illy UTSATD: Studelit's Flist Name: Last:	myUTSA ID:	Student's First Name:	Last:	
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Affidavit for Residency

Directions: The completed form must be submitted via the Document Uploader. Forms must be submitted prior to Census Date of each semester as defined in the online academic calendar to be effective for that term.

• <u>Fields to select on the Document Uploader:</u> Department: Registrar; Term: Select Applicable Term; Category: Residency; Category 2: Select Graduate or Undergraduate; Document: Affidavit (HB1403)

State of Texas						
County of						
Before me, the unders upon his/her oath, de		y appeared	_ known to me, who being by me duly sworn			
1. My name isare all true and o		. I am years of age and have personal I	knowledge of the facts stated herein and they			
2. I graduated or w	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 thesemester 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.						
AKNOWLEDGEMENT	& SIGNATURES \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
In witness whereof, th	is day of	,				
Signature:		Printed Name:	Student ID:			
SUBCRIBED TO AND SI hand and official seal		day of	to certify which witness my			
Notary Public in and f	or the State of Texas:					
		UTSA OFFICE USE ONLY:				
ate:	Received By:	Processed By:				