

FEDERAL STUDENT AID SCHOOL ELIGIBILITY CHANNEL SCHOOL PARTICIPATION TEAM DALLAS TEAM

Dr. Dana G. Hoyt President Sam Houston State University 1806 Avenue J Huntsville, TX 77340-0000

08/27/2014

OPE ID 00360600

Acknowledgement Notice

Reason for Action: Officials/Directors of Institution

Dear Dr. Hoyt:

The Dallas School Participation Division acknowledges receipt of the documentation that Sam Houston State University submitted regarding its officials/directors of institution.

We have updated our records to include the following:

Changed official(s):

Dr. Dana G. Hoyt, President

Please print a copy of this notice and the Eligibility and Certification Approval Report (ECAR) from the EAPP website at http://eligcert.ed.gov/eapp/owa/ecar. This Acknowledgement Notice is an addendum to the Institution's Program Participation Agreement (PPA). Please retain this notice and the ECAR with the PPA for compliance purposes.

Should you have any questions, please contact Laura Pankey at (214) 661-9467.

Sincerely,

Kim Peeler

Team Lead

School Participation Team,

Kin Peccer

cc: Lydia T. Hall, Director, Student Financial Aid

DATE PRINTED: 08/28/2014

PAGE A - 1



UNITED STATES DEPARTMENT OF EDUCATION

SCHOOL PARTICIPATION MANAGEMENT DIVISION ELIGIBILITY AND CERTIFICATION APPROVAL REPORT

NAME AND ADDRESS OF INSTITUTION: Sam Houston State University

1806 Avenue J

Huntsville, TX 77340-0000

TYPE OF INSTITUTION: Public

CONGRESSIONAL DISTRICT: 02

DEPARTMENT REGION: 06

SCHOOL PARTICIPATION TEAM: 06

ACTION DATE: 04/04/2013

ACTION: Reapprove Elig/Full Cert

OPE ID: 00360600

TIN: 746001430

IPEDS ID: 227881

DUNS NBR: 074179896

FEDERAL PELL GRANT ID: 003606

FEDERAL FAMILY EDUCATION LOAN ID: 003606

FEDERAL DIRECT STUDENT LOAN ID: G03606

FEDERAL PERKINS LOAN ID: 004110

FEDERAL SCHOOL CODE: 003606

FEDERAL WORK STUDY ID: 004110

FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT ID: 004110

ACADEMIC CALENDAR: Semester Hours

EDUCATIONAL PROGRAM LEVELS OFFERED:

Bachelor's Degree

Master's Degree or Doctor's Degree

Professional Certification

ELIGIBLE: Y

INITIAL APPROVAL DATE: 12/01/1965

CERTIFIED: Certified

LOAN DEFERMENT: Y

PROGRAM PARTICIPATION AGREEMENT

WAIVER(S):

PROGRAM

*** End of Waivers ***

EFFECTIVE DATE: 04/16/2013

TUDEN A TRANSPORTER OF TOTAL

EXPIRATION DATE: 03/31/2019

THE INSTITUTION IS ELIGIBLE TO APPLY FOR PARTICIPATION IN THE FOLLOWING PROGRAMS AUTHORIZED UNDER THE HIGHER EDUCATION ACT OF 1965, AS AMENDED:

TITLE I: Y

TITLE IV: Y
TITLE V: Y

TITLE VII: Y

TITLE X: Y

TITLE XIII: Y

TITLE III: Y

TITLE VI: Y

TITLE XI: Y

TITLE XII: Y

TITLE XIV: Y

Program: TEACH GRANT Certif

Certified: Y

DATE: 11/03/2010

TITLE IV STUDENT FINANCIAL ASSISTANCE PROGRAMS

APPROVAL APPROVAL
CERTIFIED DATE PROGRAM CERTIFIED DATE

FWS Com Serv Y 12/01/1965 FWS Priv Sec Empl Y 12/01/1965 FWS Job Loc Dev Y 01/01/1985 FFEL Staff Y 01/01/1985

