

Texas Higher Education Coordinating Board Student Financial Aid Programs PO Box 12788, Austin, TX 78711-2788 Tel. 800-242-3062 Fax 512-427-6423 www.hhloans.com

TEXAS ARMED SERVICES SCHOLARSHIP PROGRAM (TASSP) SCHOLARSHIP RECIPIENT'S ANNUAL CERTIFICATION/NOTICE OF FULFILLMENT

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents is subject to penalties that may include fines, imprisonment, or both, under the Texas Penal Code and Titles 18 and 20 of the United States Code, including 20 U.S.C. Section 1097.

SECTION 1: SCHOLARSHIP RECIPIENT IDENTIFICATION		
Please enter the following information:		
Social Security Number or Account Reference Number		
Name		
Address		
Telephone – Home	_Cell	
Email Address	-	
SECTION 2: SCHOLARSHIP AGREEMENT CERTIFICATION		
I certify that I am continuing to meet the terms of the TASSP and am providing supporting documentation that: I have entered into one of the following commitments (Please check one): A four-year commitment to be a member of the Texas Army National Guard, the Texas Air National Guard, the United States Coast Guard, the Texas State Guard, or the United States Merchant Marine; or A contract to serve as a commissioned officer in any branch of the United States armed services.		
☐ I have satisfied the requirements of the TASSP (final year of commitment).		
I understand that if I fail to fulfill the terms of the Texas Armed Services Scholarship Program, my scholarship will convert to a non-forgivable loan.		
ignature of Scholarship Recipient or RepresentativeDate		
SECTION 3: AUTHORIZED OFFICIAL'S CERTIFICATION		
Note: As an alternative to completing this section, a written statement from the commanding or personnel officer or a copy of the military orders may be attached. The statement or copy must include all information needed to establish the scholarship recipient's continuous compliance with the Texas Armed Services Scholarship terms as indicated in Section 2, including the period of the qualifying service. A. I certify, to the best of my knowledge and belief, that: The recipient's service meets one of the eligibility requirements for the deferment indicated in B. of this section. The recipient's service begins/began on		
Name of Military Branch or Guard Component		
Address		
City, State, Zip Code		
Name/Title of Authorized Official	Telephone	
Authorized Official's Signature	Date	

SECTION 4: INSTRUCTIONS FOR COMPLETING THIS FORM

- Type or print using dark ink. Enter dates as month-day-year (mm-dd-yyyy). Use only numbers. Example: January 31, 2010 = 01-31-2010. This form is only applicable for your TASSP account with the Texas Higher Education Coordinating Board. If you have student loans, contact your loan servicer for information regarding required documentation.
- To establish your eligibility, an authorized official must complete Section 3, or provide a copy of your military orders or a written statement from your commanding or personnel officer must be attached.
- Return the completed form and any required documentation to the address shown in Section 5.

SECTION 5: WHERE TO SEND THE COMPLETED FORM

Return the completed deferment request and any required documentation to:	If you need help completing this form, call:
Mail: THECB PO Box 12788 Austin, TX 78711-2788	Tel. 800-242-3062
Fax: 512-427-6423	
Email: LPOSPRT@highered.texas.gov	