

HOPE SCHOLARSHIP

GENERAL APPEAL FORM

Please note: this form is only to be used for an appeal not related to applications or reimbursements. Additional information regarding filing application or reimbursement appeals can be found on the Hope Scholarship website, <https://hopescholarshipwv.gov> . A final outcome on your appeal will be determined within 45-days of when the appeal was filed. For additional information on the appeals process, see W.Va. Code R. § 112-19-13.

Student Name _____

WVEIS ID# _____

Guardian Name _____

Address _____

Email Address _____

Denial Date _____

Description of Decision Being Appealed and Reason for the Appeal:

*****Please attach any relevant documents that will support your appeal. *****

Signature _____ Date _____

Please return completed appeal form to hopescholarshipwv@wvsto.gov.