

AGENCY NAME:	Higher Education Tuition Grants Commission		
AGENCY CODE:	H060	SECTION:	12



**Fiscal Year 2018-19
Agency Budget Plan**

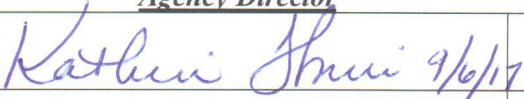
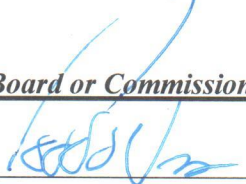
FORM A - BUDGET PLAN SUMMARY

OPERATING REQUESTS (FORM B1)	For FY 2018-19, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
	<input type="checkbox"/>	Requesting Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.
NON-RECURRING REQUESTS (FORM B2)	For FY 2018-19, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting Non-Recurring Appropriations.
	<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
	<input checked="" type="checkbox"/>	Not requesting any changes.
CAPITAL REQUESTS (FORM C)	For FY 2018-19, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting funding for Capital Projects.
	<input checked="" type="checkbox"/>	Not requesting any changes.
PROVISOS (FORM D)	For FY 2018-19, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
	<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
	<input checked="" type="checkbox"/>	Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	<i>Name</i>	<i>Phone</i>	<i>Email</i>
PRIMARY CONTACT:	Katherine Harrison Executive Director	(803) 896-1121	katie@sctuitiongrants.org
SECONDARY CONTACT:	Earl Mayo Deputy Director	(803) 896-1122	earl@sctuitiongrants.org

I have reviewed and approved the enclosed FY 2018-19 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<i>Agency Director</i>	<i>Board or Commission Chair</i>
SIGN/DATE:	 Katherine Harrison 9/6/17	
TYPE/PRINT NAME:	Katherine Harrison	Dr. Todd Voss

This form must be signed by the agency head – not a delegate.

Fiscal Year 2018-19 Budget Request Executive Summary

Agency Code: H060
 Agency Name: Higher Education Tuition Grants Commission
 Section:

BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	Tuition Grants	3,130,897				3,130,897					0.00
2	B1 - Recurring	Classified	6,806				6,806					0.00
3	B1 - Recurring	Director	2,302				2,302					0.00
4	B1 - Recurring	<AUTHORITY TO SPEND ONLY> Other Funds Authority Increase				525,000	525,000					0.00
5							0					0.00
6							0					0.00
7							0					0.00
8							0					0.00
9							0					0.00
10							0					0.00
11							0					0.00
12							0					0.00
13							0					0.00
14							0					0.00
15							0					0.00
16							0					0.00
17							0					0.00
18							0					0.00
19							0					0.00
20							0					0.00
21							0					0.00
22							0					0.00
23							0					0.00
24							0					0.00
25							0					0.00
26							0					0.00
27							0					0.00
28							0					0.00
29							0					0.00
30							0					0.00
TOTAL BUDGET REQUESTS			3,140,005	0	0	525,000	3,665,005	0.00	0.00	0.00	0.00	0.00

AGENCY NAME:	Higher Education Tuition Grants Commission		
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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	1 – Form #13094
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Tuition Grants
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$3,130,897 Federal: \$0 Other: \$0 Total: \$3,130,897
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	N/A
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark “X” for primary applicable Statewide Enterprise Strategic Objective:	
	<input checked="" type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

