

2025-26 Proof of Citizenship / Eligible Noncitizens

Your FAFSA indicated that your citizenship or eligible noncitizen status is not confirmed with the Social Security Administration or the Department of Homeland Security. Please submit proof confirming your status.

SECTION A: STUDENT INFORMATION					
Name:	Stude	Student ID Number:			
Address:	City:	State:	Zip:		
Primary Phone:					
SECTION B: REQUIRED DOCUMENTS Check the status that applies to you a	and submit documents via c	option 1 or 2.			
☐ I am a U.S. Citizen. Submit ONE of t ☐ U.S. Birth Certificate ☐ U.S. Passport ☐ U.S. Passport Card ☐ Certificate of Naturalization/Citiz					
☐ I am an eligible non-citizen. Submit ☐ U.S. Permanent Resident Card/Re ☐ Arrival/Departure Record (I-94) f ☐ Refugee ☐ Asylum Granted ☐ T-visa issued to student or T-1 visa	esident Alien Card From USCIS showing any one	e of the following desigr	nations:		
Important Information: Students who Action for Childhood Arrivals (DACA), immigration documents, are not eligib scholarships or other funding opportu	Temporary Protected Statu le for federal student aid. Yo	s (TPS) or those waiting ou may still be able to ap	for final		
SECTION C: CERTIFICATION STATEMOPTION 1: PRESENT DOCUMENTS TO		N PERSON (To be signed	l at Clark State)		
By signing and dating this worksheet, reported on this form is completed and		dent and (2) all of the in	formation		
Student Signature:		Date:			
	OFFICE USE ONLY				
Print FA Staff Name:					
Type of Document(s) Collected:		Exp. Date if Any	/:		
Date:					

OPTION 2: PRESENT DOCUMENTS TO A NOTARY

(To be signed with a Notary Public Official and sent to the Clark State Financial Aid Office)

If you are unable to appear in person at Clark State to provide proof of US citizenship or eligible non-citizenship status, you must present your original documents to a Notary Public Official.

DOCUMENT PROVIDED (To be completed by Notary Public Official)

DOCUMENT TYPE	EXPIRATION DATE (IF ANY)		
Notary's Certificate of Acknowledgement:			
State of			
City/County of			
On,		, pers	onally appeared,
(Date)	(Student's Name)		
and provided			
	(Document Type)		
WITNESS my hand and official seal:			
(Seal)			
Notary' Phone Number:			
	M	y commission expires on _	
(Notary Signature)			(Date)

MAIL NOTARIZED FORM TO:

Clark State College, Financial Aid Office 570 E. Leffel Lane, Springfield, Ohio 45505 financialaid@clarkstate.edu • 937-328-6034