

**WINTHROP UNIVERSITY
OFFICE OF FINANCIAL AID**

**State Scholarship Renewal/Reinstatement Application
For Academic Year 2024-2025**

Student's Name _____ Winthrop ID Number _____

Choose One:

Renewal (after summer coursework): I received a state scholarship in 23/24. I enrolled in _____ hours at _____ for summer 2024 in order to regain my scholarship.
(Institution Name)

Reinstatement (after losing scholarship): I received the _____ scholarship during the _____ academic year. I believe I now meet the criteria to have my scholarship reinstated.
(e.g. 22/23)

Read & Initial the Following:

_____ If I am a HOPE or LIFE scholarship recipient, I confirm that I have a LIFE GPA of at least 3.000. I Confirm I have viewed my LIFE GPA at winthrop.edu/finaid/lifegpa.

_____ I confirm that I have reviewed my online transcript and I can see all my grades posted for the summer term and I believe I meet the eligibility requirements for renewal.

_____ If I attended other institutions, I confirm I sent a transcript of **ALL** my coursework to the Office of Records & Registration and they have processed the transcript.

Please allow 2-4 weeks for processing due to the volume of renewal requests received by the Office of Financial Aid

I certify that the information above is true and correct to the best of my knowledge. I understand submitting this form does not guarantee that my state scholarship will be renewed/reinstated for the 2024/2025 academic year.

Student's Signature

Date

Sykes House, 638 Oakland Ave, Rock Hill, SC 29733
(803) 323-2189 (phone) – (803) 323-2557 (fax) – finaid@winthrop.edu

Securely upload forms through Wingspan (Financial Aid, Document Upload)

Office Use Only:

GPA _____ Hours Completed _____ Transcripts Pending? Any Incomplete Grades To Wait For?
 Has H.S. Diploma Residency Checked Awarded (n/a if denied) RRAAREQ Updated Notification Sent (n/a if approved)
Initials _____ Date _____ approved denied RHACOMM Checked for Enhancement