

Students who are awarded the Texas Education Opportunity Grant (TEOG) must complete and sign additional statements required by the Texas Higher Education Coordinating Board who authorizes these funds each year.

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*

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

**If your answer is no, it is your responsibility to inform the financial aid office if this status changes at any time while attending Weatherford College.

Please complete the following form regarding your status of registration with Selective Service.

<h2 style="margin: 0;">SELECTIVE SERVICE STATEMENT OF REGISTRATION STATUS</h2>	
In accordance with Texas Education Code, Section 51.9095 , male students must file a Selective Service Statement of Registration Status with their institution or other entity granting financial assistance. For more information about the Selective Service System, visit sss.gov .	
Please mark one option below:	
<input type="checkbox"/> I was born female and not required to register. <input type="checkbox"/> I was born male and am under the age of 18 and not currently required to register. <input type="checkbox"/> I was born male and am REGISTERED with the Selective Service. <input type="checkbox"/> I was born male and am over the age of 18. I am not registered with Selective Service and I am not exempt from registration with Selective Service.	<input type="checkbox"/> I was born male and am EXEMPT from registration because: (please briefly explain why you are exempt in the box below.) <div style="border: 1px solid black; height: 100px; width: 100%;"></div>

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's Printed Name

 WC Student ID number

 Student's Signature

 Date