBED BEFORE ME  
THIS \_\_\_\_\_ DAY OF 20\_\_\_\_\_

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

\_\_\_\_\_  
NOTARY PUBLIC (SIGNATURE)  
MY COMMISSION EXPIRES \_\_\_\_\_

**HSD CI/CZ 2021**

*Last Updated 5/5/2020*

**NOTARY STAMP**