FFEL Staff Unsub	Y	12/01/1965	FFEL PLUS	Y	12/01/1965
FPerkins	Y	12/01/1965	FSEOG	Y	12/01/1965
FPell	Y	07/01/1972	FDSLP Staff	Y	07/01/1994
FDSLP Staff Unsub	Y	07/01/1994	FDSLP PLUS	Y	07/01/1994

**** End of Section A ****



SCHOOL PARTICIPATION MANAGEMENT DIVISION ELIGIBILITY AND CERTIFICATION APPROVAL REPORT

DATE PRINTED: 08/28/2014

ACCREDITATION SECTION

PAGE B - 1

INSTITUTION NAME: Sam Houston State University

OPE ID: 003606 00

INSTITUTION TYPE: Public

ACCREDITATION

ACCREDITING AGENCY

Southern Association of Colleges and Schools Commission on Colleges

DESIGNATION SCOPE YEAR YEARS

Primary Institutional 2009 10

Colleges

**** End of Accreditation Section ****



SCHOOL PARTICIPATION MANAGEMENT DIVISION ELIGIBILITY AND CERTIFICATION APPROVAL REPORT

DATE PRINTED: 08/28/2014

STATE AUTHORIZATION SECTION

PAGE C-1

INSTITUTION NAME: Sam Houston State University

OPE ID: 003606 00

INSTITUTION TYPE: Public

STATE AUTHORIZATION

STATE AGENCY

TX Texas Higher Education Coordinating Board

**** End of State Authorization Section ****



SCHOOL PARTICIPATION MANAGEMENT DIVISION ELIGIBILITY AND CERTIFICATION APPROVAL REPORT

DATE PRINTED: 08/28/2014

OFFICIALS SECTION

PAGE D - 1

INSTITUTION NAME: Sam Houston State University

OPE ID: 003606 00

INSTITUTION TYPE: Public

OFFICIALS

NAME AND ADDRESS	<u>TITLE</u>	PHONE <u>FAX</u>	E-MAIL
Hoyt, Dana G 1806 Avenue J Administrative Building, Room 303 Huntsville, TX 77340	President	(936) 294-1013 (936) 294-1465	dghoyt@ shsu.edu
Hall, Lydia T 1903 University Estill Building, Room 201 Huntsville, TX 77340	Director, Student Financial Aid	(936) 294-3608 (936) 294-3668	fao.hall@ shsu.edu
Hernandez, Carlos 1806 Avenue J, Suite 308 Administrative Building Huntsville, TX 77340	Vice President for Finance & Operations	(936) 294-1018 (936) 294-1963	carlosh@ shsu.edu

**** End of Officials Section ****



SCHOOL PARTICIPATION MANAGEMENT DIVISION ELIGIBILITY AND CERTIFICATION APPROVAL REPORT

DATE PRINTED: 08/28/2014

SERVICER INFORMATION SECTION

PAGE H - 1

INSTITUTION NAME: Sam Houston State University

OPE ID: 003606 00 INSTITUTION TYPE: Public

SERVICER INFORMATION

SERVICER NAME	CONTACT NAME	SERVICES OFFERED
Campus Partners 2400 Reynolda Road Winston-Salem, NC 27106	Paul Lombardo	Performing Loan Servicing
Collections Unlimited 2000 Dairy Ashford Houston, TX 77094	Mr. Terry Wunsch	Performing Loan Collection
College Board Cisco College Abilene Center Abilene, TX 79602	MIchelle Overstreet	Ability To Benefit Tester
Conserve-Continental Service Group 200 Crosskeys Office Park Fairport, NY 14450	Ms. Colleen Stevens	Performing Loan Collection
Higher One 115 Munson Street New Haven, CT 06511	Thomas Kavanaugh	Disbursing Financial Aid
Williams & Fudge, Inc. 300 Chatham Avenue Rock Hill, SC 29730	Mr. Christopher P Ruh	Performing Loan Collection

**** End of Servicer Information Section ****

Return to the Application Index

Do not click the browser's Back but	
You must click the "OK/Save Data"	button at the bottom of the page to save your changes.

Section L (page 1 of 1) Help Your Officials/Directors of In **OPE ID: 00360600**

School Name:

Sam Houston State University

1806 Avenue J Huntsville, TX

Your Officials/Directors of Institution application has been submitted.

