

STATEMENT OF UNDERSTANDING

ENTRANCE INTERVIEW

- I authorize the Office of Student Financial Services to deduct all unpaid tuition/fees and other University debts (such as, but not limited to, transcript fees and optional fees) from financial aid received before any balance is refunded to me.
- I understand this award is for the current academic year. Financial need is re-evaluated each year and a new institutional application and need analysis (FAFSA/RENEWAL/FAFSA-WEB) is required for each year.
- I understand if I receive any additional financial assistance (i.e. scholarships, stipends, sponsorships) that is not listed on my current award, I will notify the Office of Student Financial Services immediately. Failure to do so could result in the cancellation of my award.
- I understand that **I must maintain satisfactory progress** towards completion of my degree or certificate objective as defined by my component school. (**SAP guidelines are listed on the financial aid homepage at <https://www.uth.edu/sfs/>**)
- **I understand that I must initiate and receive an EXIT INTERVIEW with the Office of Student Loans and Collections (713-500-3300) prior to the time that I cease to be enrolled as at least a half-time student (Undergraduate 6 hrs, Graduate Fall/Spring 5 hrs, Graduate Summer 3 hrs) at The University of Texas M.D. Anderson Cancer Center.**
- I will use the proceeds from this aid solely for expenses connected with attendance at The University of Texas M.D. Anderson Cancer Center.