

## Office of Financial Aid and Student Employment

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This form is for the collection of DH documents in person. <b>Submit this</b>			cuments from students unable to present the il or in person.	∍ir
I certify that I,(Print student's fu	, am the individuall name)	dual signing thi	s statement, and I am providing a copy of m	ıy
documents along with a copy of a v	valid government-issued ph	noto identification	on card bearing my portrait (or likeness).	
I certify that the attached document originals issued to me.	ts and government issued	photo identifica	ation are the true, exact, and complete copie	s of the
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 Documents		Expiration Date (If Any) Of Citizenship And/Or Immigration Document(s)		
I understand that providing false or me liable for repayment of any fund			ounishable by fine or imprisonment and may and documents I have provided.	/ make
Student's Signature (ink signature	required) Studen	t's ID Number		
Date				
Notary Public (stamp to the right)				
Commission expiration date				
Date				