

2023-2024
Student Information Form



Office of Financial Aid & Scholarships
500 College Drive, Lake Jackson TX 77566
Phone: 979-230-3377 Fax: 979-230-3543
Email: finaid@brazosport.edu

Student Name: _____ Student ID# _____ Phone # _____

FINANCIAL AID COMMUNICATION

- I understand that the Brazosport College email (BC Webmail) is the **OFFICIAL** means of communication between the Office of Financial Aid & Scholarships and students. _____ Initials
- I acknowledge that I am responsible for maintaining and reviewing my brazosport.edu email. _____ Initials
- I certify that if my address or phone number(s) change I will notify Financial Aid immediately. _____ Initials

GRANT ELIGIBILITY

- Have you 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?** Yes No

I also understand that it is my responsibility to inform the Office of Financial Aid & Scholarships, if my status concerning this statement of eligibility changes at any time while attending this institution.

TRANSCRIPT INFORMATION

- I understand that I must submit transcripts from every accredited and unaccredited institution/college and/or career school I have attended. _____ Initials
- I acknowledge that my entire academic history will be reviewed and evaluated before I can be eligible to receive any Federal Grants, Federal Direct student loans and/or State aid. _____ Initials
- I understand that I **MUST** qualify both academically and financially for all financial aid awards. _____ Initials
- Please list below previous colleges/universities attended. If you have not attended other schools write "NONE".
1. _____ 3. _____
2. _____ 4. _____

DISBURSEMENT OF FINANCIAL AID FUNDS

- I agree to allow Brazosport College (BC) to charge my account for the amount of tuition, fees, books, and other educational related charges. Bookstore charging periods will be posted at www.brazosport.edu/finaid. _____ Initials
- I understand that remaining financial aid funds will be disbursed to eligible students via direct deposit fourteen (14) days after the Official Reporting Day of each semester (the 12th day of each semester) only if I am attending courses.
Note: Loan funds are not disbursed to students until 30 days after classes begin. _____ Initials
- I understand that if I cannot attend my courses for any reason, I must drop and/or withdraw myself from classes and notify the Office of Financial Aid & Scholarship immediately. I will then be responsible for any tuition, fees, books, and other educational related charges that were charged to my account since I will no longer be eligible for financial aid. _____ Initials
- I understand that the Office of Financial Aid & Scholarships reserves the right to cancel or revise my aid, including possible repayment of aid, at any time for reasons that include but are not limited to the following: failure to make satisfactory academic progress and/or changes in my financial need. _____ Initials

SATISFACTORY ACADEMIC PROGRESS (SAP) & EDUCATIONAL GOAL

- I understand that a drop, withdrawal, notification of nonattendance, or an unofficial withdrawal from my courses may result in a decrease or cancellation of my financial aid awards. _____ Initials
- I understand that I must maintain Satisfactory Academic Process (SAP) toward the completion of my program of study to remain eligible for all financial aid each semester. _____ Initials
- I certify that I am attending BC to obtain a Bachelor's Associate's Degree Certificate in _____ and that the Federal/State Financial Aid I may receive will only be used for educational purposes and to pay the cost of attending Brazosport College. I understand that the information given to financial aid must match the major listed in Admissions. _____ Initials

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