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Texas Higher Education Coordinating Board

FY 2017

Toward EXcellence, Access, and Success (TEXAS) Grant

Student-by-Student End-of-Year (EOY) Reporting Manual

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TEXAS Grant End-of-Year (EOY)

Purpose

The purpose of the **TEXAS Grant End-of-Year (EOY) Report** is to collect student-by-student data concerning awards disbursed during the fiscal year. This report provides the state with a means of analyzing grant resources.

Calendar Dates

The dates for processing the report are as follows:

April 26, 2017	First possible date to submit the TEXAS Grant EOY Report.
July 6, 2017	Certification deadline for 4-year public universities.
July 20, 2017	Certification deadline for community colleges, public state colleges, and public technical institutions.

File Format

The file must be submitted in a **Tab-Delimited** text format.

File Certification Process

The TEXAS Grant EOY Report is finalized once the data submitted has been certified. The chart below illustrates the file certification process. Before a file can be certified, errors must be resolved, and program totals must reconcile.

Step 1: Upload the EOY file using MOVEit DMZ.
- Once the file is received, a receipt confirmation is sent automatically, and the file is processed for errors and warnings.
- If errors are found, an error report is generated and a notification email is sent automatically, move to **step 2**.
- If no errors are found, move to **step 4**.

Step 2: Download error report from MOVEit DMZ.
- Correct the file, and repeat **step 1**.
- If report totals do not reconcile, move to **step 3**.

Step 3: Reconcile report totals.
- Correct the file and repeat **steps 1 & 2**.
- Once totals reconcile, move to **step 4**.

Step 4: Complete certification.
- Institution verifies certified totals and emails the completed certification statement to the THECB.

File Submission

TEXAS Grant EOY Report files must be submitted using the MOVEit DMZ portal. Files need to be uploaded into the **Home** folder. If an institution has any questions or issues logging into MOVEit DMZ, contact Financial Aid Services for assistance at (844) 792-2640 or by email at UserAccess@thecb.state.tx.us.
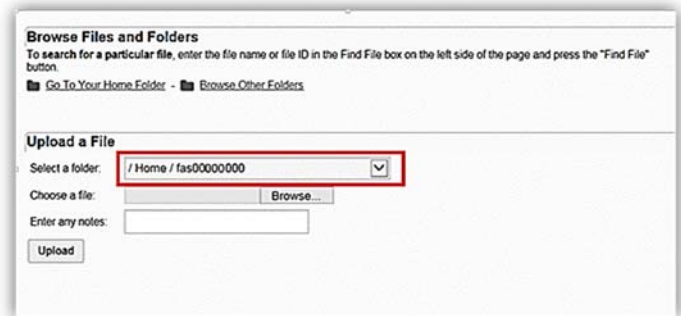

File Receipt Confirmation

A **File Receipt Confirmation** email is generated automatically after a TEXAS Grant EOY Report file is submitted. This confirmation indicates that the institution's transmission was received.

Error Report Notification

The submitted TEXAS Grant EOY Report file will go through an edit check process. If errors are found, an **Error Report Notification** email will be generated. This notification will indicate when an **Error Report** can be retrieved from the **TEXAS Grant Output** folder in MOVEit DMZ.
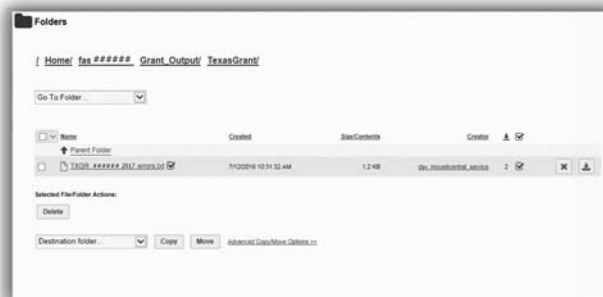
Error Report

The **Error Report** will list **Errors** and **Warnings**. Files with errors must be corrected and resubmitted. Each time a file is submitted, the previously processed report will be overwritten until the file is error-free. A file with only **Warnings** will be accepted (Reference Appendix A: Sample Error Report for additional clarification).

Override Request Process

Institutions may need to submit an override request on a case-by-case basis for certain errors (e.g. professional judgements). Override requests must be submitted via email and must reflect errors found on the institution's most recent **Error Report**.

