



Student Name (Last, First)	myZou Student ID Number <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>								

We have received your 2009-2010 Free Application for Federal Student Aid (FAFSA). The drug-related conviction question, question 23, was left blank. We cannot continue processing your application until we receive a response. Complete the following to determine your response to this question.

1. Have you ever received federal student aid?
 No *If No, change your answer to question 23 to "1" and sign and send us your SAR.*
 Yes *If Yes, go to question 2.*

On this worksheet count only federal and state convictions. Do not count any convictions that have been removed from your record or occurred before you turned age 18, unless you were tried as an adult.

2. Have you been convicted for possessing or selling illegal drugs?
 No *If No, change your answer to question 23 to "1" and sign and send us your SAR.*
 Yes *If Yes, go to question 3.*
3. Did the offense for possessing or selling illegal drugs occur during a period of enrollment for which you were receiving federal student aid (grants, loans, and/or work-study)?
 No *If No, change your answer to question 23 to "1" and sign and send us your SAR.*
 Yes *If Yes, go to question 4.*
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:
 - Be qualified to receive funds from a federal, state or local government for from a federally or state- licensed insurance company; or
 - Be administered or recognized by a federal, state or local government agency or court, or a federal or state-licensed hospital, health clinic or medical doctor. No *If No, change your answer to question 23 to "1" and sign and send us your SAR.*
 Yes *If Yes, go to question 5.*
5. Do you have more than two convictions for **possessing** illegal drugs? Only count convictions for offenses that occurred during a period enrollment for which you were receiving federal student aid (grants, loans and/or work-study).
 No *If No, change your answer to question 23 to "3" and sign and send us your SAR.*
 Yes *If Yes, go to question 6.*
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 student aid (grants, loans and/or work-study).
 No *If No, change your answer to question 23 to "3" and sign and send us your SAR.*
 Yes *If Yes, go to question 7.*

7. Write the date of your last conviction for **possessing** illegal drugs here:
If you have no convictions for possessing drugs, skip to question 9.
____/____/____
Mo. Day Year

8. If you have only one conviction for possessing drugs, add **one year** to the date in question 7, and write that date here:
____/____/____
Mo. Day Year

If you have two convictions for possessing drugs, add **two years** to the date in question 7, and write that date here:
____/____/____
Mo. Day Year

9. Write the date of your last conviction for **selling** drugs here:
____/____/____
Mo. Day Year

10. If you have only one conviction for selling drugs, add **two years** to the date in question 9, and write that date here:
____/____/____
Mo. Day Year

11. Look at the dates you wrote in questions 8 and 10. If there is only one date, write that date or if there are two dates, write the later one here:
____/____/____
Mo. Day Year

Student's signature

Date