

**Office of Financial Aid and Scholarships  
University of South Carolina Upstate  
HEC Building, Suite 2081  
800 University Way, Spartanburg SC 29303  
Phone 864-503-5340 Fax 864-503-5974**

*South Carolina Need Based Grant  
2010-2011 Required Certification and Affidavit Form*

**The S.C. Need Based Grant regulations issued by the S.C. Commission on Higher Education on behalf of the S.C. General Assembly require recipients to complete this document and submit it to our office prior to grant funds being officially disbursed. Awards are based on full-time enrollment at USC Upstate. Please complete this form and return it to the above address as soon as possible. Full and updated regulations may be found at [www.che.sc.gov](http://www.che.sc.gov) . Your signature is required.**

Print Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I hereby certify that I meet the following:**

- Good moral character.
- Not been convicted of a crime and having no criminal record.
- Will use the S.C. Need Based Grant funds for appropriate educational purposes.
- Do not owe a refund or repayment on any State or Federal educational grant.
- Not in default on any State or Federal Loan.
- Legal resident of the State of South Carolina for at least twelve months.
- **Have not received the S.C. Need Based Grant for more than six semesters at any institution.**

This is to certify that I have never been convicted of any felonies and 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. I understand that if I have been convicted of an alcohol or drug related misdemeanor offense, I am ineligible only for the next academic year of eligibility after the conviction occurred. I understand that providing any false information or attempting to obtain, expend, or attempt to expend any S.C. Need Based Grant for unlawful purposes or any other purpose other than in payment or reimbursement for the cost of tuition and fees and other educational costs will be cause for immediate cancellation of the S.C. Need Base Grant. I further understand that if I obtain a S.C. Need Base Grant through a willfully false statement or failure to reveal any material fact, condition, or circumstance affecting eligibility, I will be subject to applicable civil or criminal penalties including loss of the S.C. Need Based Grant.

\_\_\_\_ I certify that **I DO** meet the above requirements for the S.C. Need Based Grant.

\_\_\_\_ I certify that **I DO NOT** meet the above requirements. Please cancel my State Need Based Grant.

*(over)*

By my signature above I understand and affirm the above certification and that I am of good moral character. I understand that any false information I provide or any attempt to expend any scholarship and/or grant 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. I understand that if I obtain the S.C. Need Based Grant 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 S.C. Need Based Grant. 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.

***\*\*\*Renewal of this grant is based on funding and you must meet all eligibility requirements as outlined in the full regulations. If you received the S.C. Need Based Grant in the previous year, you must earn 24 hours for the academic year with a 2.0 cumulative GPA.***

***\*\*\* If you drop below full-time enrollment (12 hours) during the 100% period, you may not be eligible for the S.C. Need Based Grant and you may be required to repay the full awarded amount \*\*\****