

## Statement of Student Eligibility

Have you ever been convicted of a felony?

☐ Yes ☐ No

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

☐ Yes ☐ No

I hereby certify that the information provided in this statement is true and correct to the best of my knowledge. 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 my responsibility to inform the financial aid office if my status concerning this statement of eligibility changes at any time while attending this institution.

Student Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_