Student Data Update



You must present this form in person with a photo ID to make changes to your data. A copy of your social security card must accompany a change or correction made to your social security number.

TEXAS COLLEGE If you move into the state of Texas, you must meet residency requirements in order to be eligible for in-state tuition rates. If you move out of the college taxing district and/or to another state, your residency status will be updated upon

receipt of the new information.

		TERM	·	YEAR					
Student ID:				(Check Applicable) Biographic Data			Readmission App		
Name	:		Othe	er Names	used while at S	WTXC:		_	
Currer	nt Mailing Addre	SS (City, State, Zip):					County	:	
Date o	of Birth:	Mobil	e Phone: <u>(</u>)	Per	rsonal Em	ail:		
Change Name to: Last Name:				First Name:			MI:		
From: Last Name:				First Name:			MI:		
			CAMPUS P		NG TO ATTE	ND			
U	valde – 01	Del Rio – 02	Eagle Pass		Crystal City		Pearsall – 07	Hondo – 08	
Your l If it ha	ast semester at	st attended:	ame RM nave last attende	City ed, you mu	State YE ust verify your T	EAR `exas reside	ence by answering t	he questions below	
a. (b. 2. Is Te a. b. 3. Upor Se 4. If yo Answ a. b. c.	(MUST PRESENT If you do not have a list visa status:	a Resident Alien Card ACTUAL RESIDENT a Resident Alien Card, al residence? YES e United States? Y red to number 6. e your claim for reside Legal Guardian y is based upon SELF, nestions: resided in Texas? Months	`ALIEN CARD) NO ES NO ncy? please why did you ment		LEGAL G a. Name b. Relation Pare c. Is this d. How lo e. Previoo f. If this why di Emp g. Has this Federa registra h. Will th	UARDIAN of person w onship to seen t Le person a U. ong has this Vears us state of r person cam id this person oloyment s person clai al Income Ta ation? Y	gal Guardian (paperw S. Citizen? YES person resided in Tex Months esidence: e here within the past on move to Texas? Other (specify): imed you as a depended ax for the tax year pre	g questions: Fork required) NO cas? 5 years, Education ent for U.S. ceding your	

6. OATH OF RESIDENCY & CERTIFICATION OF INFORMATION PROVIDED

I UNDERSTAND THE REQUIREMENTS FOR CLASSIFICATION AS A RESIDENT OF TEXAS FOR TUITION PURPOSES AND I AFFIRM BY MY SIGNATURE BELOW THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF I AM ELIGIBLE TO BE SO CLASSIFIED. I ALSO AFFIRM THAT I WILL NOTIFY THE PROPER OFFICIALS OF THIS INSTITUTION IF CIRCUMSTANCES CHANGE SO AS TO DISQUALIFY ME FOR THIS CLASSIFICATION. I VERIFY THAT THE INFORMATION I PROVIDED ON THIS FORM IS CORRECT AND COMPLETE. I UNDERSTAND THAT VIOLATION OF THIS OATH OF RESIDENCY & CERTIFICATION INFORMATION WILL RESULT IN DISCIPLINARY ACTION.

MUST BE SIGNED BY STUDENT ONLY:

	Student's Signature		Date							
PLEASE RETURN THIS FORM TO: REGISTAR'S OFFICE, SOUTHWEST TEXAS COLLEGE, 2401 GARNER FIELD ROAD, UVALDE, TEXAS 78801 "AN EQUAL OPPORTUNITY EDUCATIONAL INSTITUTION"										
It is the policy of Southwest Texas College to admit students without regard to race, color, religion, national origin, sex, age disability, or veteran status.										
Office use only: NAE	RGPE	PERC	IASU	CRI	Revised 1/2025					