

# DBU

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## FINANCIAL AID

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Student ID: \_\_\_\_\_

### AFFIDAVIT OF PERMANENT RESIDENT INTENT

STATE OF TEXAS  
COUNTY OF \_\_\_\_\_

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 36 months 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 to the census date of the semester in which I will enroll in Dallas Baptist 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 \_\_\_\_\_, 20\_\_\_\_\_

(Signature) \_\_\_\_\_

(Printed Name) \_\_\_\_\_

(Student ID#) \_\_\_\_\_

SUBSCRIBED TO AND SWORN TO BEFORE ME,  
on the \_\_\_\_\_ day of \_\_\_\_\_ which witness my hand and official seal.

\_\_\_\_\_  
Notary Public in and for the State of Texas

**Return this form with any attachments to:**  
**Office of Financial Aid - Dallas Baptist University - 3000 Mountain Creek Pkwy - Dallas, TX 75211**  
**Please scan, attach and email to [finaid@dbu.edu](mailto:finaid@dbu.edu) or fax (214)-333-5586.**