

**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 Number

<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>
Signature	Date (M/D/YY)

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

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

CERTIFICATION: I certify that I have examined the document(s) regarding citizenship or residency presented by the above-named VISTA candidate.*

Signature of CNCS Staff Person or Sponsor:	Print Name:	Date:
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PROJECT NAME: _____

***NOTE TO STAFF OR SPONSOR :** Sign the certification above only if sufficient documentation is presented. **Send copies of documentation if Sponsor does not sign.**
