

## FINANCIAL AID BRIGHT FUTURES RE-EVALUATION FORM

This form is for Bright Futures students who did not meet renewal requirements at the end of Spring semester and/or have had a change that warrants re-evaluation. Please turn the form in to the Financial Aid Office or Student Services.

Student's First Name:	First Name: Last Name:		
Date:	IRSC Student Identification:		
Address:			
Address: Student Address C	ity	State	Zip
Email:	Phone Number	r:	
Bright Futures Program (please check one):			
☐ Florida Academic ☐ Florida Medallion	☐ Florida Gold S	Seal	
Please indicate which of the five situations listed below pertains to this request:			
☐ Attend another institution other that IRSC during Summer (year) semester (Hours must be listed on IRSC transcript.)			
□ Attended IRSC during Summer (year)			
☐ Grade change for Fall (year) or Spring (year)			
☐ Exclusion of high school dual enrollment courses used in the calculation of the overall (must exclude all or nothing)			
□ Other:			
FOR OFFICE USE ONLY			
Hours completed during the Fall	<del>_</del>		
Hours completed during the Spring	_ Overall GPA at	the end of Spring _	
Hours completed during the Summer	<u> </u>		
Total hours completed all Terms	_ Overall GPA at	the end of Summe	r
Date reported to State	By		