For auditing purposes, all override requests must be submitted in the following format:

Include the Institution's **FICE Code** in the **Subject** line of the email.

Recipient identifying information must be **deleted** before sending a request. Only the Data Record number is required.

Reconciliation

TEXAS Grant EOY Report totals must match the total funds disbursed throughout the year. If a discrepancy is found, a reconciliation report will be generated (Reference Appendix B: Sample Reconciliation Report for additional clarification). In order to reconcile the totals, institutions have the following options:

- Correct the report and resubmit.
- Award unused funds in accordance with Chapter 22, Subchapter L, Rule §22.235.
- Submit a request to return unused funds via a Return of Funds Form.

Certification Statement

Institutions are not considered certified until a completed **Certification Statement** is received by the THECB.

STUDENT-BY-STUDENT DATA
CERTIFICATION

CONGRATULATIONS! Your End-of-year Report did not have any errors.

----------	Number of Students Awarded	Funds Awarded
Initial	926	$4453724
Renewal	1559	$7365097
Grand Total	2485	$11818821
-Budgeted-	----	$11515521

Initial Recipients	Priority Model
Priority	427
Non Priority	499
Priority Percentage	46.11%

CERTIFICATION STATEMENT

By replying to this e-mail, I hereby certify that the figures in the table accurately reflect the Texas grant Program totals for academic year 2016-2017.

Fice Code: ######
Institution: College University

Certifying Official
 Name: **Financial Aid Director**
 Title: **Director of Financial Aid**
 Phone Number: **###-###-####**
 Email: FinancialAidDirector@CollegeUniversity.edu

Please submit this completed form **ASAP** by e-mail to TEXASGrant@thecb.state.tx.us. Institutions are not considered certified until all refunds are received and the signed certification statement is collected.

Common Errors and Resolutions

Prior Year SAP Not Met

Renewal recipients with a current status of **Not Meeting Satisfactory Academic Progress** (SAP) in the THECB program database will generate the error: **Prior Year SAP Not Met**.

Institutions have the following options to resolve this error:

1. Submit a Summer Update file if the recipient is now meeting SAP after completing summer school. (See Summer Update Instructions)

2. Report a valid hardship or justification.
    a. If the recipient was granted a SAP hardship for the current year, report **Y** in **Data Element 37**.
    b. If the recipient regained eligibility in a non-award year, report **2** in **Data Element 38**.

3. If the recipient did not meet prior year SAP requirements, and did not qualify for a hardship decision, the recipient is not eligible this award period. Correct the file and resubmit.

Maximum Hours of Eligibility Exceeded

Renewal recipient's calculated total number of hours is the sum of the hours in the THECB program database and the hours reported on the EOY file. Recipients whose total hours exceed program maximums will generate an error of: **Award Greater than 150 SCH** or **Award Greater than 90 SCH**.

Institutions must prorate the recipient's award based on the number of eligible hours remaining in the program at the beginning of the last term.

Example:

A recipient began the academic year having attempted 130 hours while receiving grant funds, leaving 20 hours of eligibility remaining in the TEXAS Grant program.

- Fall semester – Attempted 15 hours
    o Recipient only has 5 hours of eligibility remaining.

- Spring semester – Attempted 10 hours
    o Instead of reporting 10 hours attempted, the institution must report 5 hours in the spring and prorate the award according to RULE 22.234 (f).

Minimum Number of Hours Remaining in Program

Recipients reported with fewer than 9 hours enrolled in a semester will generate an error of: **Fall Hrs Below Min Requirement** or **Spring Hrs Below Min Requirement**.

Institutions have the following options to resolve these errors:

1. Report a valid hardship or justification:
    a. If the recipient was granted a hardship for the current year, report **Y** in **Data Element 37**.
    b. If the hours were prorated due to limited hours in the program, report **4** in **Data Element 38**.

2. If the recipient was not enrolled in at least 9 hours, and did not qualify for a hardship decision, the recipient is not eligible this award period. Correct the file and resubmit.

File Layout

The file must be in a **Tab Delimited** text format.
Every **Data Element** must be included in every record of the file.

Header Record

The **Header Record** contains information to identify the type of data in the file.

