



Texas Higher Education Coordinating Board

**FY 2017**  
**Top Ten Percent (Top 10%)**  
**Scholarship**

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

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# Top 10% Scholarship End-of-Year (EOY)

## Purpose

The purpose of the **Top 10% 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 scholarship resources.

## Calendar Dates

The dates for processing the report are as follows:

<b>April 26, 2017</b>	First possible date to submit the Top 10% EOY Report.
<b>June 15, 2017</b>	Certification deadline for public institutions.

## File Format

The file must be submitted in a **Fixed-Length** text format.

## File Certification Process

The Top 10% 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 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

Top 10% EOY Report files must be submitted using the MOVEit DMZ portal. Files will 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](mailto:UserAccess@thecb.state.tx.us).

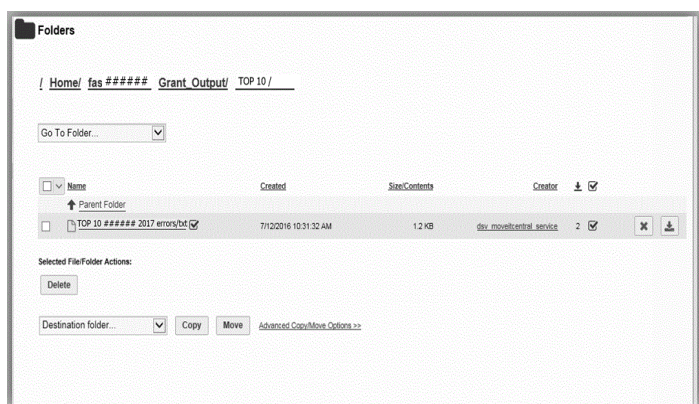


## File Receipt Confirmation

A **File Receipt Confirmation** email is generated automatically after a Top 10% EOY Report file is submitted. This confirmation indicates that the institution's transmission was received.

## Error Report Notification

The submitted Top 10% 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 **Top 10% Output** folder in MOVEit DMZ.



## Error Report

The Error Report will list **Errors** and **Warnings**. Top 10% EOY Report file must match the student awards reported on the **Top 10% Reimbursement File** or an error will be generated. 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).

## Reconciliation

Top 10% EOY Report file totals must match the award totals reported on the **Top 10% Reimbursement**. Students who were reported on the **Top 10% Reimbursement File** and are not included on the Top 10% EOY Report file will generate a reconciliation report (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.
- Submit [Return of Funds Form](#) and correct the actual student award amount paid.

## Certification Statement

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

### TOP10 STUDENT-BY-STUDENT DATA

#### CERTIFICATION

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

-----	Number of Students Awarded	Funds Awarded
Initial	0	\$0
Renewal	640	\$2428103
Grand Total	640	\$2428103
-Budgeted-	----	\$2428103

#### CERTIFICATION STATEMENT

By replying to this e-mail, I hereby certify that the figures in the table accurately reflect the Top 10 Percent Scholarship Program totals for academic year 2016-2017.

**Fice Code:** 00####

**Institution:** **College University**

**Certifying Official**

Name: *Financial Aid Director's Name*

Title: **Director of Financial Aid**

Phone Number: ###-###-####

Email: [FinancialAidDirector@CollegeUniversity.edu](mailto:FinancialAidDirector@CollegeUniversity.edu)

Please submit this completed form **ASAP** by e-mail to [Topten@theeb.state.tx.us](mailto:Topten@theeb.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 **2** in **Data Element 16**.
  - b. If the recipient regained eligibility in a non-award year, report **3** in **Data Element 16**.
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.

## File Layout

The file must be in a **Fixed-Length** 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
Record Code	Alphanumeric XX	2 character spaces Enter "@H"	Error if not @H
Report Type	Alphanumeric XXXX	4 character spaces Enter "TTEY"	Error if not TTEY
FICE Code	Numeric XXXXXX	6 character spaces Must be institution-assigned FICE code Use leading zeroes (if necessary)	Error if not numeric Error if blank spaces
Submission Date	Numeric MMDDYYYY	8 character spaces  This is the date the file is submitted	Error if not numeric Error if mm is out of range of 1-12 Error if dd is out of range of 1-31
<b>MODIFIED</b> Reporting Year	Numeric YYYY	4 character spaces Enter "2017"	Error if not numeric Error if not 2017
Filler	<b>Blank</b> X	1 character space <b>Must be blank.</b>	Error if not one blank space
Report Description	Alphanumeric XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX	50 character spaces Enter "Top 10 EOY Report " <b>There are 33 spaces after "Report"</b>	Error if not "Top 10 EOY Report" with thirty-three spaces at the end

**Header Record Example:** @HTTEY#####040720172017Top 10 EOY Report

## Detailed Records

**Detailed Records** contain information for all students who received Top 10% funds in the 2016-2017 academic year.

Data Element	Type Length	Descriptions	Edits
1. Record Code	Alphanumeric XX	4 character spaces Enter "@D"	Error if not @D
2. Recipient's Identification (ID) Number	Alphanumeric XXXXXXXXXX	9 character spaces 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
3. Is the "Recipient's ID Number" a Social Security Number?	Alphanumeric X	1 character space  Y = Yes N = No	Error if out of range Error if Y and Recipient's ID is alphanumeric
4. Recipient's Date of Birth	Numeric MMDDYYYY	8 character spaces Do not use dashes or slashes	Error if not numeric Error if mm is out of range of 01-12 Error if dd is out of range of 01-31
5. Recipient's Last Name	Alphanumeric XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX	30 character spaces	Error if numeric Error if left blank



Data Element	Type Length	Descriptions	Edits
6. Recipient's First Name	Alphanumeric XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX	30 character spaces	Error if numeric Error if left blank
7. Recipient's Middle Initial	Alphanumeric X	1 character space Enter a blank space if recipient does not have a middle name	Error if numeric
8. Recipient's Cumulative Grade Point Average (GPA)	Numeric XXX	3 character spaces Include two decimal places Do not use a decimal point	Error if not numeric Error if left blank Error if > 400
9. Number of Hours Attempted in the Fall Term	Numeric XXX	3 character spaces Include one decimal place Do not use a decimal point  Example: 125 This entry describes 12.5 hours attempted this semester  Use a leading "0" if hours are fewer than 10	Error if not numeric Error if left blank  Error if < 12 with no justification or hardship
10. Number of Hours Attempted in the Spring Term	Numeric XXX	3 character spaces Include one decimal place Do not use a decimal point  Use a leading "0" if hours are fewer than 10	Error if not numeric Error if left blank
11. Filler_11	Numeric XXX	3 character spaces <b>Enter "000"</b>	Error if not 000

Data Element	Type Length	Descriptions	Edits
12. Filler_12	Numeric XXX	3 character spaces <b>Enter "000"</b>	Error if not 000
13. Number of Hours Completed by Recipient in the Award Period	Numeric XXX	3 character spaces Include one decimal place. Do not use a decimal point  Use a leading "0" if hours are fewer than 10	Error if not numeric Error if left blank
14. Recipient's Undergraduate Classification	Numeric X	1 character space  3 = Junior 4 = Senior	Error if not numeric Error if out of range
15. What type of award did the recipient receive in the award period?	Alphanumeric X	1 character space  R = Renewal award	Error if not R
16. Was the recipient granted a justification or hardship this award period?	Numeric X	1 character space  0 = No 1 = Yes; Recipient was granted a hardship for below full-time fall enrollment. 2 = Yes; Recipient was granted a SAP hardship to be eligible to receive an award in the current year. 3 = Yes; Recipient regained Top 10% eligibility in a non-award year.	Error if not numeric Error if out of range
17. Filler_17	Numeric XXXXXXXX	8 character spaces <b>Enter "00000000"</b>	Error if not 00000000

Data Element	Type Length	Descriptions	Edits
18. Recipient's Award Amount for the Award Period	Numeric XXXXXX	6 character spaces Include two decimal places Do not use a decimal point	Error if not numeric Error if left blank Error if > 20000 Error if = 000000
19. At the beginning of the award period, was the recipient registered for Selective Service?	Numeric X	1 character space  1 = Yes 2 = No 3 = Exempt	Error if not numeric Error if out of range Error if = 2

