

Name of Financial Aid Applicant (print clearly):

## Financial Aid & Scholarship Department

Bayramian Hall, Student Services Center 18111 Nordhoff Street Northridge, CA 91330-8307 (818) 677-4085 www.csun.edu/financialaid

Student ID Number \_\_\_\_\_

## Confirmation of Eligible Noncitizen Status 2022-2023 Academic Year

Last Name	First Name	Middle Initial
the citizenship status on file with the	on your Free Application for Federal St he United States Citizenship and Immigra equired to confirm you are in an eligible	ation Services (USCIS). The Financial
waived the requirement for you to upload, or mail a copy of the docur of your U.S. Resident card, form I-	ancing, virtual services, and to safeguard present your original citizenship documement to the Financial Aid & Scholarship -551 or form I-94. You must submit an uthe date must be after the start of the Fal	ent in person. You have the option to Department. You can submit a copy mexpired copy. If there is an
	p and Immigration Services Department pose of applying for Financial Aid is allo	
	CUMENTS BY MAIL. THE FINANCE RESPONSIBLE FOR ANY IMMIGI E LOST OR STOLEN.	
I certify that I am providing a true documentation.	e, exact, and complete copy of my origin	nal immigration status
Student's Signature:		Date: