

FINANCIAL AID AFFIDAVIT

SUPPORTING DOCUMENTATION

The Texas Higher Education Board Rules require each student to provide substantiating documentation to affirm residence. Submit this completed form with proper documentation to the Records Office.

Last Name	First Name	Middle Name	Former Name(s), <i>if any</i>
Student ID	Date of Birth	Primary Phone _Cell _Work _Home	Alternate Phone _Cell _Work _Home
Date Moved to Texas	Current Physical Address (No PO Boxes), City, State, ZIP		Date Moved In
Prior Address		City, State, ZIP	Date Moved In – Date Moved Out

Mark the documents submitted to demonstrate residency for **12 consecutive months** prior to the census date of the semester in which you will enroll at Odessa College.

- ☐ Official High School Transcript from a Texas school.
- ☐ Official GED Certification from a Texas institution.
- ☐ Texas drivers license or Texas ID card with an origination date of at least 12 months prior to census date
- ☐ Original apartment lease agreement or notarized landlord lease, through present date; month-to-month continuations of a lease period must be accompanied by landlord-notarized statement confirming continued residence.
- ☐ Residential utility bills (electricity, water, gas, or phone)
- ☐ Other: _____

I understand the requirements for classification as a resident of Texas for financial aid purposes. The information submitted will be relied upon to determine my status for state residency. I agree to notify the college of any changes in the information provided that might result in disqualifying me for this classification. I affirm by my signature, that to the best of my knowledge and belief I am eligible to be reclassified. I understand that any violation of this oath of residency will result in appropriate disciplinary and/or financial repercussions.

Signature

Date

Based on the above and attached information, residency classification is, as of this date:			
<input type="checkbox"/> Out of State	<input type="checkbox"/> In-State (Out of District)	<input type="checkbox"/> In-District	Date: _____
Reviewer: _____ Processed By: _____			
Notes: _____			

ODESSA COLLEGE

FINANCIAL AID 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:

My name is _____. I
am ____ years of age and have personal knowledge of the facts stated herein, and the statement
selected is true and correct. *(Choose One)*

- ☐ I graduated or will graduate from a Texas high school or received my GED certificate in Texas.
- ☐ I resided in Texas for three years leading up to graduation from high school or receiving my GED certificate.
- ☐ 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 at ODESSA COLLEGE.
- ☐ I have filed or will file an application to become a permanent resident at the earliest opportunity that I am eligible to do so. *(If this statement applies to you, please contact the Office of Financial Aid at financialaid@odessa.edu or 432-335-6429 for further consultation.)*

In witness whereof, this _____ day of _____,

(Signature)

(Printed Name)

(Student I.D.#)

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

Notary Public in and for the State of Texas