## Trailer Record

Data Element	Type Length	Description	Edits
Record Code	Alphanumeric XX	2 character spaces Enter "@T"	Error if not @T
Trailer ID	Alphanumeric XXX	3 character spaces Enter "EOF"	Error if not EOF
Total Detail Record Count	Numeric XXXXX	5 character spaces  Example: 00040 (This entry describes 40 award recipients)  Use leading zeroes (if necessary)	Error if not numeric Error if count does not match detail record count
Total Amount of Funds Awarded	Numeric XXXXXXXXXXXX	12 character spaces Include two decimal places Do NOT use a decimal point Enter a whole dollar amount only  Example: 000006000000 (This entry describes a total amount of \$60,000.00)  Use leading zeroes (if necessary)	Error if amount does not equal sum of detail record award amounts

**Trailer Record Example:** @TEOF00040000006000000 (40 recipients received \$60,000.00):

## Data Structure

DATA ELEMENT	TYPE	LENGTH	POSITION
1. RECORD_CODE	ALPHANUMERIC	2	01 - 02
2. STDNT_ID_NUMBER	ALPHANUMERIC	9	03 - 11
3. SSN_ID_TYPE	ALPHANUMERIC	1	12
4. DATE_OF_BIRTH	NUMERIC	8	13 - 20
5. STDNT_LAST_NAME	ALPHANUMERIC	30	21 - 50
6. STDNT_FIRST_NAME	ALPHANUMERIC	30	51 - 80
7. MIDDLE_INITIAL	ALPHANUMERIC	1	81
8. OVERALL_GPA	NUMERIC	3	82 - 84
9. FALL_HOURS	NUMERIC	3	85 - 87
10. SPRING_HOURS	NUMERIC	3	88 - 90
11. FILLER_11	NUMERIC	3	91 - 93
12. FILLER_12	NUMERIC	3	94 - 96
13. TOTAL_HRS_COMPLETED	NUMERIC	3	97 - 99
14. STDNT_UNDERGRAD_CLASSIFICATION	NUMERIC	1	100
15. AWARD_TYPE	ALPHANUMERIC	1	101
16. JUSTIFICATION	NUMERIC	1	102
17. FILLER_17	NUMERIC	8	103 - 109
18. AWARD_AMOUNT	NUMERIC	6	110 - 115
19. SELECT_SERVICE	NUMERIC	1	116

## Glossary

TERM	DESCRIPTION
<b>Attempted Hours</b>	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.
<b>Award Period</b>	The academic year, including the term (e.g. fall, spring) for which the recipient was issued an award.
<b>Census Date</b>	This is the 12 <sup>th</sup> day of class for a regular semester as defined, fall or spring term (16 weeks).
<b>Completion Rate</b>	The rate of classes completed vs. attempted in the current award period (i.e. total hours completed divided by total hours attempted).
<b>Grade Point Average (GPA)</b>	The recipient's cumulative GPA on a four-point scale, as of the end of the award period.
<b>Hardship</b>	<p>A decision based on a documented hardship that validates a recipient's eligibility for an award.</p> <p>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.</p>
<b>Hours Completed</b>	The number of hours completed by the recipient this award period with a grade of "D" or higher.
<b>Recipient Identification (ID) Number</b>	<p>The student's Social Security Number (SSN). For a student without a SSN, report the 9-digit ID number assigned by the institution.</p> <p><b>NOTE:</b> All SSNs or IDs submitted should match those reported on the institution's CBM report.</p>
<b>Satisfactory Academic Progress (SAP)</b>	<p>The minimum SAP requirements a student must meet to continue receiving a Top 10% award.</p> <ul style="list-style-type: none"> <li>• 75% completion rate</li> <li>• 30 SCH's completed</li> <li>• 3.25 cumulative GPA on a four-point scale</li> </ul>

