

## Office of Student Financial Aid & Scholarships

One University Way San Antonio, Texas 78224 Phone: (210)784-1300 Fax: (210)784-1490

## Statement of Student Eligibility

State law requires that institutions verify convictions of a felony or offenses 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. Students receiving state funds must complete the following form prior to disbursement.

Student's Information			
Last Name	First Name	M.I.	Student ID #
Section 1–Student Eligibility			
	a felony or an offense under Chapter v of another jurisdiction involving a c		
	Yes	No	
*If your answer is yes, contact the	e financial aid office to determine you	r eligibility to receive T	EXAS Grant.
**If you answer is no, it is your reattending the institution.	esponsibility to inform the financial a	id office if this status ch	anges at any time while
and is more than 30 days delinqu	kas Family Code, Title 5, Section 231. Lent is not eligible to receive a state-fore delinquent on court appointed ch	funded grant or loan.	bligated to pay child support
	Yes	No	
Certification and Signatures			
I certify that the information provided hest of my knowledge.	erein is true and correct to the	<b>WARNING:</b> If you purpo misleading information, to prison, or both	
Student's Signature	Date		

		ents must file a Selective Service Statement of Registration sistance. For more information about the Selective Service	1
Please mark <b>one</b> option below:			
I was born female and not req	quired to register.		
registration with Selective Ser	STERED with the Selective the age of 18. I am not regretice.		ox
Certification and Signatures			
I hereby certify that the selective service status correct. I understand that I must provide documy institution, and that I may be required to confor each academic year for continued eligibility.	nentation if requested by mplete a new statement	WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both	_
Student's Signature	Date		
		Office Use Only: Date Received	
<b>Please return this form to:</b> Texas A&M University-San Antonio Office of Student Financial Aid & Scholarship	os One University Way		

Section 2–Statement of Selective Service Status

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