

NASSGAP Survey 2025

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Contact Information

Agency Name	<input type="text" value="Illinois Student Assistance Commission"/>
Primary Contact Name	<input type="text" value="James Oren"/>
Primary Contact E-mail	<input type="text" value="james.oren@illinois.gov"/>
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City	<input type="text" value="Springfield"/>
State	<input type="text" value="IL"/>
Zip	<input type="text" value="62704-1876"/>
Phone	<input type="text" value="217-524-7933"/>
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Agency Website Address	<input type="text" value="http://www.isac.org"/>

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General Questions

	Yes	No	N/A
Does your agency review or approve budgets of public institutions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is it involved in setting tuition in public institutions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Does it approve programs offered by public institutions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Does it approve programs offered by private institutions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Does your agency certify or license postsecondary institutions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is it responsible for the administration of a college savings plan?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Does it administer a state prepaid tuition plan?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Does your agency administer a pre-college/early intervention outreach program?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Centralized Decentralized

In general (perhaps with regard only to your primary need-based grant program), would you consider your state to be centralized or decentralized for purposes of awarding student financial aid?

☐☐

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Federal Programs

Which other federal programs does the agency administer? (Please check all that apply)

<input type="checkbox"/> Chafee Educational and Training Vouchers (ETV)	\$	<input type="text"/>
<input type="checkbox"/> Chafee Foster Care Independence Program (CFCIP)	\$	<input type="text"/>
<input type="checkbox"/> College Access Challenge Grant (CACG)	\$	<input type="text"/>
<input type="checkbox"/> DC TAG	\$	<input type="text"/>
<input type="checkbox"/> John R Justice Loan Repayment	\$	<input type="text"/>
<input type="checkbox"/> Health Professional Loan Repayment	\$	<input type="text"/>
<input type="checkbox"/> Other <input type="text"/>	\$	<input type="text"/>
Total	\$	<input type="text"/>

Private Programs

Does the agency administer any privately funded programs?

Yes ☐ No ☐

Please list them by type of program and amount awarded

	Program Name	Program Type	Amount awarded in 2022-2023
1.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
2.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
3.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
4.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
5.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
6.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
7.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
8.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
9.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
10.	<input type="text"/>	<input type="text" value="v"/>	\$ <input type="text"/>
Total			\$ <input type="text"/>

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Agency Leadership


Is the agency's executive director appointed by: (Check all that apply)

- ☐ The governor
- ☐ The legislature
- ☐ A board or commission
- ☐ Other:

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	Yes	No	N/A
1. Is this program new this year?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Did you report information for this program last year?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Is this program authorized, but not funded?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has this program been discontinued? 	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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5. What type of award is made through this program?

- ☐ Grant or Scholarship
- ☐ Loan
- ☐ Work-Study
- ☐ Tuition waiver (funded or unfunded) 
- ☐ Loan assumption or forgiveness 
- ☐ Conditional grant or loan 
- ☐ Other

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6. Administering Agency for this program

Reporting Agency ☐

Co-Administered ☐

Other Agency ☐

If Co-administered or
administered by another
agency, please provide the
name of the other agency

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7. Who determines student eligibility requirements?

- ☐ State
- ☐ Campus
- ☐ Other

8. Who selects the recipients?

- ☐ State
- ☐ Campus
- ☐ Other

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9. Are students EXCLUDED from eligibility for any of the following reasons?
(Please add in other other reasons for exclusion and check all that apply)

- ☐ No exclusions
- ☐ Age
- ☐ No high school diploma or its equivalent
- ☐ Non-residents
- ☐ Students in short vocational programs (non Title IV eligible)
- ☐ Incarcerated students
- ☐ Other

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10. Which of the following students are eligible? (Check all that apply)

- ☐ Students who are state residents attending institutions in your state
- ☐ Students who are residents of other states, who attend in your state
- ☐ Students who are state residents attending an institution in another state
- ☐ Students enrolled exclusively in distance education classes provided by institutions in the state
- ☐ Students who are state residents enrolled exclusively in distance education classes provided by institutions outside the state