## Appendix A

### Sample Error Report

```
Texas Higher Education Coordinating Board
FICE: ##### Error Report on Financial Aid Records - TOP 10% EOY - FY2016
Date: 6/16/2017 3:50:01 PM
From: Texas Higher Education Coordinating Board 1-800-242-3062, options 3, 3, 5 TopTen@thech.state.tx.us
*****
* SUMMARY INFORMATION:
*
* RECORDS READ: 15
* DETAIL LINES READ: 13
* ERROR LINES WRITTEN: 3
*
*
* ERROR SUMMARY                TOTAL NUMBER OF ERROR IN FILE
*                               Prior year SAP not met: 1
*                               Hour Completed > Total Attempted: 1
*                               Ineligible Recipient : 1
*                               Spring Hour Exceed Max Allowable
*
*****

DATA RECORD: 3
STUDENT ID : #####

ERROR TYPE                FIELD                VALUE IN FILE
Prior year SAP not met    Type/GPA/Rate/Hour/PJ    R/3.65/1.00/27/0

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

DATA RECORD: 4
STUDENT ID : #####

ERROR TYPE                FIELD                VALUE IN FILE
Hour Completed > Total Attempted    HourComp/Fall+Spring    32/31

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

DATA RECORD: 9
STUDENT ID : #####

ERROR TYPE                FIELD                VALUE IN FILE
Ineligible Recipient       SelectiveService        2

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

DATA RECORD: 13
STUDENT ID : #####

ERROR TYPE                FIELD                VALUE IN FILE
Spring Hour Exceed Max Allowable    Spring                250

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

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

##### ----- Diego Barba
##### ----- Fernando Bello
##### ----- Duy-An Tran
*****
```

## Appendix B

### Sample Reconciliation Report

Texas Higher Education Coordinating Board

FICE: ##### Error Report on Financial Aid Records - TOP 10% EOY - FY2017

Date: 6/15/2017 8:50:01 AM

From: Texas Higher Education Coordinating Board 1-800-242-3062, options 3, 3, 5 TopTen@thecb.state.tx.us

\*\*\*\*\*  
\* SUMMARY INFORMATION:  
\*

\* RECORDS READ: 66

\* DETAIL LINES READ: 64

\* ERROR LINES WRITTEN: 1  
\*\*\*\*\*

\* ERROR SUMMARY TOTAL NUMBER OF ERROR IN FILE

\* RY Total in File NOT equal the total budgeted: 1  
\*\*\*\*\*

RY Total in File NOT equal the total budgeted

The Total funds awarded reported on your SxS year End Report are 122000.

The Total Funds budgeted are 1260000.

The Total RY Amounts reported as awarded does not reconcile with the Total RY Amount Budgeted for your institution.

===== \$4,000

===== CANNOT LOCATE EOY RECORD =====

To override the following errors send an e-mail to TopTen@thecb.state.tx.us. Include in the Subject Line "Fice Code ##### EOY RECORD Override request".

##### ----- Annette Martinez  
##### ----- Hough Lewis



## Appendix C

### Additional Resources

THECB CONTACT INFORMATION	
Contact THECB's Financial Aid Services Team	Toll-Free (844) 792-2640
FOR PROGRAM SPECIFIC QUESTIONS, EMAIL:	
Top 10 Percent Scholarship (Top 10%)	<a href="mailto:TopTen@thecb.state.tx.us">TopTen@thecb.state.tx.us</a>
General information on: exemption and waivers, state loan programs and other questions or topics	<a href="mailto:GrantInfo@thecb.state.tx.us">GrantInfo@thecb.state.tx.us</a>
OTHER RESOURCES FOR INSTITUTIONS	
General program information for institutions	<a href="#">Student Financial Aid Programs Information Website</a>
Texas Program Statutes	<a href="#">Texas Education Code</a>
Texas Program Rules	<a href="#">Texas Administrative Code</a>
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.	<a href="#">GovDelivery</a>
AVAILABLE FORMS	
Top 10% Scholarship, TEOG, TEG, TCWS, Top 10% Scholarship, BOT, CAL, TASSP, EAE	<a href="#">Return of Funds Form</a>