

Office of the Registrar Room 306 West Quad Center 2900 Bedford Avenue Brooklyn, NY 11210 TEL 718- 951-5729 FAX 718- 951-5257 residency@brooklyn.cuny.edu www.brooklyn.cuny.edu

AFFIDAVIT OF INTENT TO LEGALIZE IMMIGRATION STATUS

State of New York: County of _____

_____, being duly sworn, deposes and says that he/she does not currently have

(Student's Name)

lawful immigration status but has filed an application to legalize his/her immigration status or will file such an application as soon as he/she is eligible to do so.

(Student's Signature)

Sworn to me this ______ day of the month of ______, 20_____

(Notary Public)

