

# HOPE SCHOLARSHIP APPLICATION REQUEST FORM

*The Hope Scholarship Board will accept applications from March 1 until May 15 for the following school year. An eligible student who misses the application window must be considered on a case-by-case basis by the Hope Scholarship Board. Pursuant to W.Va. CSR §112-18-4.3, students who were ineligible for the program during the regular application window but who later become eligible by meeting the criteria in W.Va. CSR §112-18-3.1.4.c may apply to the Board at any time during the academic year. Students may become eligible for the program under W.Va. CSR §112-18-3.1.4.c by enrolling full-time and attending an elementary or secondary public school education program in the State of West Virginia for at least 45 consecutive calendar days during an instructional term and remaining enrolled in and attending the public-school program at the time of application and up to the time when a Hope Scholarship award letter is issued to the student.*

Student Name \_\_\_\_\_

WVEIS ID# \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Student Date of Birth \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Application request reason: *(Please select the option that applies to your specific situation)*

- The student was eligible for the program during the regular application window but missed the May 15<sup>th</sup> application deadline.
- The student was ineligible for the program during the regular application window, but later became eligible during the academic year by enrolling full-time and attending an elementary or secondary public school education program in the State of West Virginia for at least 45 consecutive calendar days during an instructional term. The student is currently enrolled in the public-school education program at the time of application and will remain enrolled and attending public school until an award letter is issued by the Board.

Brief description of change in eligibility status or reason why student is applying outside of the regular application window:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return the completed form to [hopescholarshipwv@wvsto.com](mailto:hopescholarshipwv@wvsto.com)