

W&M FINANCIAL AID

Original Citizenship Document Affidavit

Name: W&M Student ID #:

If You Are Able To Bring These Documents in Person to Our Office, Do NOT Complete This Form

I certify that I, _____, am the individual signing this statement, and that I am providing a **clear and legible 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.

* We must be able to read the documents, and see facial features. Either a clear black and white copy or color copy is acceptable.

List of Documents:

Name of Valid Photo Identification Document	Expiration Date of valid Photo Identification Document	Issuing Authority of Valid Photo Identification Document

Name of Citizenship and/or Immigration Documents	Expiration Date (If Any) of Citizenship and/ or Immigration Document(s)

STOP: Do not fill out the remainder of this document until you are in the presence of a Notary Public. Take your original citizenship documents, legible copies of your documents, your identification, and this form with you to the Notary Public. They must witness your signature, original documents, and the copies of your documents in person.

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.

Federal regulations (34 CFR, Part 668, subpart C) allows us to ask you for this information before awarding Federal aid, and also allows for photocopies to be submitted for review.

Student Signature _____ Date _____

Notary's Certificate of Acknowledgement

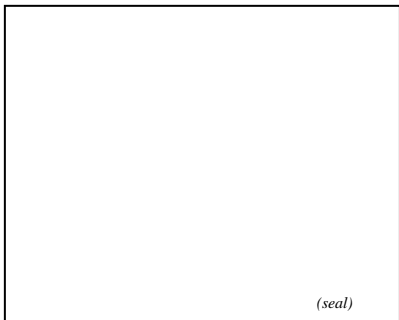
State of _____ City/County of _____

On _____, before me, _____, _____
(Date) (Notary's name) (Printed name of signer)

personally appeared and provided to me on basis of satisfactory evidence of identification _____
(Type of government-issued photo provided)

to be the above-named person who signed this document and these documents they have shown are true, exact and complete copies of the original documents.

WITNESS my hand and official seal



(Notary signature)

Registration # _____

My commission expires on _____
(Date)

Please return **both** a clear copy of the ID mentioned above and witnessed and this notarized form **by mail or secure dropbox upload** - if the notary seal is embossed, the document **must** be mailed to our office. **(we cannot accept faxed or emailed copies)**

USPS Address: Financial Aid, William & Mary, P.O. Box 8795, Williamsburg VA 23187-9795.

Physical Address for UPS/DHL/FEDEX: W & M Financial Aid, Blow Hall Room 124, 262 Richmond Road, Williamsburg VA 23185

Secure Dropbox: www.wm.edu/financialaid/box