



**Georgia HOPE Scholarship Application**  
2011-12 Academic Award Year

Please provide the information requested below, completely answering all questions posed. Incomplete applications WILL NOT be reviewed. **Remember: Application deadline is October 7, 2011 for the Summer 2011 Semester.**

First Name:	<input type="text" value="Mary"/>	Last Name:	<input type="text" value="Smith"/>
Street Address:	<input type="text" value="123 Main St"/>	DSI #:	<input type="text" value="D01234567"/>
City:	<input type="text" value="Maryland"/>	Phone # (No dashes):	<input type="text" value="8782849202"/>
State:	<input type="text" value="NE"/>	Alternate Phone #:	<input type="text" value="_"/>
Zip:	<input type="text" value="78293"/>	Email:	<input type="text" value="marysmith@email.com"/>

**\*\*Per Federal Citizenship and state of Georgia Residency Requirements for Student Financial Aid\*\***  
**You must have been a legal resident of Georgia for one year (12 months) prior to entering any Georgia Postsecondary institution to seek a degree and continue to meet the residency requirement.**

<input type="text" value="Hillebrand College"/>	<input type="text" value="062007"/>	(MMYYYY)
<b>Name of College #2:</b>	<b>From:</b>	(MMYYYY)
<input type="text"/>	<b>To:</b>	(MMYYYY)
<b>Name of College #3:</b>	<b>From:</b>	(MMYYYY)
<input type="text"/>	<b>To:</b>	(MMYYYY)
<b>Name of College #4:</b>	<b>From:</b>	(MMYYYY)
<input type="text"/>	<b>To:</b>	(MMYYYY)
<b>Name of College #5:</b>	<b>From:</b>	(MMYYYY)
<input type="text"/>	<b>To:</b>	(MMYYYY)
<b>Name of College #6:</b>	<b>From:</b>	(MMYYYY)
<input type="text"/>	<b>To:</b>	(MMYYYY)

Have you attempted **at least** 30 semester / 45 quarter hours, but **no more** than 127 semester / 190 quarter hours combined at all two and four year colleges that you have **ever** attended?  Yes

Have you earned a **cumulative** undergraduate grade point average **of at least 3.0**?  Yes

"Cumulative" includes **all grades attempted** at **all** two and four year colleges **ever** attended?

**\*\*\* Student Certification of Intent and Understanding \*\*\***

By this application, I ask that my academic records be evaluated for the Georgia HOPE scholarship eligibility. By clicking "Yes"

below, I certify the following:

- 1) I understand that this application **will not be reviewed** until DeVry Georgia receives official transcripts for **all** two and four year colleges that I have attended previously. I understand also that it is my responsibility to make **all** arrangements necessary regarding transcript delivery to DeVry Georgia.
- 2) I understand that my Georgia HOPE eligibility is based upon a review of **all** two and four year college work ever attempted. I acknowledge that a failure to disclose any college work attempted previously will affect my Georgia HOPE eligibility.
- 3) I understand that I must also complete the Free Application for Federal Student Aid (FAFSA - <http://www.fafsa.ed.gov>) to be evaluated for the Georgia HOPE Scholarship.

**Type "YES" in the box to accept the Intent and Understanding statement above.** Yes  (Type **Yes** in the box to accept.)