

**PROOF OF CITIZENSHIP
OR
LAWFUL PERMANENT RESIDENCY
AMERICORPS *VISTA**

Name: Last	First	Middle Initial	Maiden Name
Address (Street Name & Number)			Apt #
Date of Birth			
City	State	Zip Code	Social Security #

<p>I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.</p>	<p>I attest, under penalty of perjury, that I am (check one of the following)</p> <p><input type="checkbox"/> A Citizen of the United States</p> <p><input type="checkbox"/> A Lawful Permanent Resident</p> <p style="margin-left: 40px;">Alien # _____</p>
Signature	Date (M/D/YY)

VERIFICATION: To be completed by Corporation staff. Examine one document from List A or one document from List B and one document from List C as listed in the instructions and record title, number and expiration date of the documents.

List A	or	List B	and	List C
Document title: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any) _____		_____		_____

CERTIFICATION: I attest that I have examined the document(s) presented by the above-named member, that the above-listed documents appear to be genuine, and that to the best of my knowledge the member is eligible to serve in AmeriCorps*VISTA.

Signature of CNCS Staff Person:	Print Name:	Date:
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