Data Element	Type Length	Description	Edits
Report Type	Alphanumeric XXXX	4 characters max Enter "TXGR"	Error if not TXGR
FICE Code	Numeric XXXXXX	6 characters max Must be institution-assigned FICE Code Use leading zeroes (if necessary)	Error if not numeric Error if left blank
MODIFIED Reporting Year	Numeric XXXX	4 characters max Enter "2017"	Error if not 2017

Header Record Example: TXGR   ######   2017

Detailed Records

Detailed Records contain information for all students who received TEXAS Grant funds in the 2016-2017 academic year.

Data Element	Type Length	Description	Edits
1. Recipient Identification (ID) Number	Alphanumeric XXXXXXXXX	9 characters max Enter the student's SSN Enter Student ID, if the recipient has no SSN Do not use dashes or slashes	Error if SSN and not numeric Error if left blank
2. Is the "Recipient's ID Number" a Social Security Number?	Alphanumeric X	1 character max Y = Yes N = No	Error if out of range
3. Recipient's Date of Birth	Numeric MMDDYYYY	8 characters max Do not use dashes or slashes	Error if mm is out of range of 01-12 Error if dd is out of range of 01-31
4. Recipient's Last Name	Alphanumeric XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX	30 characters max	Error if numeric Error if left blank
5. Recipient's First Name	Alphanumeric XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX	30 characters max	Error if numeric Error if left blank
6. Recipient's Middle Initial	Alphanumeric X	1 character max Leave blank if recipient does not have a middle name	Error if numeric
7. Filler_7	Blank	Leave Field Blank	Error if not blank
8. Filler_8	Blank	Leave Field Blank	Error if not blank

Data Element	Type Length	Description	Edits
9. Filler_9	Blank	Leave Field Blank	Error if not blank
10. Filler_10	Blank	Leave Field Blank	Error if not blank
11. Filler_11	Blank	Leave Field Blank	Error if not blank
12. Filler_12	Blank	Leave Field Blank	Error if not blank
13. At the beginning of the award period, was recipient registered for Selective Service?	Numeric X	1 character max 1 = Yes 2 = No 3 = Exempt	Error if out of range Error if = 2 – ineligible recipient
14. For reporting purposes, is the recipient meeting SAP requirements at the end of the award period for a continuation award?	Alphanumeric X	1 character max Y = Yes N = No	Error if out of range Error if renewal award recipient and a cumulative GPA < = 2.50, and/or hours completed < = 24.0
15. Recipient's Cumulative Grade Point Average (GPA)	Numeric XXXX	4 characters max Must include two decimal places on a four-point scale	Error if numeric Error if left blank Error if > 4.00
16. Filler_16	Blank	Leave Field Blank	Error if not blank
17. Date Recipient Received a Bachelor's Degree	Numeric MMDDYYYY	8 characters max Enter the 2-digit month, 2-digit day, and the 4-digit year If recipient did not receive a bachelor's degree, leave blank	Error if dd is out of range of 01-31 Error if mm is out of range of 01-12
18. What type of award did the recipient receive in the award period?	Numeric X	1 character max 1 = Initial Award 2 = Renewal Award	Error if out of range Error if = 1 and recipient received a prior award Error if = 2 and recipient DID NOT receive a prior award
19. Filler_19	Blank	Leave Field Blank	Error if not blank

Data Element	Type Length	Description	Edits
20. Calendar year of the recipient's initial award disbursement if in 2016-2017	Numeric XXXX	4 characters max 0 = not applicable (renewal award recipient) 2016 = fall 2017 = spring	Error if not numeric Error if out of range Error if = 0 for an initial award recipient Error if > 0 for a renewal award recipient
21. Number of hours attempted while receiving grant funds in fall that count toward the program.	Numeric XX	2 characters max Enter all hours attempted regardless of hours completed; limited only by the total hours remaining in the program Enter "0" if no award was issued	Error if not numeric Error if < 9 SCH's AND data element 37 = N or data element 38 ≠ 4 Error if > 21 Error if aggregate total of hours reported for the recipient exceed 150 Error if recipient initially awarded via associate and aggregate total of hours exceed 90.
22. Number of hours attempted while receiving grant funds in spring that count toward the program.	Numeric XX	2 characters max Enter all hours attempted regardless of hours completed; limited only by the total hours remaining in the program Enter "0" if no award was issued	Error if < 9 SCH's AND data element 37 = N or data element 38 ≠ 4 Error if > 21 Error if aggregate total of hours reported for the recipient exceed 150 Error if recipient initially awarded via associate and aggregate total of hours exceed 90.
23. Filler_23	Numeric X	1 character max **Enter "0"**	Error if not 0
24. Filler_24	Numeric X	1 character max **Enter "0"**	Error if not 0
25. Filler_25	Blank	Leave Field Blank	Error if not blank
26. Filler_26	Blank	Leave Field Blank	Error if not blank

