



STUDENT FINANCIAL SERVICES

TEXAS CORE RESIDENCY QUESTIONNAIRE 2019-2020

Name:		Banner ID:
Date of Birth:		
Address:		
City:	State:	Zip Code:
Phone:	Email:	

Texas regulations require Concordia University Texas (CTX) to obtain information regarding students' eligibility for state funding such as the Texas Tuition Equalization Grant (TEG). To be eligible for Texas state funding, you must meet state residency requirements. The information requested below will be used to determine your state residency status for the 2019-2020 academic year. Failure to complete and return this form could result in cancellation of state funding for which you may be eligible.

Part A - Basis of Claim to Residency (please complete all check boxes and blanks):

1. Are you a Texas Resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Did you or will you graduate from a Texas high school (receive a diploma) or complete a GED in Texas prior to the semester for which you are applying to CTX? Graduation Date: _____ GED Completion Date: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Did you live or will you have lived in Texas for the 36 months leading up to your high school graduation or completion of the GED?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. When you begin the semester for which you are applying to CTX, will you have lived in Texas for the previous 12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered no to any of the above questions please complete the Texas Supplemental Residency Questionnaire and sign and return both forms together. The Texas Supplemental Residency Questionnaire can be found on the CTX Student Financial Services Forms webpage.

Part B - Basis of Claim to Residency (please complete all check boxes and applicable forms):

1. Are you a U.S. Citizen or a U.S. Permanent Resident? If no, you must also submit the Affidavit of Intent to Become a Permanent Resident	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If you answered yes to all of the above questions please certify and return this form.

Certification Statement

I understand that officials at Concordia University Texas (CTX) will use the information provided on this form to determine my status for residency eligibility for the 2019-2020 academic year. I authorize CTX to verify the information I have provided. I agree to notify the proper officials at CTX of any changes to the information provided. I certify that the information on this form is complete and correct and I understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment and/or appropriate disciplinary action.

Student Signature:	Date:
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Please submit this form to CTX Student Financial Services - financialaid@concordia.edu - Fax: 512.313.1670