## **Suffolk University**

• Office of Student Financial Services • 73 Tremont Street • Boston, MA 02108 617-573-8470 • 617-720-3579 (fax)

## 2026-2027 Eligible Non-Citizen Affidavit

## Certification of True, Exact and Complete Copy of the Original Documents

According to your 2026-2027 FAFSA, you are required to submit proof that you are an Eligible Non-Citizen to the Office of Student Financial Services.

This form is for the collection person.	n of DHS documents	from student	s unable to present th	eir documents in
I certify that I, signing this statement, and I government-issued photo ide	am providing a copy of	of my docum		
I certify that the attached doc complete copies of the origin		ent issued ph	noto identification are	the true, exact, and
Please indicate the document of I-94 from USCIS)	ts you are submitting.	(For exampl	e, copy of Alien Regi	istration Card or copy
NAME OF VALID PHOTO ID	EXPIRATION DATE OF VALID PHOTO ID		ISSUING AUTH VALID PHO	
NAME OF IMMICDATION	ON	EVDIDAT		V)
NAME OF IMMIGRATION DOCUMENT(S)		EXPIRATION DATE (IF ANY) IMMIGRATION DOCUMENT(S)		
I understand that providing fairners and may make			*	•
documents I have provided.  Please sign below and attacyou submit this form.	ch copies of your valid	d photo ID	and your Immigration	on documents when
Student's Signature		ıdent's UI	<b>D Number</b>	Date

A "wet signature" is required, electronic signature will not be accepted.