



Angelina College

P.O. Box 1768 · Lufkin, Texas 75902-1768 · 936/639-1301 · FAX 936/639-4299

Dear Student:

Recently we received additional grant funds from the state of Texas, and you qualified to receive Texas Educational Opportunity Grant (TEOG) as a part of your financial aid package for the 2024-25 award year. One of the requirements of receiving Texas state funds is that the recipient has not been convicted of a Controlled Substance offense. This requirement is more strict than the question regarding drug convictions that is now included on the FAFSA, and therefore we must ask you to provide this Statement of Student Eligibility in order for you to receive TEOG funds. |

Please read and complete the following “Statement of Student Eligibility” and return it to the Angelina College Financial Aid Office as soon as possible. Once you have signed the Statement of Student Eligibility, you should notify the Financial Aid Office of any changes in your eligibility status regarding controlled substance convictions.

To continue to receive TEOG funds, the student must make Satisfactory Academic Progress during the initial year (a 2.0 cumulative GPA and 66.6% completion rate). After the initial year, the student must maintain a 2.5 cumulative GPA and a 75% completion rate, and complete at least 24 credit hours during the fall and spring semesters. Eligible students may receive TEOG funds for up to 75 attempted credit hours or completion of the Associates Degree.

If you have any questions regarding this request, please feel free to contact me. I can be reached via email at imontoya@Angelina.edu or by phone at (936) 633-5386.

Thank you for your assistance and best wishes for your academic endeavors.

Sincerely,
Irma Montoya, Assistant Financial Aid Director/Scholarship Coordinator

Statement of Student Eligibility

Have you ever been convicted of a felony or an offense under Chapter 481, Health and Safety Code (Texas Controlled Substances Act), or under the law of another jurisdiction involving a controlled substance as defined by Chapter 481, Health and Safety Code?

_____ No _____ Yes*

_____ High School Transcript/GED

_____ SS Proof (Males only)

I hereby certify that the information I have provided is true and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed.

Student Signature

Date

Please Print Name: _____

Student ID#: _____

*If your answer is yes, contact the financial aid office to determine your eligibility to receive a Texas Grant or TEOG funds.