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| **APPLICANT NAME:**  |  |
| **FOR OFFICE USE ONLY** |
| **Eligibility Checklist** | **YES** | **NO** |
| **1** | Completed Application |[ ] [ ]
| **2.** | Fingerprint (if Applicant already has fingerprint card on file, not required to resubmit) |[ ] [ ]
| **3.** | Court Clearance |[ ] [ ]
| **4.** | Photo ID |[ ] [ ]
| **5.** | Processing Fee - $100.00 (non-refundable) |[ ] [ ]
| **6.** | Bond - $500.00 (refundable) |[ ] [ ]
| **7.** | Commission No.: |  |
| **8.** | Term:  |  |
| APPROVED BY: |  |

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| **REQUIRED DOCUMENTS** |
| **DOCUMENT CHECKLIST** | **YES** | **NO** |
| **1.** | Certificate to show successful completion of course instruction |[ ] [ ]
| **2.** | Notarized applicant declaration |[ ] [ ]
| **3.** | Fingerprints (from DPS for new Applicants) |[ ] [ ]
| **4.** | Court clearance |[ ] [ ]

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| **APPLICATION PROCESS** |
| **Application Process Checklist** | **YES** | **NO** |
| **1.** | Attend and pass a notary class approved by the Secretary of American Samoa.  |[ ] [ ]
| **2.** | Submit application with a receipt from the American Samoa Treasury for the $100.00 fee.  |[ ] [ ]
| **3.** | Post refundable $500 bond with Secretary of American Samoa |[ ] [ ]
| **4.** | If approved, a commission document will be issued |[ ] [ ]
| **5.** | Certificate of Authorization to Purchase a Notary Seal stating commission serial number |[ ] [ ]
| **6.** | Obtain Notary Seal from approved provider (not included in processing fee) |[ ] [ ]

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| **Section 1. Applicant Information and Attestation** |
| Last Name | First Name (Given Name) | Middle Initial | Maiden Initial | Other Last Names Used (if any) |
| **Address:** | P.O. Box/Address | Village | Name of Employer |
| Date of Birth | Social Security # | Applicant Ph# | Applicant Email Address |
| **I am aware that false or misleading statements, omissions, information, or use of false documents for this form will result in the denial of your application.****I attest under penalty of perjury that I am (check one of the following boxes):** |
|[ ]  A U.S. Citizen |
|[ ]  A U.S. National |
|[ ]  A lawful permanent resident of American Samoa |
|[ ]  A foreign national authorized to work in American Samoa | **OFFICE USE ONLY** |
| **ALIEN REGISTRATION # IF APPLICABLE** |  |
| **AR# -** |  |
| **COUNTRY OF ORIGIN OR CITIZENSHIP IF APPLICABLE** |  |
| **CHECK APPROPRIATE BOX** | **YES** | **NO** |
| **1.** | Can you read and write English? |[ ] [ ]
| **2.** | Do you have any criminal convictions in American Samoa or any other State, Federal, or International jurisdiction?  |[ ] [ ]
| **3.** | Do you have outstanding court fees, fines, judicial motions, etc…? |[ ] [ ]
| **4.** | Do you have any claims pending or disposed against a notary bond or any civil findings or admissions of fault or liability regarding your activities as a notary in American Samoa or any other State, Federal, or International jurisdiction? |[ ] [ ]
| **5.** | Have you ever had a notarial commission, professional license, or public officers in this or any other territory, state, or nation that has been denied, revoked, suspended, restricted, or that you resigned.  |[ ] [ ]
| **If you answered yes to any of the aforementioned questions, please explain here:** |
| **You may attach additional sheets if necessary.** |

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| **List any notarial commissions, professional licenses, or public offices that you have held in this or any other territory, state, or international jurisdiction** |
| **You may attach additional sheets if necessary.** |
| **APPLICANT ATTESTATION AND DECLARATION**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do solemnly swear or affirm under penalty of perjury that the personal information in this application is true, complete, and correct; that I understand the official duties and responsibilities of a notary public in the Territory of American Samoa, as explained in the course of instruction I have taken; and that I will perform, to the best of my ability, all notarial acts in accordance with the law.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Applicant**NOTARY ACKNOWLEDGEMENT**

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| **Territory of American samoa****COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |

On this \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_, before me, the undersigned notary personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who is[ ]  personally known to me;[ ]  proved to me through identification documents allowed by law, which were \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;[ ]  proved to me on oath or affirmation of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who is personally known to me and stated to me that (he) (she) personally knows the document signer and is unaffected by the document; [ ]  proved to me on oath or affirmation of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, whose identities have been proved to me through documents allowed by law and who have stated to me that they personally know the document signer and are unaffected by the documents, to be the person who signed the preceding or attached document in my presence and who swore or affirmed to me that the contents of the document are truthful and accurate to be the best of his or her knowledge and belief.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Official Signature and Seal of Notary Public |