Good Neighbor Scholarship Program 25-26

Program Purpose

Provides an exemption of tuition for students from other nations of the Western hemisphere (Ineligible countries: Cuba, territories of the UK, Norway, France, and the Netherlands.)

Who Can Apply?

Individuals must:

- Be a nonresident from an eligible country;
- Be a native-born citizen and current resident of a nation of the Western Hemisphere other than Cuba or the United States;
- Intend to return to the eligible country upon completion of his/her program of study;
- Be admitted unconditionally at an eligible public institution in Texas; and
- Maintain satisfactory academic progress

Attach a copy of your visa (F1, 120) and if you have indicated dual citizenship, you must provide a copy of each passport.

Eligible Countries

CODE 405 Argentina 407 Antigua and Barbuda 419 **Bahamas** 421 Barbados 425 Bolivia 430 Brazil 431 Belize (British Honduras) 440 Canada Chile 445 455 Colombia 460 Costa Rica 474 Dominica 475 Dominican Republic 480 Ecuador 485 El Salvador 507 Grenada 510 Guatemala 511 Guyana 513 Haiti 515 Honduras 562 Jamaica 610 Mexico 630 Nicaragua 650 Panama 655 Paraguay 660 Peru 681 Saint Kitts & Nevis 683 St. Lucia St. Vincent & the Grenadines 687 704 Suriname 725 Trinidad and Tobago 740 Uruguay 745 Venezuela



University of Houston-Downtown Good Neighbor Scholarship Program Application 25-26

Name:				
Last		First	r	MiddleInitial
Local Address/City/ZipCode:				
UHD I.D.#	Phone		Email	
Have you been admitted to the	University as a deg	gree-seeking s	tudent? Yes	No
Classification: Freshman	Sophomore	Junior	Senior	Other
Application Period: Fall	Spring	Curre	nt UHD GPA	
Country of Citizenship/Birth:			CountryCode:	
Do you have dual citizenship?	Yes	No	_	
If yes, indicate other country				<u></u>
Have you applied for US permar	nent resident statu	us? Yes	No	_
Immigration Status (Visa Type)_				
Are you in the US on a student vi Service? Holds Student Visa	-		-	
How long have you lived in the V (Total combined years/months re	<u>-</u>			
Have you previously received a G	Good Neighbor Sch	nolarship?		
YesNoIf yes, v	vhen?	Wh	ere?	
Are you a member of the Comm	nunist Party? Yes_	No		
When do you plan to return to y	· ·			
Do you have any relatives worki names and relationship:	ng for the Texas H	ligher Educatio	n Coordinating Bo	ard? If yes, list the
I hereby certify that the above i	nformation is true	and correct b	y signing below:	
Signature				

COMPLETE APPLICATION MUST BE RETURNED TO:
Office of Scholarships and Financial Aid, Room 350 South
Deadline is March 10 th, 2025
(Must be typed and faxed copies are not acceptable.)