

INSTRUCTIONS FOR COMPLETING A REPORT OF FINANCIAL NEED AND CERTIFICATION FOR THE JACOB K. JAVITS FELLOWSHIP PROGRAM

General

Please be sure to compete one form for each cohort of Jacob K. Javits fellows attending your institution. The Department of Education tracks funds for Jacob K. Javits fellows according to the fiscal year in which they were initially awarded a Jacob K. Javits Fellowship. All fellows initially awarded a fellowship in a particular fiscal year constitute a cohort. Thus, you complete one form for each fiscal year listing all fellows in that particular cohort.

Determine the level of financial need of each Jacob K. Javits fellow on the enclosed list before completing these forms. Each Jacob K. Javits fellow's demonstrated level of financial need must be reflected on these forms. Financial need is determined each year on the basis of the requirements for need analysis prescribed by Part F of Title IV of the Higher Education Act of 1965, as amended (HEA), except that **tuition and fees are excluded from the student's cost of attendance**. Tuition and fees are excluded because the fellowship includes an institutional payment that is provided in lieu of tuition and fees normally charged to the student. Your institution's financial aid office may be able to provide you with this information or assistance in calculating financial need.

Continuing fellows **must** complete a Free Application for Federal Student Aid (FAFSA) immediately and submit the results to your institution for financial need determination. The FAFSA is available on the Internet at www.fafsa.ed.gov. Students may also obtain a hardcopy format in the financial aid office at your institution.

Part I: Jacob K. Javits Fellowships Instructions

Item 1. Name and Address of Grantee (Institution): Self-explanatory.

Item 2. Grant Number: Enter the ten-digit grant number that always begins with "P170B."

NOTE: There is a separate grant number for each cohort (group) of Jacob K. Javits fellows. Remember that a cohort includes all fellows initially awarded a fellowship in a particular fiscal year. Insert the number from the column entitled "PR#" on your grant award notification document or on the enclosed list of continuing fellows (if any). The first digit after the B indicates the fiscal year of the initial award. For example, P170B010000 is the number for a fellow initially awarded in fiscal year 2001. This number

remains the same throughout the period of a student's fellowship. In some documents, you may see a two-digit suffix, for example, -99. Ignore the suffix for purposes of completing this form. The suffix indicates the current fiscal year.

Item 3. Budget Period Covered by Report: The budget period is the current funding period of the Javits fellowship. The dates for the current funding period, September 1, 2004, through August 31, 2005, are indicated at the top of the report form.

Item 4a. and 4b. Contact Person and Phone Number: The person at the institution who the Department of Education should contact regarding the administration of Javits Fellowships.

Item 5. Name of Fellow: List each fellow to whom the grant number in Item 2 applies. A list of fellows at your institution is enclosed. Enter the last name first, followed by the first name and middle initial. List all fellows for that grant number.

NOTE: NEVER CHANGE A FELLOW FROM ONE COHORT YEAR (and the accompanying ten-digit grant number) TO ANOTHER.

Please enter "0" for any fellow who failed to submit his or her financial aid forms in time for you to calculate his or her financial need.

- (A) **Status:** Please indicate the status of each student on each report form for the current budget period as follows: "Enrolled Current Fellow," "Graduated," "On Interruption of Study," "Withdrawn," "Transferred to Name of Institution," "Funding Discontinued Due to Failure to Make Substantial Academic Progress," or "Completed Tenure but Still Enrolled."
- (B) **Total Financial Need:** Enter each fellow's total financial need, as determined under Part F of Title IV. (Cost of graduate attendance minus the student's estimated family contribution minus tuition & fees.) If the student's financial need is zero, he or she is not eligible for any part of the Javits Fellowship.
- (C) **Stipend Request:** Enter the stipend request for each fellow. The stipend request should equal the fellow's financial need and cannot exceed the maximum stipend amount for the fiscal year.
- (D) **Months of Study:** Enter the number of months of study projected for each fellow (maximum 12 months) during the budget period covered by this report. The fellowship can be calculated on a nine-month schedule if the student will not be enrolled during the summer semester.

- (E) **Institutional Allowance:** For each fellow who will be enrolled for the full academic year (12-month period including the fall, spring and summer), enter the institutional payment amount. If a fellow will attend less than a full academic year, enter a pro rata reduced amount.

Note: The fellowship provides an institutional allowance that is in lieu of all tuition and fees normally charged to the student for the period of enrollment. The allowance must be reduced by any amount collected by the institution from a fellow for tuition and other expenses related to the fellow's educational program (34 CFR 650.41).

- (F) **Unused Funds (if any):** Enter any funds that your institution did not use in the following instances:

- **If a student took a leave of absence after you submitted last year's report;**
(Note: An Interruption of Study is not allowed in the first year of the fellowship.)
- **If a student withdrew or graduated after you submitted last year's report; or**
- **If a student transferred to another institution after you submitted last year's report.**

- (G) **“Full-time” status:** Certify whether each fellow will be devoting their full time to his or her academic program by entering “Yes” or “No.” If “No,” please provide a brief explanation on a separate sheet of paper.

- (H) **Leave Status:** If a fellow will be on an approved Interruption of Study for all or part of the award year, indicate the number of months. If the fellow will not be on Interruption of Study, enter “No.”

NOTE: Section 701 of the HEA permits an institution to allow a fellowship recipient an Interruption of Study for a period not to exceed 12 months for the purpose of work, travel, or independent study away from the campus if the independent study is supportive of the fellowship recipient's academic program. A fellow on an Interruption of Study does not receive financial support during the period of his or her leave, unless the leave is for the purpose of travel supportive of the fellow's academic program or independent study supportive of the fellow's academic program. Attach on a separate sheet a brief explanation if you believe the fellow is entitled to support under these conditions.

- (I) **Academic Progress:** Certify whether each fellow is making substantial progress in his or her academic program by entering "Yes" or "No." If "No," provide a brief explanation on a separate sheet of paper.
- (J) **Employment Certification:** Certify that each fellow will not be engaged in gainful employment (other than on a part-time basis as specified below) during the budget period by entering "Yes."

Note: A fellow may work part time, but only for the institution he or she attends, and only in teaching, research, or similar activity approved by the Secretary.

- (K) **Methodology Certification:** Certify that each fellow's financial need was calculated using the same manner as that in which the institution calculates all other graduate students' financial need under Part F of Title IV of the HEA by entering "Yes."

Item 6. Totals: Self-explanatory.

Complete Part II, the Agreement Certification.

Please submit your report and certifications no later than _____ to:

**Carmen Gordon
Program Officer
Jacob K. Javits Fellowship Program
Teacher and Student Development Programs Service
U. S. Department of Education
1990 K Street, N.W., Suite 6018
Washington, DC 20006-8521**

You may fax an advance copy of the report to (202) 502-7859.

**PART II. AGREEMENT CERTIFICATION (required by 34 CFR 650.40)
FOR THE JACOB K. JAVITS FELLOWSHIP PROGRAM**

The applicant, _____(name of institution),
agrees that it will comply with the amended statute and regulations implementing the
Jacob K. Javits Fellowship Program, 34 CFR Part 650. The regulations were published
in the Federal Register dated October 28, 1993.

AUTHORIZED SIGNATURE AND DATE

An authorized official must review all data entered and certify that the Report of
Financial Need and Certification is accurate and complete.

The Authorized Official is:

Typed Name of Authorized Official

Signature of Authorized Official

Title of Authorized Official

Date

Name of Institution of Higher Education

(Area Code) Telephone Number