AGENCY NAME:	Higher Education Tuition Grants Commission		
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ACCOUNTABILITY OF FUNDS	<p>1.1.1; 1.1.2; 1.1.3; 1.1.4; 1.1.5</p> <p>These objectives are met as students receive sufficient funding to afford to pay college tuition. Additionally, the request advances these objectives by increasing the maximum and average Tuition Grant funds provided to eligible college students.</p> <p>Evaluation of funds occurs in the form of compliance audits at each institution enrolling eligible students. Agency management will continue to provide sound policies and procedures for managing program funds and will provide training, at least annually, to financial aid personnel who administer the program for their institution.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	Post-Secondary students eligible for the Program per Statute
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>An increase of \$3,130,897 in grants funding is being requested for 2018-19 to provide a \$3,350 program-wide maximum grant for an estimated 13,880 eligible students. This request enables the Maximum Grant to be increased by \$150 from the current 2017-2018 Maximum Grant of \$3,200. This increase of \$3.13 million in 2018-2019 would enable the Maximum Grant to take an incremental step toward matching the Statutory maximum as found in SC Code of Laws, Title 59, Chapter 113, Section 30, Subsection C: “The maximum amount may not exceed the average state appropriation for each full-time student enrolled in the state-supported institutions of higher learning with four-year undergraduate degree programs in the previous year” (for the most recent academic year, the average state appropriation for each FTE in the public college sector was \$3,732).</p> <p>Approximately \$500,000 of the requested new appropriations will be used to support eligible students enrolling in new non-traditional programs geared toward adult learners, allowing for flexibility in educational delivery methods.</p> <p>METHOD OF CALCULATION: The amount was calculated using current funding levels with the current number of eligible students and accounting for the potential for a potential 4-5% increase in eligible students. A difference in actual eligible students versus those projected to be eligible would be the only deviation.</p> <p>FUTURE IMPACT: The impact of adopting this request would be the need to maintain this amount annually to maintain the Maximum Grant established using these funds. The impact of not honoring the request is that Maximum Grants remain at or near current year levels, potentially leading to increased student loan debt levels as students search for ways to make up the difference. There are only two sources of funds available for this request; recurring state appropriations and lottery funds.</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	2 – Form #13095
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Classified
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$6,806 Federal: \$0 Other: \$0 Total: \$6,806
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	N/A
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark “X” for primary applicable Statewide Enterprise Strategic Objective:	
	<input checked="" type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

AGENCY NAME:	Higher Education Tuition Grants Commission		
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ACCOUNTABILITY OF FUNDS	<p>1.1.1; 1.1.2; 1.1.3; 1.1.4; 1.1.5; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 3.1.1</p> <p>These funds are used to directly support the administration of the Tuition Grants program, including employee compliance with statute, program policies, and data and information security, as outlined in each agency objective.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	Agency personnel
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>An increase of \$6,806 in funding for the agency's Classified employee budget is being requested. A portion of this request (\$3,206) is being requested to replenish the Classified budget back to the level it was prior to funds being used to cover an increase to the Director's salary at the request of the Agency Head Salary Commission in January 2017. Another portion of this request (\$3,600) is being requested to sustain a pay raise, within pay band, for an employee who has recently taken on a substantial increase in job duties and responsibilities.</p> <p>METHOD OF CALCULATION: The amount was calculated by subtracting the Director's salary prior to the increase from the Director's salary after the AHSC-approved increase, then adding the amount of a recent employee pay raise due to increased responsibilities.</p> <p>FUTURE IMPACT: The impact of adopting this request would be the need to maintain this amount annually to ensure the agency is able to cover the payroll for classified employees. The impact of not honoring the request is that payroll liabilities will need to be transferred from other potentially available sources, such as employee benefits or Tuition Grants. Transferring funds from Tuition Grants would be detrimental to our agency's primary program audience.</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	3 – Form #13096
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Director
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$2,302 Federal: \$0 Other: \$0 Total: \$2,302
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	N/A
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark “X” for primary applicable Statewide Enterprise Strategic Objective:	
	<input checked="" type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

