HOPE Transient Request Form

Office of Student Financial Aid

Student Name _______________________________________
KSU ID# ____________________________________________________________________

SSN _________-________-________

HOPE recipients wishing to study as a transient student at another HOPE-eligible institution

Directions

• Submit this form to the KSU Office of Student Financial Aid.
• Complete a Transient Request form at the Office of the Registrar to receive clearance to enroll as a transient student at another institution.

Items to Remember

• If eligible for HOPE at KSU, a HOPE Scholarship Transient Certificate will be processed and sent to the institution where you plan to study.
• Your HOPE Scholarship Transient Certificate cannot be processed until your current term grades are calculated and it is determined that you have remained HOPE-eligible.
• The host institution will be responsible for disbursing the HOPE Scholarship funds to you for that term. You are responsible for payment at the host institution and must adhere to their payment deadlines.
• All hours you attempt at another institution, including the grades earned, will be used in determining your continued HOPE eligibility.
• Before you can receive additional financial aid at KSU, you must request that the host institution Registrar send an Official Academic Transcript to the KSU Office of Admissions at the end of the term.

Name of Institution you will be attending ____________________________________________

Semester you are attending: ☐ Fall Semester ☐ Spring Semester ☐ Summer Semester

Signature_________________________________________ Date___________________

For KSU Financial Aid Staff Use Only:

Current enrolled hours at KSU _____________ Eligible? ☐ Yes ☐ No
Type: ☐ HOPE ☐ Zell Reason for Denial ______________________________
Current Tier _____________ Date Submitted __________________________
Total HOPE Attempted Hours _____________ Submitted by _______________________
Cumulative HOPE GPA _____________
Remaining HOPE Hours _____________

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