## University Center 113 1201 W. University Drive Edinburg, Texas 78539

Office: (956) 665-7934 Fax: (956) 665-3009

Cavalry Hall 104
One West University Blvd.
Brownsville, Texas 78520

Office: (956) 882-8980 Fax: (956) 882-6819



## **Intent to Establish Residence in Texas**

For Veterans and Their Family Members			
Studer	nt First Name:	MI:	Last Name:
UTRGV	/ Student ID:	_ Te	erm:
If a dependent or spouse, list the name of the veteran:			
54.058 (k) A pe without person in institution	Section 3301 et seq.) or any other federal law author (2) is the spouse of a person described by Subdivision (3) is a child of a person described by Subdivision (1) or other academic term for which the person is regist by rule shall prescribe procedures by which a person that affected the person's ability to use the benefit p.	of higher this state ce in this 1 GI Bill® rizing edun n (1); or who is 25 tering, exc who suffe rovided b	eeducation at the rates provided for Texas residents if the person files with the institution at which the state and resides in this state while enrolled in the Veterans Educational Assistance Act of 2008 (38 U.S.C. cational benefits for veterans;  by years of age or younger on the first day of the semester cept that the Texas Higher Education Coordinating Board ared from a severe illness or other debilitating condition
By che	cking the appropriate box below, I affirm th	at I am	:
			d Forces eligible for educational benefits available ion, the Post-9/11 GI Bill® Veterans Educational
	The spouse of a current or former member of the educational benefits available to veterans unde GI Bill® Veterans Educational Assistance Act of 2	r federa	law, including, without limitation, the Post-9/11
		r federa	the United States Armed Forces who is eligible for law, including, without limitation, the Post-9/11
while 6	ning below, I affirm that I intend to establish enrolled at The University of Texas Rio Granure of Student:	de Vall	