Section L. Please have the appropriate person in authority review, sign, and date this document.

I hereby certify that, to the best of my knowledge and belief, all information in this document is true and correct. I understand that if my institution provides false or misleading information, (a) the U.S. Department of Education may deny the institution's request for eligibility to participate in federal student financial aid programs and/or revoke eligibility once it has been granted and (b) the institution may be liable for all federal student financial aid funds it or its students received. I also understand that I may be subject to a fine of not more than \$25,000 or imprisonment of not more than five years, or both, for misinformation that is material to receipt and stewardship of federal student financial aid funds.

mismormation that is material to receipt and stewardship of federal student financial aid funds.
Signature of President/CEO/Chancellor
- Climat tout
Date
08/11/2014 (mm/dd/yyyy format)
Name of institution
Sam Houston State University
Name of President/CEO/Chancellor
☑ Check here if this is the same person as in Question 10 (Dr. Dana L. Hoyt). If not, complete the information below.
Prefix First name MI Last name Suffix
Job Title
Business street address
City
State Zip Zip+4
Foreign Province Country Postal Code
Telephone number (including area code)
() ext:
Fax number (including area code)
() ext:
Telephone Number (Complete international telephone number) Foreign fax
(Complete international telephone number)
E-mail address

	age 2
If you did NOT make any changes on this page, you may return to the <u>Index</u> to select another section of the application.	
If you made changes on this page, please check the desired action below and then click on the "Save Data" button.	
You must click the "OK/Save Data" button to save your changes.	
Please select one of the following 3 actions:	
• Check here if you are satisfied with your entries on this page.	
O Check here to perform the action selected below even if there are edit errors on this page. (Note: These errors must be corrected before you submit the application.)	
Check here if you do not want to update your data or start an application. (Use this option if all you wish to do is review your data.)	
Where do you want to go next?	
 ○ Redisplay this page ● Continue to Section M ○ Go to Section	
After you finish your application, you MUST use the Application Submission page to submit it.	ge
OK/Save Data Or Restore Original Values	

Please Print this page and submit it with the supporting documents listed in Section M.

Click here to display your entire application to print and keep it for your records.



Sam Houston State University

A Member of The Texas State University System
FINANCIAL AID AND SCHOLARSHIPS OFFICE

To:

Dr. Dana L. Hoyt

President

Through:

Dr. Heather Thielemann

Vice President for Enrollment Management

From:

Mrs. Lydia Hall

Director of Financial Aid & Scholarships

Date:

August 11, 2014

Subject:

Certification of Eligibility

Pursuant to name changes in the University positions of President and in the appointment of Vice President for Finance and Operations, the Application for Approval to Participate in Federal Student Financial Aid Programs has been updated for recertification, and is being submitted for University Presidential approval. The updated information is listed below.

Name and email change for University

President

Dr. Dana L. Hoyt; dghoyt@shsu.edu

Title change of Chief Fiscal/Financial

Officer

Dr. Carlos Hernandez, Vice President for Finance and Operations

Approved ______ Disapproved

Date

Per instructions, the form has been transmitted electronically. After approval, the signature pages, Section L, will be mailed to the Department of Education.

If there are questions or concerns, do not hesitate to contact Lydia Hall on line 294-3608. If this application meets with your approval, please sign where indicated, and call Melissa Gandy on line 294-1750 for pick up. Thank you!

/MAG

Attachment(s): 1

Gandy, Melissa

From:

Hall, Lydia

Sent:

Thursday, August 28, 2014 8:22 AM

To:

Gandy, Melissa

Subject:

FW: Acknowledgement Notice for Sam Houston State University (00360600)

Importance:

High

FYI

From: Pankey, Laura [mailto:Laura.Pankey@ed.gov]

Sent: Thursday, August 28, 2014 6:49 AM

To: Hoyt, Dana G.; Hall, Lydia

Cc: Peeler, Kim; Moya, Jesus; Thornton, Cynthia

Subject: Acknowledgement Notice for Sam Houston State University (00360600)

Importance: High

Dear Dr. Hoyt:

The Dallas School Participation Division has completed its review of the documentation that Sam Houston State University submitted regarding a Officials/Directors of Institution. We have updated our records to include the changes.

