

HOPE SCHOLARSHIP EVALUATION REQUEST FORM

Wesleyan College

IMPORTANT: If you are currently receiving the HOPE Scholarship at Wesleyan, completion of this form is not necessary! Only students who believe they meet all general eligibility requirements listed below should complete this form. **If you are unsure whether or not you should complete this form, use the flowchart on the back side!** (see www.GAcollge411.org for additional information):

To qualify for the HOPE Scholarship, you must:

- o Be a Georgia resident
 - o Be a U.S. citizen or eligible non-citizen (permanent resident alien)
 - o Take at least 6 credit hours
 - o Have cumulative GPA of at least a 3.0 from all institutions attended
 - o Not already have a 4-year degree
 - o Not be in default on a federal/state education loan or owe a refund on a federal/state program
 - o Make satisfactory academic progress (SAP) as defined by the current institution
- Note: other restrictions/requirements may apply based on certain circumstances*

Upon receipt, the Registrar's Office will evaluate your academic transcripts for the HOPE GPA requirement. The Financial Aid Office will notify you of your eligibility status.

Name _____ SSN: _____

Please indicate the term for which you are requesting HOPE Scholarship funds? _____ / _____
Semester/Year

Are you a 1996 or later Georgia high school graduate? YES NO

List ALL colleges, universities, technical schools, etc. you have attended since high school graduation or completion of a GED. (Wesleyan must have transcripts from all schools attended to process this form)

School/Dates Attended	School/Dates Attended
School/Dates Attended	School/Dates Attended

Will you be a transient student (attending another institution) this semester? YES NO

If yes, please list your Host Institution (the school you will be attending) _____

NOTE: You must submit an official copy of your transcript from the host institution immediately after completing the term. The Registrar's Office will evaluate this transcript for your continued eligibility for HOPE at Wesleyan. If you decide not to attend the host institution, you must notify the Financial Aid Office in writing in order to be considered for HOPE at Wesleyan for the following term.

By signing below, you indicate that all information listed above is true and correct to the best of your knowledge. You also indicate that you have listed all schools attended, regardless of type, year attended, location, or grade performance and understand that falsification of such data may result in the termination of your HOPE Scholarship as well as other potential academic consequences.

Signature _____ Date: _____

FAO USE ONLY	
Residency evaluation:	Y/N
Transient HOPE Scholar Level	_____
Attempted hours (current term included)	_____
Forward to Registrar:	Y/N
By: _____	Date: _____

REGISTRAR USE ONLY	
All transcripts received?	YES NO
<u>HOPE GPA:</u>	
At most recent spring term:	_____
At most recent tier: 30 _____ 60 _____ 90 _____	
Most recent tier term:	_____
Total attempted hours to date:	_____
By: _____	Date: _____

Unsure whether you should ask for HOPE? Complete the chart below for help.

Start Here!

