## **Student Citizenship Information**

Your 2023-2024 FAFSA was selected for review in a process called "Verificati	on." In this process, the financial aid	
office will compare the information reported on your FAFSA with the information	on on this form and any other required	
documentation. The law states that we have the right to ask for confirmation o	f this information before awarding	
federal student aid. You, whose information was reported on the FAFSA, must		
documentation, and submit the completed package to the LCC Financial Aid C		
the information reported on your FAFSA and the documents submitted to our of	office, we will make the necessary	
corrections. We retain the right to request additional information as needed to		
questions about the verification process, contact the Financial Aid Office as soon as possible to avoid a delay in		
processing your request for financial aid.		
**Your eligibility for financial aid cannot be determined until the verification process is complete.**		
Student Name: LCC ID#/Las	st Four of SSN#:	

Address:	_ City:	State:	Zip:

## To receive federal student financial aid, you must be a United States Citizen or Eligible Noncitizen.

- □ I am a U S citizen who was born in the United States. I am enclosing a copy of my birth certificate.
- □ I am a U S citizen who was born outside the United States. I am enclosing my
  - □ Certificate of Citizenship
  - □ Certificate of Naturalization
  - Certificate of Birth Abroad (Form FS-545, DS-1350, or FS-240)
  - U S Passport

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- □ I am an eligible noncitizen and I am enclosing a copy of my Alien Registration Card (*I*-151,*I*-551, or *I*-551C).
  - My Alien Registration Number is: \_\_\_\_
- □ I am enclosing a copy of my Arrival-Departure Record (I-94) from the Department of Homeland Security showing that I am:
  - □ Refugee
  - □ Granted Asylum
  - □ Parolee (I-94 confirms paroled for a minimum of 1 year and status has not expired includes Indefinite Parole, Humanitarian Parole)
  - □ Cuban-Haitian Entrant

## **Certification:**

I certify that the submitted information is accurate to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form.

WARNING: If you purposefully give false or misleading information on this form, you may be fined, sentenced to jail, or both.

**Student Signature** 

Date