11. Are all eligible students funded?

12. Which of the following types of student may be eligible for an award under this program? (Check all that apply)

- ☐ Undergraduate, full-time
- ☐ Undergraduate, at least half-time
- ☐ Undergraduate, less than half-time
- ☐ Graduate, full-time
- ☐ Graduate, at least half-time
- ☐ Graduate, less than half-time

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Standard for award (Check all that apply)

13. Need (indicate which choice provides the closest description of how need is defined for this program)

- ☐ *Student Aid Index*
- ☐ *Need (cost-SAI)*
- ☐ *Maximum income/income based*
- ☐ *Other*
- ☐ *N/A*

14. Merit (Check all that apply)

- ☐ *Test score*
 - ☐ *Performance* ?
 - ☐ *Class Rank*
 - ☐ *Grades*
- Minimum grade

15. Special purpose of award (A purpose other than general student assistance. Check all that apply)

- ☐ *Tuition Equalization* ?
- ☐ *Workforce development* ?
- ☐ *Retraining* ?
- ☐ *Post-service* ?
- ☐ *Parent or spouse service* ?
- ☐ *Disability* ?
- ☐ *Send students to other states for specialized programs not available in state*
- ☐ *Other*

Total Program Expenditures

	2023-2024	2024-2025
16. Total \$ disbursed	\$0	<input type="text"/>
17. Unduplicated headcount of recipients	0	<input type="text"/>
18. Maximum award ?	0	<input type="text"/>
19. Minimum award ?	0	<input type="text"/>

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20. Program expenditures by source of funds

(Include matching funds. Check all that apply)

- ☐ General fund \$
- ☐ Lottery \$
- ☐ Special tax \$
- ☐ Student fees/tuition \$
- ☐ Matching Funds \$

Do not put Federal sources in the 'Other' boxes below unless the money is commingled and you are unable to separate it from state funds. Federally funded programs should go in Part 1.

- ☐ Other \$
- ☐ Other \$
- Total** \$

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21. Program expenditures and number of recipients by type of institution

<i>Institution Type</i>	<i>Dollars Awarded</i>	<i># of Recipients</i>
--------------------------------	-------------------------------	-------------------------------

Public

< 2 year in-state

2 year in-state

4 year in-state

Out-of-state

Private not-for-profit

< 2 year in-state

2 year in-state

4 year in-state

Out-of-state

Proprietary

< 2 year in-state

2 year in-state

4 year in-state

Out-of-state

Grand Total

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22. Program expenditures and number of recipients by enrollment status

Undergraduate

Graduate

	Dollars Awarded	# of Recipients	Dollars Awarded	# of Recipients
Full-time	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
At least half-time	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Less than half-time	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Totals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full-time, Full year *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Many states make awards on a full-time basis assuming full-time, full-year enrollment. This question asks "Regardless of how their awards were determined, how many of the recipients on the "Totals" line above were actual full-time, full-year recipients, meaning students who were actually enrolled full-time for a full year, and how much of the money awarded above went to these full-time, full-year recipients?"

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23. Program expenditures and recipients by income and dependency status - Part 1

Income distribution should be based on adjusted gross income plus nontaxable income.

Dependent Recipients

	Dollars Awarded	Number of Recipients
\$0 - 19,999	\$ <input type="text"/>	<input type="text"/>
\$20,000 - 39,999	\$ <input type="text"/>	<input type="text"/>
\$40,000 - 49,999	\$ <input type="text"/>	<input type="text"/>
\$50,000 - 59,999	\$ <input type="text"/>	<input type="text"/>
\$60,000 - 79,999	\$ <input type="text"/>	<input type="text"/>
\$80,000 - 99,999	\$ <input type="text"/>	<input type="text"/>
Over \$100,000	\$ <input type="text"/>	<input type="text"/>
Totals	\$ <input type="text"/>	<input type="text"/>
Median Income of Dependent Recipients	\$ <input type="text"/>	

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24. Program expenditures and recipients by income and dependency status- Part 2

