

This form is required for all LIFE, Palmetto Fellows, HOPE and S.C. Tuition Grant recipients and must be completed each year.

If you are receiving any of the above named awards you must complete, sign and return this form to the address below. Failure to return this form could result in cancellation of funds from the State of South Carolina.

Effective July 1, 2000, the governor signed into law H4650. This law requires that *all* students who receive funds through the State of South Carolina *must* certify their eligibility for the funds as noted on the affidavit. The legislation also states that a student in default of a federal or state student loan or who owes a refund of a federal or state grant is not eligible.

I, _____ (Student's Printed Name), certify that I have **never** been adjudicated delinquent or been convicted or pled guilty or nolo contendere to any felonies or any second or subsequent alcohol or drug related offenses under the laws of this or any other state or under the laws of the United States **and** have **not** been convicted or pled guilty or nolo contendere to any second or subsequent alcohol or drug related misdemeanor offenses since one year prior to the first day of classes for the fall 2019 semester. If my status changes after signing this affidavit and before the first day of classes for the fall 2019 semester, I understand and agree that I must and will immediately report my adjudication, conviction, or plea to the Financial Aid Office and that I will lose eligibility for the 2019-2020 SC Tuition Grant and/or 2019-2020 Scholarship. I hereby give permission for a background check to be conducted to verify the above. I understand additional information may be requested after the background check has been conducted.

Any false information provided by the student or any attempt to expend any scholarship funds for unlawful purposes or any purpose other than in payment or reimbursement for the cost of attendance at the institution authorized to award the scholarship and/or grant will be cause for immediate cancellation. Any student who has obtained a scholarship 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 scholarship and/or grant. I also affirm that I am presently not in default on any Federal or State student loans nor do I owe any refunds to any Federal or State financial aid programs.

Signature: _____

Date: _____

Student ID#: _____

Submit completed form to:
Columbia International University, Financial Aid Office
7435 Monticello Road, Columbia, SC 29203
Office: (803) 807-5036 Fax: (803) 223-2505 Email: finaid@ciu.edu