Please access the PPA/ECAR page, http://eligcert.ed.gov/eapp/owa/ppaecar, on the EAPP web site and print and review a copy of the Eligibility and Certification Approval Report (ECAR) and the Update Acknowledgement Letter.

Should you have any questions, please contact me at (214) 661-9467.

Laura Pankey

Program Support Assistant Department of Education/Federal Student Aid 1999 Bryan St Ste 1410 Dallas, TX 75201-6817 P: 214.661.9467

F: 214.661.9662

Federal Student Aid

Please consider the environment before printing this e-mail

Application for Approval to Participate in Federal Student Financial Aid Programs

School Eligibility Channel, U.S. Department of Education

Application Status

OPE ID: 00360600

School Name: Sam Houston State University

Your Officials/Directors of Institution application was submitted on 08/11/2014.

Your Officials/Directors of Institution application was last resubmitted on 08/19/2014.

Awaiting initial submission or ED's review of supporting documentation.

Refer to <u>Section M</u> for a list of all supporting documentation REQUIRED for this application which MUST be sent to ED separately.

Send the signature page (Section L) and copies of required supporting documents to us. Regular mail/commercial overnight mail:

U.S. Department of Education, FSA School Eligibility Channel Integrated Partner Management 830 First Street, NE Washington, DC 20202-5402

Display your PPA/ECAR

Return to the Application Index

OPE ID: 00360600

School Name:

Sam Houston State University

Your Officials/Directors of Institution application has been submitted.

1806 Avenue J Huntsville, TX

Electronic Application

Section A. Please answer these general questions.

1. Tell us why you are submitting the application.

Officials/Directors of Institution

2. What is the name of your institution?

Sam Houston State University

- 3a. Do you have another name such as trade name or d/b/a name under which you legally do business as a postsecondary educational institution?
- 3b. During the past four years, have you had another name that you have not previously reported to the Department of Education?
- 4. Check here if you are an institution resulting from a merger in the past four years that you have not previously reported to the Department of Education, and give the OPE ID numbers of the former (premerger) institutions.
- 5. What is your 8-digit OPE ID number?

00360600

6a. What is your 9-digit Tax Identification Number (TIN) assigned by the IRS?

746001430

6b. What is your 9-digit DUNS number?

074179896

7. What was your most recently completed award year?

Beginning Date: 07/01/2013

Ending date: 06/30/2014

8. What is your current award year?

Beginning Date: 07/01/2014

Ending date: 06/30/2015

9. Does your institution have a website (or home page) on the Internet?

www.shsu.edu

10. Who is your chief executive officer (CEO)/president/chancellor?

Name	Dr. Dana G. Hoyt
Job title	President
il .	1806 Avenue J Administrative Building, Room 303 Huntsville, TX 77340

Telephone number	(936) 294-1013
Fax number	(936) 294-1465
E-mail address	dghoyt@shsu.edu

11. Who is chief your fiscal officer/financial officer?

Name	Dr. Carlos Hernandez
Job title	Vice President for Finance & Operations
Business address	1806 Avenue J, Suite 308
	Administrative Building
	Huntsville, TX 77340
Telephone number	(936) 294-1018
Fax number	(936) 294-1963
E-mail address	carlosh@shsu.edu

12. Who is your chief financial aid director?

Name	Mrs. Lydia T. Hall
Job title	Director, Student Financial Aid
Business address	1903 University
	Estill Building, Room 201
	Huntsville, TX 77340
Telephone number	(936) 294-3608
Fax number	(936) 294-3668
E-mail address	fao.hall@shsu.edu

13. To whom do you wish us to send all ongoing correspondence and publications concerning federal student financial aid?

X Check here if this is the same person as in Question 12.

Name	Mrs. Lydia T. Hall	
Job title	Director, Student Financial Aid	
Mailing address	1903 University	
	Estill Building, Room 201	
	Huntsville, TX 77340	
Telephone number	(936) 294-3608	
Fax number	(936) 294-3668	
E-mail address	fao.hall@shsu.edu	

- 14. Whom should we contact if we have questions about information in this form?
 - **X** Check here if this is the same person as in Question 12.

