

New Jersey State Department of Education
Office of Licensure and Credentials

**NON-CITIZEN CERTIFICATE RENEWAL REQUEST /
AFFIDAVIT OF INTENT TO BECOME A CITIZEN**

IMPORANT: This form is to be completed by only those individuals who are not U.S. citizens.

A. Basic Information *Please print your name as it appears on any documentation that you are required to submit*

Last Name _____ First Name _____ Middle Name or Initial _____
Street Address _____
City _____ State _____ Zip _____
Social Security Number _____ Date of Birth: Month _____ Day _____ Year _____
Email Address _____ Phone Number Including Area Code _____

Endorsement Information. Please enter the code and print the name of the endorsement for which you or applying on the line below

Code _____ Name of Endorsement _____

B. Oath of intent to become a citizen of the United States

I, _____, being of adult age and duly sworn upon my oath do depose (or hereby affirm) and say that:

- I make this affidavit to clarify my citizenship status in order to be eligible for licensure by the New Jersey State Board of Examiners.
- I seek licensure for employment as a _____.
- I am currently a citizen of _____.
- I intend to become a citizen of the United States within the next five (5) years. I expect to become a United States citizen by _____.
- I understand that if I do not become a United States citizen within the next five (5) years, the certificate will not be eligible for renewal again.
- My current status in this country is that of _____.

C. Certification *Failure to complete these items will result in rejection of the candidate's application for certification.*

Have you ever had a certificate revoked or suspended in this or any state? Circle whichever applies
If yes, enclose a statement indicating the action taken and provide the pertinent details. Yes No

Have you ever been convicted of a criminal offense in this or any other state or any jurisdiction outside of the United States? If yes, enclose a statement indicating the municipality where this occurred and provide the pertinent details. Circle whichever applies
Yes No

D. Verification of Accuracy: I certify that all statements and information provided herein are true and accurate.

Applicant's Signature (in ink) _____ Date _____

Sworn and subscribed to before me this _____ day of _____, 20_____

Notary Seal

Notary Signature

Once completed, mail the form to:
New Jersey State Department of Education
Office of Licensure and Credentials
P.O. Box 500
Trenton, New Jersey 08625-0500
Attention: Non-Citizen Renewal Request / Affidavit of Intent
****Please include the renewal fee of \$95 when mailing back this form**