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Name (Last Name, First Name Middle Name)

Birthdate

Term

PLEASE INDICATE YOUR CITIZENSHIP STATUS BELOW AND COMPLETE ANY REQUESTED INFORMATION.

U.S. citizen

Permanent resident

Country of citizenship: _____

Alien registration no.: _____ Date of issue: _____

Nonimmigrant on temporary status

Country of citizenship: _____

Type of visa you now hold or expect to obtain

Student (F-1) Exchange Visitor (J-1)

Other (specify): _____

By typing my name below, I hereby certify that to the best of my knowledge, the information furnished above is true and complete.

Applicant Signature

Date

Email complete form to:

Undergraduate Applicants:

apply@colorado.edu

Subject Line: Citizenship Request Form

Graduate School Applicants:

gradprocessing@colorado.edu

Subject Line: Citizenship Request Form

Or Mail complete form to:

Undergraduate Applicants:

University of Colorado Boulder
Office of Admissions
552 UCB
Boulder, CO 80309-0552

Graduate School Applicants:

University of Colorado Boulder
Graduate Admissions
553 UCB
Boulder, CO 80309-0553