2024-2025



Citizenship/Immigration Documentation

Student's Name (PRINT):		Phone:	()
HCC ID:(9-digit_number required)	Date of Birth:/	/ Home Campus:_	(Primary location of attendance)
This form is for the collection of documents in person. If you do rable to complete the processing	not complete this form or su		students unable to present their ents requested, we will not be
		•	attach a valid government-issued or passport to verify your identity.
NOTE: Forms of identification (su renewal will be not be accepted.	•	have expired with no real and	reasonable opportunity for
	Citizenship/Immigra	ation Documentation	
I certify that I am the individual a valid government-issued photo documents and government-issued to me.	o identification card bearin	g my portrait (or likeness). I c	ertify that the attached
Name of Citizenship and/o	r Immigration Document	, , , , , , , , , , , , , , , , , , , ,	Citizenship and/or Immigration ocument
	Conti	ification	
By signing below, I/we acknow Purposely giving false or mislead	rledge and confirm that th	ne above and attached inforr	nation is complete and correct. , or both.
Student Signature:			Date:
HCC is committed to a workplace and educa	tional environment free of discrimina	tion, and harassment based upon race of	olor religion, age sex gender national

origin, disability, status as a veteran, or sexual orientation. Phone: 713-718-8490 Fax: 713-718-8196

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