60×30TX

Texas Higher Education Coordinating Board

2020-21 (FY 2021) Good Neighbor Program (GNP)

Online Recommendation Form Instructions

Student Financial Aid Programs
Texas Higher Education Coordinating Board

Table of Contents

Good Neighbor Program
Online Recommendation Instructions

Purpose

The purpose of the **Good Neighbor Program (GNP) Online Recommendation Form** is to provide institutions with a secure method for submitting student recommendations to the Texas Higher Education Coordinating Board (THECB).

Form Access

- Access the online recommendation form by logging into CBPass: https://www1.thecb.state.tx.us/CBPass/
    - First-time users must register for a CBPass account and request access to the **Good Neighbor Program** application (CBPass User Instruction Guide).
- All fields marked with an asterisk on the recommendation form are required.
- If required information is omitted or invalid, the system will not allow the form to be submitted until it is corrected.
- If a mistake is made, the user can start over by clicking **Clear Form** at the top of the page.
- After a form is submitted, the form will reset automatically, or the user can log out.
- Once a form is submitted successfully, an email confirmation will be sent automatically.

NOTE: If there is no activity for 20 minutes, the form will time out and any changes made will **NOT** be saved.

Student Priority

Each student should be given a unique priority ranking among **ALL** the students being submitted, regardless of their country.

NOTE: The institution's information appears automatically based on the user account. If the information is incorrect, contact Financial Aid Services at 844-792-2640.
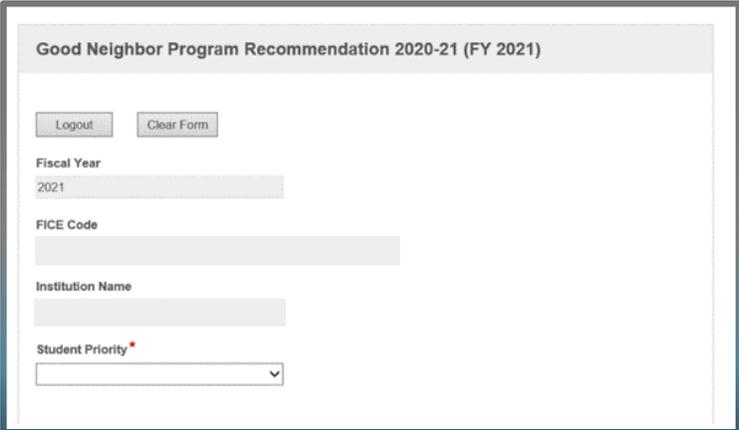
Student Identifying Information

- Enter the First and Last Name
- Enter the Date of Birth
- Select either Social Security Number or Institutional Student Identification (ID) Number
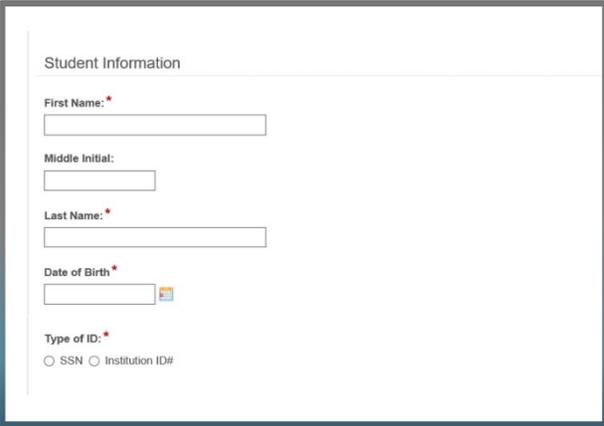
Eligibility Requirements

Is student classified by your institution as a U.S. resident?*
○ Yes ○ No

The student must be classified as a **non-resident** in order to qualify. Students classified by the institution as residents do **NOT** qualify but non-residents awarded waivers of non-resident tuition **MAY** qualify.

NOTE: The GNP requires that an applicant be a resident of a country of the Western Hemisphere (other than the U.S. or Cuba). F-1 and J-1 visa holders typically meet this qualification and other non-residents could as well.

If the student has applied for Permanent Resident status in the U.S., or has dual citizenship that includes the U.S., he/she is **NOT** eligible for an award through this program.

Has student applied for U.S. permanent resident status?*
○ Yes ○ No

NOTE: Recipients of a Good Neighbor award must plan to return to their home country when they complete their studies.

Please indicate how the student meets the selective service registration requirement for this program by selecting one for the following options: *
○ Registered for Selective Service
○ NOT registered for Selective Service
○ Exempt from Selective Service registration (e.g. has a qualifying valid student visa)

Indicate the student's current selective service status. Visit www.sss.gov to determine if the student is required to register by federal law.

Indicate if the student has any relatives working for the Texas Higher Education Coordinating Board. If **YES**, additional information must be provided.

Does student have any relatives working for the Texas Higher Education Coordinating Board (THECB)?*
◉ Yes ○ No

Special consideration cannot be given to applicants who are related to employees of the Texas Higher Education Coordinating Board under any circumstances.

Please provide the name of the relative: *
[   ]

NOTE: Special consideration **CANNOT** be given to applicants by the institution under any circumstances when determining eligibility or priority.

