UNIVERSITY OF ILLINOIS AT CHICAGO - Office of Student Financial Aid

1200 W. Harrison St., M/C 334 - Chicago, IL 60607-7163 - Phone: (312) 996-3126 **College of Medicine**: 808 S. Wood Street, M/C 782 -- Chicago, Illinois 60612-7301 -- Phone: (312) 413-0127

2017-2018 DHS Secondary Confirmation of Citizenship Form

Section A – Student Information (Please print clearly)

Last Name	First Name	M.I.	Email
Street Address	City	State	Zip Code
2. Please submit all do	worksheet. You must answer all cuments at the same time.	the questions and the form	n must be <u>SIGNED</u> .
Section B – DHS Citizen Confirmation In order to continue processing your financial aid application, the U.S. Department of Education requires that we verify your			
citizenship status. Com require that financial a	plete this worksheet and provide	the requested documentat ments and make copies.	tion as outlined. The federal regulations Therefore, the documents below must
U.S. Citizenship Docum	nentation_		
 A copy of your U.S. Birth Certificate, U.S. passport or U.S. passport card. A copy of your Consular Report of Birth Abroad (FS-240), your Certificate of Birth Foreign Service (FS-545), or your Certification of Report of Birth (DS-1350). 			
A copy of your Certificate of Citizenship (N-560 or N-561) or your Certificate of Naturalization (N-550 or N-570) issued by USCIS.			
Eligible Non-Citizen Do		(1.454) D	VD
Original, unexpired, Alien Registration Receipt Card (I-151), Resident Alien Card/Permanent Resident Card (I-551), or conditional Resident Alien Card (I-551, I-94 or I-94A).			
Original Arrival/Departure Record (I-94) or Departure Record (I-94A) with the endorsement "Processed for I-551" and			
having a valid expiration date and appropriate information filled in. Original, unexpired foreign passport with I-551 endorsement.			
☐ Original documenta	•	gnated as a Refugee, Asyl	um Granted, Parolee or Cuban-Haitian
	king or Battered Immigrant-Qualif		
 □ A copy of your eligibility letter from Health and Human Services (HHS) or a T-visa. □ A copy of your 1-797, Notice of Action form from USCIS, with a valid expiration date verifying financial aid eligibility. 			
Section C – Student Signature			
1. Clea	this form to the Office of Student rly print UIN on every page. Ide all appropriate signatures.	Financial Aid. When subm	itting documentation:
I certify that the informa	tion provided with this form and a	ny attachments are true ar	nd correct.
Student Signature		Date	
ENTER YOUR 9-DI	GIT UIN -		
1718 DHS	2-E N		