Todd County Housing & Redevelopment Authority

300 Linden Ave S Browerville MN 56438 Phone 320-594-6388, toddcountyhra@yahoo.com

Declaration of US Citizenship or Eligible Immigration Status

Name:							Social	Security Number:		Birth date:			
of. Ho	, housin	g assis	stan	ce m	ust b	e law	fully with	in the US. Please re	ead the Declarati	ion State	ment carefully and	icant for, or recipient sign and return to the mmigration expert of	
Head of Household (HH)								my knowledge, I a		certify, under penalty of perjury 1/, that, to fully within the United States because (please check the s with member #):			
Additional Adult (AA) Other Family Members:							I, certify, under penalty of perjury 1/, that the best of my knowledge, I am lawfully within the United States because (please check appropriate box below that corresponds with member #):						
1							2			_			
1.	First, Middle Initial, Last					t.	3.	First, Middle Initi	al. Last	5	First, Middle II	itial. Last	
_	1 1150, 11110010 111111111, 2050												
2.	First, Middle Initial, Last						4.	First, Middle	Initial, Last	6	First, Middle I	nitial, Last	
[Head	AA	1	2 3	3 4	5 6	(Checl	k appropriate box	below for each	each household member as listed above)			
		I am a citizen by birth or naturalized citizen or a national of the United States; or								d States; or			
						I have eligible immigration status and I am 62 years of age or older. Attach evidence of proof of age 2/; or							
-							I have eligible immigration status as checked below (see reverse side of form for explanations). Attach INS document(s) evidencing eligible immigration status and signed verification consent form.						
							Immigration status under §§101(a)(15) or 101(a)(20) of the Immigration and						
-							Nationality Act (INA) 3/; or						
ŀ							Permanent residence under §249 of INA 4/; or Refugee, asylum, or conditional entry status under §§207, 208, or 203 of the INA 5/; or						
ŀ							Parole status under §212(d)(5) of the INA 6/; or						
ŀ						Threat to life or freedom under \$243(h) of the INA 7/; or							
								ty under §§245A o			,		
-		•		•	•		•						
Signature of Head of Household								Date	Additi	onal Adu	Date		
	Ch	neck if	sig	natuı	e is o	of adu	lt residing	in the unit who is	responsible for c	child nam	ned on statement ab	oove.	
Н	A: Ente	r INS/	/SA	VE F	rima	ry Ve	rification	#	Da	ate:			
							See	Reverse Side for for	ootnotes and inst	ructions.			

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1/ Warning: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than \$10,000, imprisoned for not more than five years, or both.

The following footnotes pertain to non-citizens who declare eligible immigration status in one of the following categories:

- 2/ **Eligible immigration status and 62 years of age or older**. For non-citizens who are 62 years of age or older or who will be 62 years of age or older and receiving assistance under a Section 214 covered program on June 19, 1995. If you are eligible and elect to select this category, you must include a document providing evidence of proof of age. No further documentation of eligible immigration status is required.
- Immigrant status under §§101(a)(15) of 101 (a)(20) of INA. A non citizen lawfully admitted for permanent residence, as defined by §101(a)(20) of the Immigration and Nationality Act (INA), as an immigrant, as defined by §101(a)(15) of the INA (8 U.S.C. 1101(a)(20) and 1101(a)(15), respectively [immigrant status]. This category includes a non citizen admitted under §§210 or 210A of the INA (8 U.S.C. 11160 or 1161), [special agricultural worker status], who has been granted lawful temporary resident status.
- Permanent residence under §249 of INA. A non-citizen who entered the U.S. before January 1, 1972, or such later date as enacted by law, and has continuously maintained residence in the U.S. since then, and who is not ineligible for citizenship, but who is deemed to be lawfully admitted for permanent residence as a result of an exercise of discretion by the Attorney General under §249 of the INA (8 U.S.C. 1259) [amnesty granted under INA 249].
- Refugee, asylum, or conditional entry status under §207, 208 or 203 of INA. A non-citizen who is lawfully present in the U.S. pursuant to an admission under §207 of the INA (8 U.S.C. 1157) [refugee status]; pursuant to the granting of asylum (which has not been terminated) under §208 of the INA (8 U.S.C. 1158) [asylum status]; or as a result of being granted conditional entry under §203(a)(7) of the INA (U.S.C. 1153(a)(7) before April 1, 1980, because of persecution or fear of persecution on account of race, religion, or political opinion or because of being uprooted by catastrophic national calamity [conditional entry status].
- Parole status under §212(d)(5) of INA. A non-citizen who is lawfully present in the U.S. as a result of an exercise of discretion by the Attorney General for emergent reasons or reasons deemed strictly in the public interest under §212(d)(5) of the INA (8 U.S.C. 1182 (d)(5)) [parole status].
- 7/ **Threat to life or freedom under §243(h) of INA.** A non-citizen who is lawfully present in the U.S. as a result of the Attorney General's withholding deportation under §243(h) of the INA (8 U.S.C. 1253(h)) [threat to life or freedom].
- 8/ **Amnesty under §245A of INA.** A non-citizen lawfully admitted for temporary or permanent residence under §245A of the INA (8 U.S.C. 1255a) [amnesty granted under INA 245A].

Instructions to Housing Authority: Following verification of status claimed by persons declaring eligible immigration status (other than for non-citizens age 62 or older and receiving assistance on June 19, 1995, HA must enter INS/SAVE Verification Number and date that it was obtained. A HA signature is not required.

Instructions To Family Member For Completing Form: On opposite page, print or type first name, middle initial(s), and last name. Place an "X" in the appropriate boxes. Sign and date at bottom of page. Place and "X" in the box below the signature of the signature is by the adult residing in the unit who is responsible for Child.