Verification of U.S. Citizenship or Permanent Residency Status

NIH Intramural Research Training Award (IRTA) Program

IRTA Fellows must provide documented evidence of their U.S. citizenship or permanent residency (resident alien) status before their IRTA awards may be activated. The Fellow may present either one document that establishes both citizenship/residency and identity (List A), or separate documents to establish citizenship/residency and identity (Lists B and C). Only originals or certified copies are acceptable.

ICD Personnel Officers (or designees) complete this form at or before the time that IRTA Fellows report to activate their fellowship awards. The form is not needed for renewals. Personnel Officers are to examine the documents presented, check the boxes in List A *or* Lists B and C (as appropriate), and provide the document identification number and expiration date for each document checked. Personnel Officers then sign and date the form to certify that the documents have been examined and that the Fellow meets the citizenship/residency requirements of the IRTA Program. Keep completed copies of this form with the Fellow's other award documents in accordance with ICD procedures.

| Fellow's Name | | |
|---|---|--|
| ICD List No. | Fellowship Award No. | Activation Date |
| Complete either List A or Lists B and | C (see above). | |
| List A Identity and IRTA Eligibility | List B Identity | List C ND IRTA Eligibility |
| United States Passport Certificate of United States Citizenship Certificate of Naturalization Alien Registration Card with photograph | A State-issued driver's license or I.D. card with a photograph, or information, including name, sex, date of birth, height, weight, and color of eyes. Specify State: U.S. Military Card Other (Specify document and issuing authority) | Original Social Security Number Card (other than a card stating it is not valid for employment) A birth certificate issued by State, county, or municipal authority bearing a seal or other certification |
| Document Identification No. | Document Identification No. | Document Identification No. |
| Expiration Date (if any) | Expiration Date (if any) | Expiration Date (if any) |
| I certify that I have examined the documents presented by the above-named individual and that to the best of my knowledge he/she is a U.S. Citizen or Resident Alien and is eligible to participate in the NIH IRTA program. | Name Title | Organization |
| | Signature | Date |

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