

**Affidavit for Lawful Presence  
Colorado Indigent Care Program**

I, \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

\_\_\_\_\_ I am a United States citizen, or

\_\_\_\_\_ I am a Legal Permanent Resident of the United States, or  
I am lawfully present in the United States pursuant to federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

**For Eligibility Technician Use: Please mark the box that indicates which document was verified for lawful presence and keep a photocopy of the document presented in the applicant's file.**

Drivers License or Identification Card    State of Issuance \_\_\_\_\_

Birth Certificate

United States Passport

Certificate of Naturalization or Certificate of Citizenship

Other \_\_\_\_\_ (insert document number from list on reverse side)

**SAVE Verification Completion Date (for non-U.S. citizens only) \_\_\_\_\_**

**OPTIONAL**

**If a United States Citizen (or a person from American Samoa, Swains Island or Northern Mariana Islands) is unable to present any of the lawful presence documents (see reverse) the applicant may complete the self declaration statement below to comply with the evidence of lawful presence requirement.**

I, \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of the State of Colorado and possibly subject to later verification of status that I am a United States citizen or non-citizen national (American Samoa, Swains Island, or Northern Mariana Islands).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date