Deadline dates
Fall Semester –July 1
Spring Semester-November 15
Summer Semester-April 15

Albany State University

FINANCIAL AID

2012-2013 HOPE Evaluation Request

Processing Steps:

- Once your completed application is received, your information will be entered into our Banner System and forwarded to your advisor. Please allow 30 business days for the process to be completed.
- If you have attended another college, university or technical school since high school graduation, **please submit an official transcript to the Office of Financial Aid.** Failure to do so will result in a delay of processing.
- You will be notified by email of your eligibility for the semester.
- If you do not receive any correspondence within 30 business days, please email your advisor at ifinaid@asurams.edu. Please use HOPE Evaluation Request as the subject and be sure to include your Name, and RamId.

General Information:

- The HOPE Scholarship Program is funded by the Georgia Lottery for Education and is available only to degree-seeking undergraduate students who meet the definition of a Georgia Resident for HOPE Scholarship Purposes.
- A student must meet the requirements to be classified as a Georgia resident according to University System of Georgia (USG) in-state tuition policy for either 12 or 24 consecutive months immediately proceeding the first day of classes of the school term for which the HOPE Scholarship is sought.
- A student who graduated from high school, or equivalent, on or after July 1, 2008 who does not meet the Georgia Residency requirements of the Board of Regents or the Technical College System of Georgia at the time of high school graduation, must meet such Georgia Residency requirements for 24 consecutive months immediately prior to the first day of classes of the school term for which the HOPE Scholarship is sought.
- A student must be a U.S. Citizen or an Eligible Non-Citizen for 12 consecutive months immediately proceeding the first day of classes of the school term for which the HOPE Scholarship is sought.
- Student academic eligibility for the Georgia HOPE Scholarship as a high school graduate is determined by the Georgia Student Finance Commission based on the academic data provided to them by the student's Georgia high school.
- Students who were determined not to meet the minimum academic requirements for the HOPE Scholarship upon high school graduation may become eligible to receive the HOPE Scholarship after attempting the equivalent of at least 30 semester hours of college level coursework and earning a 3.00 HOPE GPA.
- Students who have attempted more than 30 semester hours of coursework must have at least a 3.00 HOPE GPA at the end of the semester in which they attempted their 60th or 90th semester hour.
- The deadline for submitting your application for processing prior to registration is July 1st for Fall semester, November 15th for Spring semester and April 15th for Summer semester.
- For further information about the HOPE Scholarship, please reference the GACollege411.org web site.
- The 2012-2013 FAFSA (www.fafsa.ed.gov) or Georgia Scholarship/Grant application (www.gacollege411.org) is required for the HOPE Scholarship.
- For the quickest turn-around time, please provide your final transcripts from all institutions you attended prior to ASU.

[KEEP THIS PAGE FOR YOUR RECORDS]

ALBANY STATE UNIVERSITY • 504 COLLEGE DRIVE • ALBANY GEORGIA 31705
TELEPHONE (229) 430-4650 • FAX (229) 430-3936 • EMAIL-IFINAID@ASURAMS.EDU

Deadline dates
Fall Semester –July 1
Spring Semester-November 15
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Deadline dates
Fall Semester –July 1
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FINANCIAL AID

2012-2013 HOPE Evaluation Request

Student's Name: _____ _____ ____ RamID#_____
Last First MI

Demographic Information

1. Date of Birth: _____/_____/_____

2. Permanent Street Address: _____

3. Permanent City: _____ 4. State: _____ 5. Zip: _____

6: Permanent Phone#: ( ) _____ - _____ 7. Mobile Phone#: ( ) _____ - _____

8. Email Address: _____

9. Last Semester / Current Semester of Enrollment: _____

Please refer to the deadline dates and select the semester you would like to be evaluated for HOPE.

☐ Fall Semester - **Please submit this form by July 1**
☐ Spring Semester - **Please submit this form by November 15**
☐ Summer Semester - **Please submit this form by April 15**

Scholarship Information

10. How long have you lived in Georgia? _____ Years _____ Months

11. Did you graduate from High School as a Georgia HOPE Scholar? ☐Yes ☐No 12. Year of Graduation _____

13. Do you have an Associate's Degree? ☐Yes ☐No

14. Do you have a Bachelor's Degree? ☐Yes ☐No

15. List all colleges, universities, and technical schools that you have attended since high school graduation:

Institution	Dates Attended	Institution	Dates Attended

Please remember to submit an official transcript to the Office of Financial Aid if you have attended another college, university or technical school since high school graduation and that failure to do so will result in a delay of processing.

16. _____ _____/_____/_____

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Student's Signature	Date

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To Be Completed By the Office of Financial Aid
(Office Use Only)

Notes:_____

_____

Transcript Received: Date ____/____/____

Transcript Requested from: ☐ Admissions (Date ____/____/____) ☐ Registrar (Date ____/____/____)

HOPE Tier which student is eligible: ☐ H2 ☐ H3 ☐ H4

Reject Reason

☐ Not a GA Resident; Waiver; Not GA HS Graduate
☐ Not a GA High School HOPE Scholar
☐ GPA Requirement Not Met at 30, 60 or 90 Semester Hrs
☐ Outstanding transcripts or technical transcript(s) needed
☐ Over 127 Semester Hours or Graduate
☐ Expired Eligibility

Transfer Transcript Evaluation Worksheet

Institution	Quarter or Semester	Term	Attemped Hours	GPA Hours	Quality Points

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