



Financial Aid & Scholarships
171 Moultrie Street * Charleston, SC 29409
843.953.5187 * 843.953.6759 (fax)
www.citadel.edu

2009-2010 SC Need Based Grant Affidavit & Certification Form

The South Carolina Need Based Grant (SCNBG), as issued by the South Carolina Commission on Higher Education on behalf of the General Assembly, requires recipients to complete this certification and submit it to the Financial Aid Office prior to grant funds being disbursed. I certify that:

- I am a United States citizen or a permanent resident
- I am a legal resident of South Carolina
- I have filed the Free Application for Federal Student Aid (FAFSA) form and I am a “needy student” as established by the financial need analysis
- I have maintained a GPA of 2.0 or above, and have not received a South Carolina Need Based Grant for more than eight full-time semesters.
- I have earned at least 24 credit hours as a full time student at the end of the academic year or have earned at least 12 credit hours as a part time student at the end of the academic year
- I am not in default on any Federal or State student loans nor do I owe any refunds to any Federal or State financial aid programs.
- I have not been adjudicated delinquent, convicted, or pled guilty or *nolo contendere* to any felonies or any subsequent alcohol/drug related offenses under the laws of this or any other state or under the laws of the United States within the past academic year. I agree to notify the Financial Aid Office if such event occurs. I also give permission for a background check for verification if necessary.

Please check one:

- I have NOT been adjudicated delinquent, convicted, pled guilty or *nolo contendere* to any felonies and/or any alcohol/drug related misdemeanor offenses.
- I have been adjudicated delinquent, convicted, pled guilty or *nolo contendere* to the felony(ies) and/or the alcohol/drug related misdemeanor offenses that *I have listed below*.

Conviction 1: _____ Date _____ Jurisdiction _____

Conviction 2: _____ Date _____ Jurisdiction _____

I understand that any false information provided by myself or any attempt to obtain, expend, or attempt to expend any SCNBG funds for unlawful purposes or any purpose other than in payment or reimbursement for the cost of tuition, fees, and other educational costs at The Citadel will be cause for immediate cancellation of the SCNBG. I am aware that any student who has obtained a SCNBG through means of a willfully false statement or failure to reveal any material fact, condition, or circumstances affecting eligibility will be subject to applicable civil or criminal penalties, including retroactive loss of the grant.

I understand that my gift package for attendance at The Citadel may not exceed my cost of attendance. I further understand that my SCNBG is subject to reduction, cancellation, or repayment if my total gift aid package exceeds my cost of attendance.

I certify that I do meet the above requirements for the SCNBG. In addition, I understand that I must be enrolled at least part-time in order to receive the SCNBG and that I can review the most current eligibility requirements on the SC Commission on Higher Education website at http://www.che.sc.gov/New_Web/ForInstitutions/Scholarship_Guidelns.htm.

Printed Name: _____ CIT: _____

Signature: _____ Date: _____