

AFFIDAVIT OF INTENT TO BECOME A PERMANENT RESIDENT

Upon completion and notarization, this affidavit should be returned to **The University of Texas Health Science Center at Houston, Office of the Registrar, PO Box 20036, Houston, Texas 77225** or **7000 Fannin Suite 2250, Houston, Texas 77030**, or fax to **713-500-3356**. Any questions may be directed to **713-500-3361** or **registrar@uth.tmc.edu**.

STATE OF TEXAS

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COUNTY OF _____

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Before me, the undersigned Notary Public, on this day personally appeared _____,

known to me, who being by me duly sworn upon his/her oath, deposed and said:

1. My name is _____. I am _____ years of age and have personal knowledge of the facts stated herein and they are all true and correct.
2. I graduated or will graduate from a Texas high school or received my GED certificate in Texas.
3. I resided in Texas for three years leading up to graduation from high school or receiving my GED certificate.
4. I have resided or will have resided in Texas for the 12 months prior the census date of the semester in which I will enroll in _____ (college/university).
5. I have filed or will file an application to become a permanent resident at the earliest opportunity that I am eligible to do so.

In witness whereof, this _____ day of _____, _____.

(Signature)

(Printed Name)

(Student I.D.#)

SUBSCRIBED TO AND SWORN TO BEFORE ME, on the _____ day of _____, _____, to certify which witness my hand and official seal.

Notary Public in and for the State of Texas