

This affidavit is submitted for the purpose of determining residency for admission and tuition purposes for:  
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Name: \_\_\_\_\_ UTEID: \_\_\_\_\_

## The University of Texas at Austin Residency Affidavit

### Please mail completed affidavit to:

Office of Admissions, GIAC, P.O. Box 7608  
Austin, Texas 78713-7608

**Or fax to:  
(512) 475-7395**

The determination of residency classification for admission and tuition purposes is governed by statutes enacted by the Texas Legislature and rules and regulations promulgated by the Texas Higher Education Coordinating Board. The complete rules and regulations can be downloaded from this site: <http://www.collegefortexans.com/residency/>.

### Identity of Student or Applicant

This affidavit is submitted for the purpose of determining residency for admission and tuition purposes for:

Name: \_\_\_\_\_ UTEID: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Gender:  M  F

Current Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### INSTRUCTIONS

Please read carefully before completing the affidavit.

In order to process this affidavit we must have a file for you. Please submit your application prior to submitting this affidavit.

This affidavit is used to determine whether a current applicant or student is a resident or nonresident of Texas for the University of Texas at Austin. This decision is used to determine status for tuition and admissions. Upon completion, the affidavit should be returned to the University of Texas at Austin, GIAC, Residency Section, P.O. Box 7608, Austin, Texas 78713-7608 or faxed to GIAC at (512) 475-7395. **If you are submitting this affidavit for the Texas Medical and Dental School Application Services (TMDSAS) please return the affidavit to TMDSAS, Residency Section, 702 Colorado, Suite 6.400, Austin, Texas 78701.**

**Please note that the affidavit must be notarized before you submit it.**

#### *For office use only*

Received: \_\_\_\_\_ Comments: \_\_\_\_\_

Decision Date: \_\_\_\_\_

Class: \_\_\_\_\_

Signature: \_\_\_\_\_ Appeal Received: \_\_\_\_\_

**AFFIDAVIT**

**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