Data Element	Type Length	Description	Edits
27. How did the recipient acquire initial year eligibility?	Numeric X	1 character max Initial Year Pathway **1 = Associate Degree** Recipient received their initial award after earning an associate degree and enrolled within 12 months of receiving the associate degree **2 = HS Graduation or Renewal award** Recipient received their initial award after HS graduation and enrolled within 16 months of student's graduation date, **and** if this is a renewal award in 2016-2017 **3 = Honorable military discharge** Recipient graduated high school on 05/01/2013 or later, and enlisted in military service within 12 months from graduation, and enrolled ¾ time within 12 months after receiving an honorable discharge **4 = TEOG Transfer** Recipient transferred into a public university with at least 24 SCH's, a minimum 2.5 GPA, and received an initial year Texas Educational Opportunity Grant (TEOG) in Fall 2014 or later	Error if not numeric Error if out of range Error if 1, 3, or 4 and a renewal award recipient
28. Recipient's Award Amount for the Award Period	Numeric XXXX	4 characters max Enter a whole dollar amount only	Error if not numeric Error if left blank Error if = 0 Error if > 8730
29. Number of Hours Completed by Recipient in the Award Period	Numeric XX	2 characters max Enter number of hours completed by the recipient this award period with a grade of "D" or higher	Error if not numeric Error if left blank
30. Filler_30	Blank	Leave Field Blank	Error if not blank
31. Filler _31	Blank	Leave Field Blank	Error if not blank

Data Element	Type Length	Description	Edits
32. Filler_32	Blank	Leave Field Blank	Error if not blank
33. Filler_33	Blank	Leave Field Blank	Error if not blank
34. Was the Priority Model criteria used when awarding the recipient?	Numeric X	1 character max 0 = renewal award 1 = Yes 2 = No	Error if not numeric Error if out of range Error if 1 or 2 and renewal award recipient Error if = 0 and initial award recipient
35. 9-month Expected Family Contribution	Numeric XXXXXX	6 characters max Enter the 9-month EFC	Error if not numeric Error if left blank Error if > 999999 Error if > 5233 for an initial award recipient
36. Cumulative Total Hours Attempted	Numeric XXX	3 characters max Enter the total number of hours the recipient has attempted while attending college	Error if not numeric Error if left blank
37. Was the recipient granted a hardship this award period?	Alphanumeric X	1 character max Y = Yes N = No	Error if out of range
38. For reporting purposes, was a justification required?	Numeric X	1 character max 1 = No 2 = Yes, Recipient regained eligibility in a non-award period 3 = Yes, Recipient is enrolled in a degree or certificate program of more than four years; extension of five-year award maximum due to six years of eligibility 4 = Yes, Recipient was reported with fewer than 9 hours due to the program hour limitation	Error if not numeric Error if out of range

Trailer Record

Data Element	Type Length	Description	Edits
Trailer ID	Alphanumeric XXXX	4 characters max Enter "EOF1"	Error if not EOF1
Total Detail Record Count	Numeric XXXXXX	6 characters max Enter total number of recipients	Error if count does not match detail record count.