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ACCOUNTABILITY OF FUNDS	<p>1.1.1; 1.1.2; 1.1.3; 1.1.4; 1.1.5; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 3.1.1</p> <p>These funds are used to directly support the administration of the Tuition Grants program, including employee compliance with statute, program policies, and data and information security, as outlined in each agency objective.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	Agency personnel
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>An increase of \$2,302 in funding for the agency's Director budget is being requested. This request will align the agency's current Director budget with the AHSC-approved salary for the agency director effective June 2017.</p> <p>METHOD OF CALCULATION: Amount authorized by Agency Head Salary Commission for Director salary</p> <p>FUTURE IMPACT: The impact of adopting this request would be the need to maintain this amount annually to ensure the agency is able to cover the Director salary. The impact of not honoring the request is that payroll liabilities will need to be transferred from other potentially available sources, such as employee benefits or Tuition Grants. Transferring funds from Tuition Grants would be detrimental to our agency's primary program audience.</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	4 – Form #13097 <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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TITLE	Tuition Grants <i>Provide a brief, descriptive title for this request.</i>
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AMOUNT	General: \$0 Federal: \$0 Other: \$525,000 (NO NEW FUNDS REQUESTED; ONLY SPENDING AUTHORITY) Total: \$525,000 (NO NEW FUNDS REQUESTED; ONLY SPENDING AUTHORITY) <i>What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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NEW POSITIONS	N/A <i>Please provide the total number of new positions needed for this request.</i>
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FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply:
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience
	<input type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input checked="" type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
<input type="checkbox"/> Related to a Non-Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark “X” for primary applicable Statewide Enterprise Strategic Objective:
	<input checked="" type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	

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ACCOUNTABILITY OF FUNDS	AUTHORITY REQUEST ONLY – NO NEW FUNDS
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	AUTHORITY REQUEST ONLY – NO NEW FUNDS
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>THIS IS NOT A REQUEST FOR NEW FUNDS. The Higher Education Tuition Grants Commission is proactively requesting an increase in “Authority to Spend” funds it receives annually through the Children’s Educational Endowment Fund. The current Spending Authority is \$4,975,000. In the event funding for this program is increased and the agency receives funds above and beyond this amount, we will be unable to spend beyond our current spending authorization. 100% of the funds received through the Children’s Educational Endowment Fund are spent on need-based tuition grants directly to eligible college students.</p> <p>FUTURE IMPACT: The impact of adopting this request would be to allow the agency the authority to spend potential future increases in appropriations received through the fund. The impact of not honoring the request is that the agency would be required to cap annual spending at its current Spending Authority until authorization is received from the Other Funds Oversight Committee. Approving this increase in Spending Authority now will eliminate the need for appearance before the Committee to request authority to spend funds that have already been appropriated to the agency.</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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SUMMARY	<p>The 3% reduction would effectively reduce the Tuition Grant amount by \$60 for over 13,200 students. While some students and families may be able to absorb this reduction in their tuition grant amount, many others could not. The neediest students would be required to replace this amount with some other source of funding, if available. The most likely solution to the problem would be that these students would need to increase the amount of their student loans, if they are not already receiving the maximum amount available. This would cause a burden by increasing the students' debt level and required loan payment amounts upon graduation, which would also have an impact on the state's overall average student loan indebtedness numbers.</p> <p>Method of calculation: General Fund 3% Reduction amount divided by the total number of Tuition Grant recipients from the most recent academic year</p>
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Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations and provide the method of calculation for anticipated reductions. Agencies should prioritize reduction in expenditures that have the least significant impact on service delivery.

AGENCY COST SAVINGS PLANS	<p>Due to the size of our agency our most recent annual operating costs being less than \$96,000, there is no one measure the agency could take to reduce expenses by \$50,000 or more. However, the agency does regularly review monthly and annual expenditures to determine if reductions can be made in operating expenses. Examples of these types of savings include:</p> <ul style="list-style-type: none"> • Eliminating the agency's fax machine and moving to electronic communications with customers. This decision will save approximately \$800 per year. • Continuing to notify applicants of their eligibility status electronically saves the agency \$16,000 annually, not counting the cost of paper and postage that would be required if notices could not be sent electronically. <p>Recently, the agency has invested some of these savings into information technology-related training and certifications for agency personnel with the long-term goal of eliminating the need for the agency's current IT contractor at a cost of \$11,000-\$15,000 per year.</p>
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What measures does the agency plan to implement to reduce its costs and operating expenses by more than \$50,000? Provide a summary of the measures taken and the estimated amount of savings. How does the agency plan to repurpose the savings?

