

Drug Conviction Worksheet 2018/2019

UCM use only

DRUG19

Student's Name (please print) 700

UCM ID Number

On your **2018/2019** Free Application for Federal Student Aid (FAFSA), you either failed to respond to the 'drug conviction' questions **or** answered that you were convicted of the sale or possession of illegal drugs **while you were receiving federal student aid**.

In accordance with federal regulations, processing of your FAFSA is suspended pending resolution of this issue. Please respond **accurately and honestly** to the following questions:

1. Were you **convicted** (federal or state) of selling or possessing illegal drugs for an offense that occurred during a period of enrollment when you were receiving federal aid (grants, loans or Work-Study employment)? Do not count convictions that have been removed from your record **or** that occurred before you turned age of 18 (unless you were tried as an adult):

____ No (go to 7), ____ Yes (go to 2).

2. Have you completed an acceptable/approved drug rehabilitation program since this conviction?

____ Yes (go to 7), ____ No (go to 3).

***If you answered "Yes" to question 2 you must submit official documentation showing that you successfully completed a federally or state-licensed drug rehabilitation program with at least two unannounced drug test.**

***If you answered "No" to question 2 but plan to complete a federally or state-licensed drug rehabilitation program with at least two unannounced drug test you must submit official documentation showing your successful completion.**

3. Do you have **more than two** convictions for **possessing** illegal drugs during a period of enrollment when you were receiving federal aid?

____ Yes (go to 5), ____ No (go to 4).

4. Do you have **more than one** conviction for **selling** illegal drugs during a period of enrollment when you were receiving federal aid?

____ Yes (go to 6), ____ No (go to 7).

5. The date of your last conviction (if any) for **possessing** illegal drugs: _____

6. The date of your last conviction (if any) for **selling** illegal drugs: _____

7. _____

Student's Signature (required)

Date

Complete and submit this document to the UCM Office of Student Financial Services in person (1100 Ward Edwards Bldg.) or by mail (Student Financial Services, P.O. Box 800, Warrensburg MO 64093-5178), or by fax (660-543-8080).