Trailer Record Example: EOF1   ######

Data Stucture

DATA ELEMENT	TYPE	MAX CHARACTERS
1. STDNT_ID_NUMBER	ALPHANUMERIC	9
2. SSN_ID_TYPE	ALPHANUMERIC	1
3. DATE_OF_BIRTH	NUMERIC	8
4. STDNT_LAST_NAME	ALPHANUMERIC	30
5. STDNT_FIRST_NAME	ALPHANUMERIC	30
6. MIDDLE_INITIAL	ALPHANUMERIC	1
7. FILLER_7	BLANK	-
8. FILLER_8	BLANK	-
9. FILLER_9	BLANK	-
10. FILLER_10	BLANK	-
11. FILLER_11	BLANK	-
12. FILLER_12	BLANK	-
13. SELECT_SERVICE	NUMERIC	1
14. MET_SAP	ALPHANUMERIC	1
15. OVERALL_GPA	NUMERIC	4
16. FILLER_16	BLANK	-
17. BACHELOR_DEGREE	NUMERIC	8
18. AWARD_TYPE	NUMERIC	1
19. FILLER_19	BLANK	-
20. YEAR_AWARD	NUMERIC	4
21. FALL_HOURS	NUMERIC	2
22. SPRING_HOURS	NUMERIC	2
23. FILLER_23	NUMERIC	1
24. FILLER_24	NUMERIC	1
25. FILLER_25	BLANK	-
26. FILLER_26	BLANK	-
27. IY_PATHWAY	NUMERIC	1
28. TOTAL_AWD_AMOUNT	NUMERIC	4
29. TOTAL_HRS_COMPLETED	NUMERIC	2
30. FILLER_30	BLANK	-
31. FILLER_31	BLANK	-
32. FILLER_32	BLANK	-
33. FILLER_33	BLANK	-
34. PRIORITY_AWARD	NUMERIC	1
35. 9_MONTH_EFC	NUMERIC	6
36. TOTAL_ATTEMPTED_HOURS	NUMERIC	3
37. HARDSHIP	ALPHANUMERIC	1
38. JUSTIFICATION	NUMERIC	1

Glossary

TERM	DESCRIPTION
Attempted Hours	Every course in every semester for which a student has been registered as of the official census date, including but not limited to, repeated courses and courses the student drops and from which the student withdraws. For transfer students, transfer hours and hours for optional internship and cooperative education courses are included if they are accepted by the receiving institution towards the student's current program of study.
Award Period	The academic year, including the term (i.e. fall, spring), for which the recipient was issued an award.
Expected Family Contribution (EFC)	The 9-month EFC amount as determined using the Federal Methodology.
Grade Point Average (GPA)	The recipient's cumulative GPA on a four-point scale, as of the end of the award period.
Hardship	A decision based on a documented hardship that validates a recipient's eligibility for an award. Each institution must adopt a hardship policy and have it available for public review upon request. Recipients that receive a hardship decision must have documentation supporting the decision maintained in their file. If the recipient has an approved hardship (other than limited hours of eligibility remaining) and is enrolled less than three-quarter time, prorate the award using the following:

Hardship Schedule	Enrolled 6-8 Hours or More	Enrolled Less Than 6 Hours
	Maximum award for the semester divided by 12, then multiplied by the number of hours enrolled	No award

TERM	DESCRIPTION
Hours Completed	The number of hours completed by the recipient this award period with a grade of "D" or higher.
Justification	A data element that validates a recipient's eligibility for reporting purposes.

TERM	DESCRIPTION
Maximum Hours of Eligibility	The maximum number of hours a student can attempt while receiving TEXAS Grant funds. If the recipient's balance of eligible hours is less than the number of hours being taken in a given term or semester, the recipient's award amount for that term or semester must be prorated using the following: _(see table below)_ **IMPORTANT NOTE**: While a hardship may be granted to allow an award in excess of 150 attempted semester credit hours (SCH), the total number of hours paid for with TEXAS Grant funds may not exceed 150 or 90 SCH.
Recipient Identification (ID) Number	The student's Social Security Number (SSN). For a student without a SSN, report the 9-digit ID number assigned by the institution. **NOTE**: All SSNs or IDs submitted should match those reported on the institution's CBM report.

Satisfactory Academic Progress (SAP)	The minimum program SAP requirements a student must meet to continue receiving a TEXAS Grant award.
	
	• Initial award recipients must meet the institution's financial aid SAP requirements as of the end of the award period in order to be eligible for a renewal award.
	
	• Renewal award recipients must end the award period with a minimum of:
	  • 2.5 cumulative GPA on a four-point scale
	  • 24 SCHs completed

Within the Maximum Hours of Eligibility cell:

Balance of total attempted hours (150 SCH)	Balance of hours = 6-8 hours - 50% of the maximum award
Balance of eligible program hours while receiving grant funds (150 or 90 SCH)	Balance of hours = < 6 hours - 25% of the maximum award