Electronic Application Page 3 of 9

Section B. Please tell us about your accreditation and state authorization to provide postsecondary education.

15. What is your accrediting agency?

Accreditor Abbreviation	Name of Accreditor	Year Last		Primary	Institution- wide/ Programmatic	End Date
	Southern Association of Colleges and Schools Commission on Colleges	2009	10	i i	Institution- wide	

16. Check here if you do **not** offer a flight program.

If you offer a flight program, provide your certification number from the U.S. Federal Aviation Administration (FAA).

Number Date FAA certification expires

- 17. What state agencies authorize or license you to provide postsecondary educational programs? (For this question, do not include educational programs that are provided at "distance learning" sites.
 - a. Check here if you are a public institution and do **not** provide at least 50% of an educational program outside your state.
 - b. Check here if you are a public institution and you **do** provide at least 50% of an educational program outside your state and list (for each state other than your "home" state) each state agency that licenses you, or otherwise provides you with legal authority, to provide postsecondary educational programs.
 - c. Check here if you are a private institution and list each state agency that licenses you, or otherwise provides you with legal authority, to provide postsecondary educational programs.
 - d. Check here if you or your programs are not required to be authorized or licensed by a state agency.

Name and Address of Agency	Telephone/ Fax	E-mail Address	End Date
TX Texas Higher Education Coordinating Board	(512) 483-6200		
7715 Chevy Chase	(512) 483-6168		
Austin, TX 78711			

Section C. Please describe your institutional control and structure.

- 18. Check your type of institutional structure.
 - X Public institution

Private nonprofit 501(c)(3) institution

For-profit institution

Foreign institution (check one)

Public institution

Private non-profit institution

For-profit institution

Electronic Application Page 4 of 9

19. Check here if this is a request for initial certification.

For all other institutions, since you were last certified to participate in federal student financial aid programs, has your institutional structure changed?

If yes, give the date of change.

20. Check here if you have a board of trustees.

Check here if you have a board of directors.

Check here if you have more than 10 on your board, list only the board's executive committee, and provide the name of a contact person in Question 21.

21. If you provide only the board's executive committee in Question 20, tell us who is the appropriate person to contact for further information about your board (for example, the board's recording secretary)?

Section D only applies to proprietary schools and not-for-profit institutions with a change in control.

Section E. Please provide the following information for each educational program that you are requesting be eligible to participate in federal student financial aid programs.

- 26. Please check each box that describes the educational programs that you provide as of the date you submit this application or that you will provide during the current award year. **Provide information only on programs that you wish to be eligible for federal student financial aid.** (You may check more than one box.)
 - a. associate degree programs
 - b. X bachelor's degree programs
 - c. X master's and/or doctoral degree programs
 - d. first professional degree programs

Measure by direct assessment instead of clock or credit hours

- e. graduate or professional programs
 - do not lead to a post-baccalaureate degree
 - are at least 10 weeks, and
 - provide at least 8 semester or trimester credit hours, 12 quarter credit hours, or 300 clock hours of instruction.
 - prepare students for gainful employment in a recognized occupation.
- f. two-academic-year transfer programs
- g. undergraduate programs that
 - lead to a certificate or other recognized educational credential,
 - prepare students for gainful employment in a recognized occupation,
 - are at least 15 weeks, and
 - provide at least 16 semester or trimester credit hours, 24 quarter credit hours, or 600 clock hours of instruction.

- h. undergraduate programs that
 - lead to a certificate or other recognized educational credential,
 - prepare students for gainful employment in a recognized occupation,
 - are at least 10 weeks, and
 - provide at least 8 semester or trimester credit hours, 12 quarter credit hours, or 300 clock hours of instruction.

