

You are receiving this worksheet because you reported on your FAFSA that you had a conviction for possessing or selling illegal drugs and/or you left question 31 blank. Please answer the questions below and follow the instructions after each answer.

NAME

Purchase ID

**COUNT ONLY FEDERAL AND STATE CONVICTIONS. DO NOT COUNT CONVICTIONS THAT HAVE BEEN REMOVED FROM YOUR RECORD OR OCCURRED BEFORE YOU TURNED THE AGE 18, UNLESS YOU WERE TRIED AS AN ADULT.**

1. HAVE YOU BEEN CONVICTED FOR POSSESSING OR SELLING ILLEGAL DRUGS? *If no, sign and return form to the Financial Aid Office. If yes, proceed to next question.* ☐ YES ☐ NO
2. DID THE OFFENSE FOR POSSESSING OR SELLING ILLEGAL DRUGS OCCUR DURING A PERIOD OF ENROLLMENT FOR WHICH YOU WERE RECEIVING FEDERAL STUDENT AID (GRANTS, LOANS AND/OR WORK-STUDY)? *If no, sign and return this form to the Financial Aid Office. If yes, proceed to next question.* ☐ YES ☐ NO
3. HAVE YOU COMPLETED AN ACCEPTABLE DRUG REHABILITATION PROGRAM SINCE YOUR CONVICTION? An acceptable drug rehabilitation program must include at least two unannounced drug tests and be qualified to receive funds from a federal, state, or local government or from a federally or state-licensed insurance company; or be administered or recognized by a federal, state or local government agency or court, or a federally or state-licensed hospital, health clinic or medical doctor. *If yes, sign and return to Financial Aid Office. If no, proceed to next question.* ☐ YES ☐ NO
4. DO YOU HAVE MORE THAN TWO CONVICTIONS FOR POSSESSING ILLEGAL DRUGS? Only count convictions for offenses that occurred during a period of enrollment for which you were receiving federal student aid (grants, loans, and/or work-study). *Mark your answer and proceed to the next question.* ☐ YES ☐ NO
5. DO YOU HAVE MORE THAN ONE CONVICTION FOR SELLING ILLEGAL DRUGS? Only count convictions for offenses that occurred during a period of enrollment for which you were receiving federal student aid (grants, loan, and/or work study). *Mark your answer and proceed to the next question.* ☐ YES ☐ NO

6. ENTER THE DATE OF YOUR LAST CONVICTION FOR **POSSESSING** ILLEGAL DRUGS ON THE RIGHT (MM/DD/YYYY). *If you have no convictions of possessing drugs, skip and move on to question 9.*

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7. IF YOU HAVE ONLY ONE CONVICTION FOR POSSESSING DRUGS, ADD ONE YEAR TO THE DATE IN QUESTION 6 AND ENTER THE DATE ON THE RIGHT.

\_\_\_\_/\_\_\_\_/\_\_\_\_

8. IF YOU HAVE TWO OR MORE CONVICTIONS FOR POSSESSING DRUGS, ADD ONE YEAR TO THE DATE IN QUESTION 7 AND ENTER THE DATE ON THE RIGHT.

\_\_\_\_/\_\_\_\_/\_\_\_\_

9. ENTER THE DATE OF YOUR LAST CONVICTION FOR **SELLING** ILLEGAL DRUGS. *If you have no convictions of selling illegal drugs, skip to question 11.*

\_\_\_\_/\_\_\_\_/\_\_\_\_

10. IF YOU HAVE ONLY ONE CONVICTION FOR SELLING DRUGS, ADD TWO YEARS TO THE DATE IN QUESTION 9 AND ENTER THE DATE ON THE RIGHT.

\_\_\_\_/\_\_\_\_/\_\_\_\_

11. LOOK AT THE DATES YOU WROTE IN QUESTIONS 7 AND 10. *If there is only one date, copy it to the right. If there are two dates, copy the later one to the right.*

\_\_\_\_/\_\_\_\_/\_\_\_\_

## SIGNATURES

Each person signing this form certifies that the information reported on it is complete and correct. The student and at least one parent must sign and date. If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

**STUDENT:**\_\_\_\_\_  
Printed Name\_\_\_\_\_  
Signature\_\_\_\_\_  
Date**PARENT:**\_\_\_\_\_  
Printed Name\_\_\_\_\_  
Signature\_\_\_\_\_  
Date