Appendix A

Sample Error Report

```
Texas Higher Education Coordinating Board
FICE: ######   Error Report on Financial Aid Records - TX Grants - FY2017
Date: 5/15/2017 7:47:43 PM
From:  Texas Higher Education Coordinating Board 1-800-242-3062, options 3, 3, 5     texasgrant@thecb.state.tx.us
**********************************************************************************
* SUMMARY INFORMATION:
*
* RECORDS READ: 7931
* DETAIL LINES READ: 7929
* ERROR LINES WRITTEN: 54
*  -------------------------------------------------------------
*
* ERROR SUMMARY                      TOTAL NUMBER OF ERROR IN FILE
*           Reported by another school: 1
*          Spring Hrs exceed max allowable: 1
*                   Received TEG: 1
*                  Invalid Renewal: 1
*
*   Please Send validation to texasgrant@thecb.state.tx.us for the error of "Reported by another school"
*
**********************************************************************************

DATA RECORD:  489
STUDENT ID :  #########

ERROR TYPE                      DATA ELEMENT          FILE VALUE
Reported by another school _ 003615  Student ID        #########

Please send validation to texasgrant@thecb.state.tx.us for the error of  'Reported by another school'


COUNT OF ERRORS IN THIS RECORD: 1
------------------------------------------------------------------------


DATA RECORD:  1808
STUDENT ID :  #########

ERROR TYPE                      DATA ELEMENT          FILE VALUE
Received TEG at FICE 003578        Student ID        #########

COUNT OF ERRORS IN THIS RECORD: 1
------------------------------------------------------------------------

DATA RECORD:  1888
STUDENT ID :  #########

ERROR TYPE                      DATA ELEMENT          FILE VALUE
Spring Hrs exceed max allowable      Spring              23

COUNT OF ERRORS IN THIS RECORD: 1
------------------------------------------------------------------------

DATA RECORD:  7743
STUDENT ID :  #########

ERROR TYPE                      DATA ELEMENT          FILE VALUE
invalid Renewal Award, Never Awarded      Award_Type          2

COUNT OF ERRORS IN THIS RECORD: 1
------------------------------------------------------------------------


** Warning the following discrepancies will need to be addressed on your FADB Report **

#########----- Adonnis Hernandez
######### ----- Maythe Villarreal
######### ----- Alma Munoz
######### ----- Jesus Angeles
######### ----- Dulce Campos
######### ----- Angel Albino
```

Appendix B

Sample Reconciliation Report

Texas Higher Education Coordinating Board
FICE: 00####   Error Report on Financial Aid Records - TX Grants - FY2017
Date: 7/29/2017 4:55:33 PM
From: Texas Higher Education Coordinating Board 1-800-242-3062, options 3, 3, 5   texasgrant@thecb.state.tx.us
****
* SUMMARY INFORMATION:
*
* RECORDS READ: 3000
* DETAIL LINES READ: 3000
* ERROR LINES WRITTEN: 1
* --
*
* ERROR SUMMARY   TOTAL NUMBER OF ERROR IN FILE
* IY total in file DOES NOT equal disbursed AMT: 1
* RY total in file DOES NOT equal disbursed AMT: 1

****

Error related to Total IY Funds Disbursed
The total funds reported on your SxS EOY report are 8950000   = $50,000
The total funds disbursed are 9000000.
The total IY amount reported does not reconcile with the total IY amount disbursed for your institution.
IY total in file DOES NOT equal dis

Error related to Total RY Funds Disbursed
The total funds reported on your SxS EOY report are 5985000.   = $15,000
The total funds disbursed are 6000000.
The total IY amount reported does not reconcile with the total IY amount disbursed for your institution.
IY total in file DOES NOT equal dis

Appendix C

Additional Resources

THECB CONTACT INFORMATION	
Contact THECB's Financial Aid Services Team	Toll-Free (844) 792-2640
FOR PROGRAM SPECIFIC QUESTIONS, EMAIL:	
Toward EXcellence, Access, & Success (TEXAS) Grant	TEXASGrant@thecb.state.tx.us
Texas Educational Opportunity Grant (TEOG)	TEOG@thecb.state.tx.us
Tuition Equalization Grant (TEG)	TEG@thecb.state.tx.us
General information on: exemption and waivers, state loan programs and other questions or topics	GrantInfo@thecb.state.tx.us
OTHER RESOURCES FOR INSTITUTIONS	
General program information for institutions	Student Financial Aid Programs Information Website
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
AVAILABLE FORMS	
TEXAS Grant, TEOG, TEG, TCWS, Top 10% Scholarship, BOT, CAL, TASSP, EAE	Return of Funds Form