## 2020-2021



## **Statement of Student Eligibility – Texas (FSSELG)**

Student's Name (PRINT):			Phone: ()
HCC ID:(9-digit number required)	Date of Birth:/_	/	Home Campus:(Primary location of attendance)
The following statements are r	equired to determine stud	dent eligik	ibility for Texas Education Opportunity Grant (TEOG).
	law of another jurisdiction	on involvi	Chapter 481, Health and Safety Code (Texas Controlleving a controlled substance as defined by Chapter 481
	No	Yes	i
I understand I am required by receiving any state aid.	$\prime$ law to notify the financ	ial aid of	office if there are any changes to my status while I ar
	Ce	ertificatio	on
By signing below, I/we acknow false or misleading information			e information is complete and correct. Purposely giving ntence, or both.
Student Signature:			Date:
	Statutory P	Program R	Restrictions
The statutory restrictions of th grant	e programs are identical.	A person i	is not eligible to receive an initial or a continuation
Controlled Substances by Chapter 481, Health under this subchapter (1) Received a certific	Act), or under the law of a n and Safety Code, unless that and has: ate of discharge by the Te	another ju the perso xas Depar	ense under Chapter 482, Health and Safety Code (Texas jurisdiction involving a controlled substance as defined on has met the other applicable eligibility requirements artment of Criminal Justice or a correctional facility or
the receipt or com	pletion; or	•	and at least two years have elapsed from the date of
			ged from the person's record, or otherwise has been rant under this subchapter."
Citations:			
TEXAS Grant: Initial	Awards TEC 56.304(b)	R	Renewal Awards TEC 56.305(b)

HCC is committed to a workplace and educational environment free of discrimination and harassment based upon race, color, religion, age, sex, gender, national origin, disability, status as a veteran, or sexual orientation. Phone: 713-718-8490

TEOG Grant: Initial Awards TEC 56.404(b) Renewal Awards TEC 56.305(b)

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