2021-2022 Drug Conviction Worksheet for FAFSA Question 23

possessing or selling illegal drugs or because you left question 23 blank. Complete this worksheet to determine if you are eligible for Federal Title IV financial aid. Answer **YES** or **NO** the questions below. _ 1. Have you ever received Federal Title IV financial aid, Federal Student grants, Federal student loans or Federal Work Study? 2. Have you been convicted for the possession or sale of Illegal drugs for an offense that occurred while you were receiving Federal Title IV financial aid (grants, loans and\or Federal Work Study)? Only include federal and/or state convictions. Do not include any convictions that have been removed from your record or that occurred before you turned age 18, unless you were tried as an adult. 3. Did the offense for possessing or selling illegal drugs occur during a period of enrollment for which you were receiving Federal Title IV financial aid (grants, loans and/or Federal Work Study)? 4. Have you completed an acceptable drug rehabilitation program since your conviction? An acceptable drug rehabilitation program must include at least two unannounced drug tests, and: (1) Be qualified to receive funds from a federal, state or local government or from a federally or state-licensed insurance company; or (2) be administered or recognized by a federal, state or local government agency or court or a federally or state-licensed hospital, health clinic or medical doctor. 5. Do you have more than two convictions for possessing illegal drugs? Only count convictions for offenses that occurred during a period of enrollment for which you were receiving Federal Title IV financial aid (grants, loans and/or Federal Work Study). If you answered Yes, to question 5, you are not eligible for Federal Title IV financial aid for this school year unless you completed an acceptable drug rehabilitation program or passed two unannounced drug tests administered by an acceptable drug rehabilitation program. If No, go to question 6 on this worksheet. 6. Do you have more than one conviction for selling illegal drugs? Only count convictions for offenses that occurred during a period of enrollment for which you were receiving Federal Title IV financial aid (grants, loans and/or Federal Work Study). If your answered Yes to question 6, you are not eligible for Federal Title IV financial aid for this school year unless you completed an acceptable drug rehabilitation program or passed two unannounced drug tests administered by an acceptable drug rehabilitation program. If No, go to question 7. 7. Write the date of your last conviction for possessing illegal drugs. _____/____ If you have no convictions for possessing drugs, skip to question 9.

You must complete this worksheet because you reported on your 2020-2021 FAFSA that you had a conviction for

| Student Name | Student ID# |
|--|---|
| date here:/_ 8a. If you have two co | onviction for possessing drugs, add one year to the date in question 7 and write that/ onvictions for possessing drugs, add two years to the date in question 7 and write that/ |
| | r last conviction for selling illegal drug:/ ions for selling drugs, skip to question 11. |
| 10. If you have only one date here:/_ | conviction for selling drugs, add two years to the date in question 9, and write the |
| | vou wrote on lines 8, 8a and 10. If there is only one date, copy that date on line 11. If there are write the latest date here:/ |
| What you must do next: | |
| documentation and subr | o substantiate the dates and offenses you reported on this worksheet. Make copies of that mit those copies, along with this signed worksheet, to the JALC Financial Aid Office with your all documents submitted. |
| The Financial Aid Office of Federal Title IV financial | will review this worksheet and your supporting documentation to determine if you are eligible cial aid. |
| Student Certification: | |
| Initial each statement: | |
| I hereby declare the knowledge. | that all information reported on this document is true, complete and accurate to the best of my |
| I understand that and/or repayment of fin | t any false statement or misrepresentation will be cause for denial, reduction, cancellation ancial aid. |
| | |
| Student Signature | Date |

Return this form, along with supporting documentation, John A. Logan College, Financial Aid Office, via:

Fax: (618)985-4116

For FAFSA Question 23 – Pg. 2

Drop off: John A. Logan College, Room C210 between 8:00 a.m. and 4:30 p.m. **Mail:** John A. Logan College, 700 Logan College Dr., Carterville, IL 62918