AND

- require an enrolling regular student to have an associate degree or higher degree.
- i. undergraduate programs that
 - lead to a certificate or other recognized educational credential,
 - prepare students for gainful employement in a recognized occupation.
 - are at least 10 weeks, and
 - provide at least 300 but not more than 599 clock hours of instruction.
 - do not exceed by more than 50% the minimum number of clock hours established by the state for such training programs, and
 - have been provided for at least one year.
- j. X Post-baccalaureate teacher certification program necessary to become a teacher in an elementary or secondary school in that state. Please refer to the <u>glossary</u> for more information about this program type.
- k. Comprehensive Transition and Postsecondary Program (for students with intellectual disabilities

 please refer to 34 C.F.R. 668.231 for information about the requirements of this program)
 Check here if you award an associate degree, bachelor's degree, or higher degree to all your students who successfully complete each of your programs.
- 27. Based on the boxes checked in Question26, and your institution type, please provide the following information for the educational programs that you wish to be eligible for federal student financial aid.
- 27a. Associate degree programs.
- 27b.Bachelor's degree programs.
- 27c.Master's and/or doctoral degree programs.
- 27d.First Professional degree programs.
- 27e.Non-degree graduate programs.
- 27f. Two academic year transfer degree programs.
- 27g. Undergraduate non-degree programs.
- 27h. Short-term undergraduate non-degree programs.
- 27i. Comprehensive Transition and Post secondary programs.

28. Do you contract with an organization or ineligible institution (such as internship, externships, practicum in nursing, midwifery, medical technician, etc.) to provide more than 25% of any educational program?

Section F. Please tell us about your locations.

29. What is your principal location?

Sam Houston State University

1806 Avenue J

Huntsville, TX 77340-0000

County:

WALKER

30. Provide the following information for your locations (other than your principal location) at which you provide educational programs to students whom you wish to participate in federal student financial aid programs.

Section G. Please tell us about your tele/corr courses, your students enrolled under ability-to-benefit provisions, and your incarcerated students.

- 31. Are any of your programs offered in whole or part by correspondence or telecommunications?
- 32 a. For the most recently completed award year, were more than 50% of your courses taught by means of correspondence?
- **Note:** If a course is offered through traditional methods and through correspondence, then that course should be counted under other methods and correspondence. Therefore, the same course might be counted more than once.
- 32 b. For the most recently completed award year, were 50% or more of your regular students enrolled in correspondence courses?
- 33. During the most recently completed award year, were 50% or more of your regular students ability-to-benefit students?
- **Note:** Do not include students who are being educated at your institution under a specific contract with federal, state, or local governments for training purposes (such as most contracts under the Job Training Partnership Act).
- 34. During the most recently completed award year, were 25% or more of your regular students incarcerated?

Section H. Please complete this section if this is an initial application *or* you were certified but you have a change in your ownership *or* structure *or* you are seeking reinstatement.

X Check here if this is **not** an initial application or a change in ownership or structure or for reinstatement or for addition of a Title IV program.

Section I. If you are a foreign institution, please complete this section (this includes foreign graduate medical schools).

Electronic Application Page 7 of 9

Section J. Please tell us about your third-party servicers, (which includes your Ability to Benefit Testers.)

Check here if you do not contract with a third-party or outside servicer.

58. If you contract with any third-party servicer or outside party to perform any function related to federal student financial aid programs, provide the following information about each servicer.

Servicer Name and Address	Contact Name and Title	Telephone/ Fax	E-mail	Services Offered	End Date
Campus Partners 2400 Reynolda Road Winston-Salem, NC 27106	Paul Lombardo Executive Vice President, Loan Servicing			Performing Loan Servicing	
Collections Unlimited 2000 Dairy Ashford Houston, TX 77094	Mr. Terry Wunsch Owner			Performing Loan Collection	
College Board Cisco College Abilene Center Abilene, TX 79602	MIchelle Overstreet Higher Education Assessment Manager			Ability To Benefit Tester	
Conserve-Continental Service Group 200 Crosskeys Office Park Fairport, NY 14450	Ms. Colleen Stevens Director of Client Services			Performing Loan Collection	
Higher One 115 Munson Street New Haven, CT 06511	Thomas Kavanaugh Vice President, General Consel and Secretary			Disbursing Financial Aid	
Williams & Fudge, Inc. 300 Chatham Avenue Rock Hill, SC 29730	Mr. Christopher P Ruh Executive Vice President for Sales			Performing Loan Collection	

58b. Please identify your Ability To Benefit Tester(s).