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FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS

TITLE	Tuition Grants
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Provide a brief, descriptive title for this request.

EXPECTED SAVINGS TO BUSINESSES AND CITIZENS	This change will result in time savings and reduction of burden for financial aid administrators at 21 colleges and for an estimated 14,000 SC residents who are required to self-certify eligibility prior to receiving Tuition Grant funds
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What is the expected savings to South Carolina’s businesses and citizens that is generated by this proposal? The savings could be related to time or money.

FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply: <input checked="" type="checkbox"/> Repeal or revision of regulations. <input type="checkbox"/> Reduction of agency fees or fines to businesses or citizens. <input checked="" type="checkbox"/> Greater efficiency in agency services or reduction in compliance burden. <input type="checkbox"/> Other
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METHOD OF CALCULATION	<p>(Estimated) 2 hours per 14,000 students at the institutional level = <u>28,000 working hours</u> to comply with this statutory requirement. This time could be efficiently spent in numerous other ways (i.e. providing financial planning and student loan repayment information to students, completing student files in a more timely manner, providing financial aid application information to prospective students, assisting families with completing the FAFSA and applying for scholarships)</p> <p>(Estimated) .5 hours per 14,000 students completing and submitting the affidavit = <u>7,000 hours</u> currently required to self-certify eligibility</p>
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Describe the method of calculation for determining the expected cost or time savings to businesses or citizens.

REDUCTION OF FEES OR FINES	N/A – Agency does not assess fines or fees
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Which fees or fines does the agency intend to reduce? What was the fine or fee revenue for the previous fiscal year? What was the associated program expenditure for the previous fiscal year? What is the enabling authority for the issuance of the fee or fine?

REDUCTION OF REGULATION	SC Code of Laws Section 59-113-20(f)
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Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?

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SUMMARY

To meet the requirement of this section of statute, colleges participating in the Tuition Grants Program are required, annually, to collect an affidavit of eligibility certifying each otherwise eligible student does not have a felony record or a second or subsequent drug or alcohol-related misdemeanor record prior to authorizing disbursement of the Tuition Grant funds to the student’s account. Based on a survey of financial aid administrators, of the students who failed to complete the affidavit in the most recent academic year, none would have been disqualified due to having a felony or second or subsequent drug or alcohol-related misdemeanor. They simply did not complete the form in order to receive the grant, despite multiple attempts by the financial aid office to obtain the affidavit.

Financial aid administrators spend time every year to update the affidavit, notify students of this requirement, track student completion of the form, and perform numerous follow-ups in an effort to “chase down” those students who fail to complete the affidavit. The greatest burden of this requirement is that financial aid staff members exert a great amount of time and effort to collect affidavits from thousands of students to self-certify they do not have an offense on their record that would disqualify them when in reality, there are very few (in the case of the past year, zero) students who would have been disqualified for this reason.

In addition, in order to qualify for the Tuition Grant, students must meet all eligibility requirements for Federal Student Aid through the US Department of Education. The Free Application for Federal Student Aid (FAFSA) serves as the application for the Tuition Grant, and the FAFSA already requires certification by the student concerning the drug and alcohol-related misdemeanor offenses. If a student does not qualify for federal aid based on these offenses, they will automatically be disqualified from receiving the Tuition Grant. Having eligible students self-certify their eligibility again at the institutional level is a duplication of a process already required by the US Department of Education.

Provide an explanation of the proposal and its positive results on businesses or citizens. How will the request affect agency operations?