Note: Income categories are not the same as for dependent recipients

Independent Recipients

	Dollars Awarded	Number of Recipients
\$0 - 2,999	\$ <input type="text"/>	<input type="text"/>
\$3,000 - 5,999	\$ <input type="text"/>	<input type="text"/>
\$6,000 - 9,999	\$ <input type="text"/>	<input type="text"/>
\$10,000 - 14,999	\$ <input type="text"/>	<input type="text"/>
\$15,000 - 19,999	\$ <input type="text"/>	<input type="text"/>
\$20,000 - 29,999	\$ <input type="text"/>	<input type="text"/>
\$30,000 - 39,999	\$ <input type="text"/>	<input type="text"/>
\$40,000 - 49,999	\$ <input type="text"/>	<input type="text"/>
Over \$50,000	\$ <input type="text"/>	<input type="text"/>
Totals	\$ <input type="text"/>	<input type="text"/>
Median Income of Independent Recipients \$ <input type="text"/>		

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25. Comments on the program

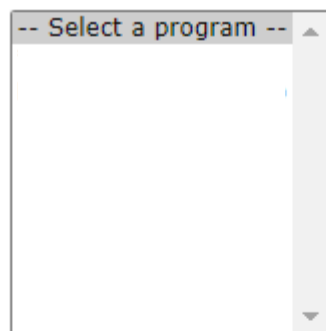
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26. Name of the primary state-funded, need-based program ?

If the program does not appear in this list you must add it in part 2 of the survey.

-- Select a program --



27. Which need analysis system does your agency use to determine need in your primary need based program?

- ☐ Federal Methodology (FM)
- ☐ FM with some modifications *
- ☐ Special state system *
- ☐ Institutional option *
- ☐ Other *

* Please describe any special state method for determining need focusing on data elements that may supplement those collected through the FAFSA. Question 38 will ask for a narrative description of how eligibility is determined.



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28. What resources are counted when determining expected family contribution?

- ☐ Family resources (parent and student contribution)
- ☐ Parent resources only
- ☐ Student resources only
- ☐ Other

29. In determining student eligibility for your primary need-based grant program do you:

Exclude the asset value of state college savings plans? (check if yes) ☐

Exclude the asset value of state prepaid tuition plans? (check if yes) ☐

30. Do you provide any special treatment for federal tuition tax credits?

31. In your primary need based program, can aid be used to defray:

- ☐ Cost of attendance
- ☐ Only approved tuition and fees

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32. In determining award for your primary need based program do you:

- ☐ Recognize the student's current cost of attendance?
- ☐ Impose limits on the amount of costs that are recognized by the program?

33. What do you use as the starting budget in your primary need based program?

Current year's actual cost of attendance

- ☐ using no budget caps
- ☐ with budget caps
- ☐ N/A

Previous year's actual cost of attendance

- ☐ using no budget caps
- ☐ with budget caps
- ☐ N/A

Current year's tuition and fees

- ☐ using no budget caps
- ☐ with budget caps
- ☐ N/A

Previous year's tuition and fees

- ☐ using no budget caps
- ☐ with budget caps
- ☐ N/A

Other

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General Definition of Enrollment

34. In general and for most (if not all) of your programs, how does your agency define full-time enrollment for undergraduates?

- ☐ 15 semester credit hours or its equivalent
- ☐ 12 semester credit hours or its equivalent
- ☐ Other

35. Does your agency use a different definition of full-time enrollment for graduate students for any programs for which graduate students are eligible?

If yes, what is the definition:

36. What were the considerations in setting the maximum award for your primary need-based grant program?

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37. Special annual topic: How did updates to the SAI formula impact your state’s ability to award aid to students, i.e. – fewer students awarded, forced to decreased award amounts, etc.?

38. To help people understand how your primary program works, please provide a narrative description of how eligibility and awards were calculated and determined in your primary program for 2023-2024.
The answer provided last year is shown below. (If it is still accurate you can copy and paste it into the box and save some typing.)

39. Please provide a narrative overview of how higher education governance and financial aid provision is structured in your state and how your agency fits into this picture.
The answer provided last year is shown below. (If it is still accurate you can copy and paste it into the box and save some typing.)

40. In addition to any comments you made in the individual programs, is there any information you would like to share that might be helpful in interpreting the data you have reported on this survey?