

**HOPE Deadline dates**

Fall Semester –July 1  
Spring Semester–November 15  
Summer Semester–April 15

**OFFICE OF FINANCIAL AID****2018-2019 HOPE Evaluation Request Form****Processing Steps:**

- Once your completed application is received, your information will be entered into our Banner System and forwarded to the HOPE Coordinator. 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 Registrar's Office.** 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 [ifinaid@asurams.edu](mailto:ifinaid@asurams.edu). Please use HOPE Evaluation Request as the subject and be sure to include your Name, and Ram ID number.

**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 preceding 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 before July 1, 2009 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 preceding 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 1<sup>st</sup> for Fall semester, November 15<sup>th</sup> for Spring semester and April 15<sup>th</sup> for Summer semester. If you submit your request after the deadline for a term, your HOPE may not be awarded until the following term.
- For further information about the HOPE Scholarship, please reference the GAfutures.org website.
- The 2018-2019 FAFSA ([www.fafsa.ed.gov](http://www.fafsa.ed.gov)) or Georgia Scholarship/Grant application ([www.gafutures.org](http://www.gafutures.org)) is required to receive the HOPE Scholarship.
- For the quickest turn-around time, please provide your final transcripts from all institutions you attended prior to ASU.

[PLEASE KEEP THIS PAGE FOR YOUR RECORDS]

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**OFFICE OF FINANCIAL AID****2018-2019 HOPE Evaluation Request Form**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 December 15**
- ☐ Summer Semester - **Please submit this form by May 1**

**Scholarship Information (PLEASE RESPOND TO ALL QUESTIONS)**

10. How long have you lived in Georgia? \_\_\_\_\_ Years \_\_\_\_\_ Months
11. Did you graduate from a Georgia High School as a HOPE Scholar? ☐ Yes ☐ No 12. High School Graduation Date \_\_\_\_/\_\_\_\_/\_\_\_\_
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:

Institution	Dates Attended	Institution	Dates Attended
1. _____	_____	7. _____	_____
2. _____	_____	8. _____	_____
3. _____	_____	9. _____	_____
4. _____	_____	10. _____	_____
5. _____	_____	11. _____	_____
6. _____	_____	12. _____	_____

**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. \_\_\_\_\_  
Student's Signature Date

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**OFFICE OF FINANCIAL AID****2018-2019 HOPE Evaluation Request Form**

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**

- |  |  |
|--|--|
| <input type="checkbox"/> Not a GA Resident; Waiver; Not GA HS Graduate             | <input type="checkbox"/> Over 127 Semester Hours or Graduate |
| <input type="checkbox"/> Not a GA High School HOPE Scholar                         | <input type="checkbox"/> Expired Eligibility                 |
| <input type="checkbox"/> GPA Requirement Not Met at 30, 60 or 90 Semester Hrs      |  |
| <input type="checkbox"/> Outstanding transcripts or technical transcript(s) needed |  |

**Transfer Transcript Evaluation Worksheet**

Institution	Quarter or Semester	Term	Attempted Hours	GPA Hours	Quality Points