Please complete the information below and submit this form to the Office of Student Financial Aid. Please use BLUE or BLACK ink.

STATEMENT OF STUDENT ELIGIBILITY FOR THE TEXAS GRANT

To determine your eligibility for the TEXAS Grant, we must have this form completed, signed and returned to the Financial Aid Office.

STUDENT’S FULL NAME: ___________________________ UID: ___________________________

(First, Full Middle Name, Last)

Have you ever been convicted of a felony or an offense under Chapter 481, Health and Safety Code (Texas Controlled Substances Act), or under the law of another jurisdiction involving a controlled substance as defined by Chapter 481, Health and Safety Code?

*If your answer is yes, contact the financial aid office to determine your eligibility to receive a TEXAS grant.

**If your answer is no, it is your responsibility to inform the financial aid office if this status changes at any time while attending the institution.

☐ No ☐ Yes

I hereby certify that the information I have provided in this statement is true and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed. I also understand that it is my responsibility to inform the financial aid office if my status concerning this statement of eligibility changes at any time while attending Tarleton State University.

Student Signature – *(Signature MUST BE hand written, NO typed signatures will be accepted)* ___________________________ Date ___________________________