ASSET Program

Career Programs Assessment (CPAT)

COMPASS Subtests

Combined English Language Skills Assessment(CELSA)

X Computerized Placement Tests (CPTs)/Accuplacer

Descriptive Tests of Language Skills (DTLS)

Wonderlic Basic Skills Test (WBST)

WorkKeys Program

Section K. Please assure us of your administrative capability and your financial responsibility.

59. Do you have a system of internal checks and balances for administering federal student financial aid that meets federal regulations? (See 34 CFR 668.16.)

N

60. Do you divide the functions of determining student awards and disbursing funds that result from those award decisions? (See 34 CFR 668.16.)

N

- 61. Do you have procedures that ensure frequent, periodic reconciliation of fiscal office and financial aid office award data? (See 34 CFR 668.14, 668.16, 668.24, 674.19, 675.19, 676.19, and 690.81.)

 N
- 62. Do you have a system to identify and resolve discrepancies in information you receive from various sources about a student's application for financial aid? (See 34 CFR 668.16.)

 N
- 63. Do you have a policy that meets federal regulations for requiring satisfactory academic progress for recipients of federal student financial aid? (See 34 CFR 668.16 and 668.34.)

 N
- 64. Do you have procedures that ensure that your requests for federal cash do not exceed the amount of funds you need immediately to make aid disbursements to students? (See 34 CFR 668.163.)

 N
- 65. Do you have a policy that meets federal regulations for refunding Title IV funds when a student withdraws from classes? (See 34 CFR 668.22.)

 N
- 66a. Have you submitted your required annual financial statement audits to us on time? (For initial applicants, have you established a process to ensure that you submit your required annual financial statement audit to us on time?) (See 34 CFR 668.23.)
- 66b. Have you submitted your required annual federal student financial aid compliance audits to us on time? (For initial applicants, have you established a process to ensure that you submit your required annual federal student financial aid compliance audit to us on time?) (See 34 CFR 668.23.)
- 67. Do you use the electronic processes required by the Secretary? (See 34 CFR 668.16.)
- 68. Do you have a process to insure you obtain the necessary approvals from the Department for expanding or re-establishing your institutional eligibility, (such as changes of ownership resulting in a change of control, excluded changes in ownership, or adding new locations in certain circumstances), and that you notify us within 10 days about other important changes (such as changing your name, address or official)? (See 34 CFR 600.10, 600.20 and 600.21)
- 69. Use this area if you need extra space to tell us about any unusual circumstances or to provide additional explanations about your application.
 - 1) President of the University was married. 2) "Acting" Vice President for Finance and Operation was made Vice President.
- 70. Provide the following information for any person or firm outside your institution that you wish to designate as your agent to represent you in matters related to this application.
- 71. Reporting of Foreign Gifts, Contracts and Relationships.

Section L. Please have the appropriate person in authority review, sign, and date this document.

Date 08/11/2014

Name of President/CEO/Chancellor

Name	Dr. Dana G. Hoyt	
Job title		
Business address	1806 Avenue J	
	Administrative Building, Room 303	
	Huntsville, TX 77340	
Telephone number	(936) 294-1013	
Fax number	(936) 294-1465	
E-mail address	dghoyt@shsu.edu	

Section M. Please include copies of appropriate documents as part of your application.

Because Sam Houston State University has been designated as a Public institution on this application, and because this application is for Officials/Directors of Institution, the following documents must be submitted in order to complete this application.

Signature Page (Print <u>Section L</u> and sign it.)

The Department will contact you if additional documentation is needed.

If you are finished with your application, you MUST click here to go to the <u>Application Submission</u> page to submit it.

Otherwise, you can return to Electronic Application <u>Index</u> to access another section of the Application.

Send the signature page (Section L) and copies of required supporting documents to us. Regular mail/commercial overnight mail:

U.S. Department of Education, FSA School Eligibility Channel Integrated Partner Management 830 First Street, NE Washington, DC 20202-5402