

Office of Student Financial Aid Division of Academic Affairs

Boca Raton Campus 777 Glades Road, SU 80, Room 233 Boca Raton, FL 33431 tel: 561.297.3530 www.fau.edu/finaid

CERTIFICATION OF TRUE, EXACT, AND COMPLETE COPY OF THE ORIGINAL DOCUMENTS

This form is for the collection of DHS or other U.S. citizenship/nationality documents from students unable to present their documents in person to Florida Atlantic University's Office of Student Financial Aid.

I certify that I,	, am the individual
(Print student's full name)	
signing this statement, and I am providing valid government-issued photo identificati	a copy of my documents along with a copy of a on card bearing my portrait (or likeness).
I certify that the attached documents and true, exact, and complete copies of the ori	government issued photo identification are the ginals 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)
• •	ding information or documents is punishable by able for repayment of any funds received on the have provided.
Student's Signature	Student's Z Number
Date	
*Sign in the presence of a notary public	