## 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	9 §
COUNTY OF	§
Before me, the undersigned Notary Pub	olic, on this day personally appeared
known to me, who being by me duly sworn upor	n his/her oath, deposed and said:
My name is years of age and have personal knowledge of the correct.	ne facts stated herein and they are all true and
2. I graduated or will graduate from a Texas hig	gh school or received my GED certificate in Texas
3. I resided in Texas for three years leading up GED certificate.	to graduation from high school or receiving my
4. I have resided or will have resided in Texas f semester in which I will enroll in	
<ol><li>I have filed or will file an application to becon opportunity that I am eligible to do so.</li></ol>	ne a permanent resident at the earliest
In witness whereof, thisday of _	·
	(Signature)
	(Printed Name)
	(Student I.D.#)
SUBCRIBED TO AND SWORN TO BEFORE N	<b>//E</b> , on the day of, to certify
which witness my hand and official seal.	
	Notary Public in and for the State of Texas