Indicate if the student has previously received a GNP award. If **NO**, proceed to the next question. If **YES**, the student must be meeting the institution's grade point average (GPA) requirement to continue receiving an award.

Has the student ever received an exemption through the Good Neighbor Program?*
◉ Yes ○ No

Is student meeting the institution's GPA requirement?*
○ Yes ○ No

To be eligible for an award, the student must have lived in the Western Hemisphere for at least five years. If the full amount of time is unknown but there is proof on file of at least 5 years residence in the Western Hemisphere, answer 5 years, 0 months.

How long has student lived in Western Hemisphere?

Years*   Months*
⌄   ⌄

Country Codes:

Country of Birth*
⌄

Citizenship*
⌄

Permanent Residence*
⌄

Select from the drop-down list the country of birth, citizenship, and permanent residence. If the country is not listed, the student is **NOT** eligible.

The statute authorizing the program indicates that the applicant must be a bona fide, native-born citizen **and** resident of the country being certified in the Western Hemisphere, other than Cuba. The answers are expected to be the same. If not, enter comments that explain how the individual meets program requirements.

Certification

By signing this statement, the Program Officer is certifying that the student meets all program requirements.

Program Officer's Certification

Submitter's Name*
Program Officer:
[   ]

Signature*
[Sign   ]

Email Address
[   ]

Phone Number*
[   ]
(Use format XXX-XXX-XXXX)

Submit Date
[   ] 📅

[Submit]

Privacy Act Notice

Certain information required on the application is made confidential by the Privacy Act of 1974 (5 USC 552a). The requested information is necessary for participation in the Loan Repayment Program for Mental Health Professionals, to verify your identity and to determine your eligibility for the program and for any benefits from it. The Privacy Act provides that an agency may continue to require disclosure of an applicant's Social Security Number (SSN) as a condition for granting of a right, benefit, or privilege if the agency required this disclosure prior to January 1975. The Texas Higher Education Coordinating Board has, for years prior to 1975, required the disclosure of the SSN of all applicants for the programs that it administers. The SSN may be used to verify your identity and as an account number (identifier) throughout your participation in the program, in order to make certain that THECB records necessary data accurately. As an identifier, the SSN will be used to determine program eligibility.

Submission Notifications

Institutions have until **March 15, 2020** to submit eligible students. A "Submitted" confirmation email will be sent to the Program Official each time a nomination form has been transmitted successfully.

NOTE: If any submission requires additional review by the THECB, the program official will receive a "Pending Review" email notification.

Selection Notification

Sent: Monday, February 4, XXXX 3:46 PM
To: Tester, Test <Test.test@THECB.state.tx.us>
Subject: Application SUBMITTED - Good Neighbor Program

Your application for the Good Neighbor Program has been submitted for:

Name: Sally Sunshine
Priority: 01

If you have questions, contact Financial Aid Services at 844-792-2640 or CONTACT US (Select the "Financial Aid Question" option in the drop-down selection under Contact Reason).

Thank you,
Financial Aid Services
Texas Higher Education Coordi

Sent: Monday, February 4, XXXX 3:47 PM
To: Test, Test <Tester.Test@THECB.state.tx.us>
Subject: Application PENDING REVIEW - Good Neighbor Program

Your application for the Good Neighbor Program has been submitted and is pending further review for:

Name: Test Tester
Priority: 11

If you have questions, contact Financial Aid Services at 844-792-2640 or CONTACT US (Select the "Financial Aid Question" option in the drop-down selection under Contact Reason).

Thank you,
Financial Aid Services
Texas Higher Education Coordinating Board

Once the submission deadline has passed, the ranked nominations will be evaluated through the selection process. A report will be sent via email to each institution indicating the selected recipients that can be given the tuition exemption for the 2020-21 (FY 2021) academic year.

From: Laserfiche@THECB.state.tx.us <Laserfiche@THECB.state.tx.us>
Sent: Friday, February 1, XXXX 1:47 PM
To: Test, Tester <Test.Test@THECB.state.tx.us>
Subject: Good Neighbor Program Report of Selected Students

We are pleased to announce the selection of the Good Neighbor for the following students:

Institution: **Tester University**

Priority	Last Name	First Name	Country
01	Sunshine	Sally	Grenada
02	Maryland	Mary	Haiti
09	Juan	Don	Costa Rica
10	Johnson	John	Honduras
11	Tester	Test	Canada

If you have questions, contact Financial Aid Services at 844-792-2640 or CONTACT US (Select the "Financial Aid Question" option in the drop-down selection under Contact Reason).

Thank you,
Financial Aid Services
Texas Higher Education Coordinating Board

Resources

Contact Financial Aid Services	
By phone: (844)-792-2640	
Contact us by completing an online inquiry form and select "Financial Aid Question" as the Contact Reason.	
OTHER RESOURCES FOR INSTITUTIONS	
General program information for institutions.	Student Financial Aid Programs Information Webpage
Good Neighbor Program	College For All Texans
Texas Program Statutes	Texas Education Code
Texas Program Rules	Texas Administrative Code
Information concerning program processing, procedures, allocations, and other topics will be communicated to institutions through the GovDelivery system. In order to receive these communications, interested individuals must subscribe.	GovDelivery
Informational resource to assist institutions with the administration of GNP.	Good Neighbor Program (GNP) Guidelines