

Student Name _____

Student ID# or SSN _____

Please list the name(s) of all postsecondary institutions you attended since high school. It is the student's responsibility to provide transcripts from each institution and to submit an official copy to SRTC.

Name of Institution	Dates Attended

Are you currently enrolled in a degree program: Yes No

For which associate degree and/or specialization do you wish to be evaluated? _____

All degree-level coursework from previous institutions will be considered in calculating your cumulative HOPE GPA. Attempted hours include all degree-level courses attempted after high school graduation in which a grade was received, and courses in which a W, S, U, IP, I, or SC was earned. You must be a high school HOPE Scholar or have a 3.00 HOPE GPA or better at 30, 60, and 90 attempted semester hours to be eligible to enter the HOPE Scholarship Program. The HOPE Scholarship Program eligibility is limited to 7 years beyond your actual high school graduation / GED attainment date. HOPE Scholarship recipients are limited to 127 attempted hours of coursework. Once your eligibility is evaluated, you will be notified of the results via your SRTC student e-mail account.

By signing below, I certify that:

- I understand that providing false or misleading information or omitting information on any Financial Aid application or document may be grounds for immediate dismissal from school, immediate revocation of financial aid, and other penalties as allowed by law.
- All information submitted on this form is true.
- I am a US citizen or eligible non-citizen.
- I have not been convicted of a felony offense involving marijuana, controlled substances, or dangerous drugs.
- Males over age 18 born after 1960: I am registered with Selective Service.
- I am not in default nor do I owe a refund on any federal or state educational loan or grant program.

Office Use Only	
Per SURFER	
HS Graduation Date:	
Expiration Date:	
<input type="checkbox"/> Not ZM or HOPE Scholar from HS	
<input type="checkbox"/> Zell Miller Scholar from HS	
<input type="checkbox"/> HOPE Scholar from HS	
<input type="checkbox"/> CHECS Verified	
___ Snapshot	
___ Transcript/CTD	FAO Initial

Student Signature _____

Date _____

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