



Staff Use Only	
Approved By:	_____
Date:	_____ Amount _____
_____	
<b>VP of Student Services if greater than \$500</b>	

**South Florida State College General Scholarship Application 2026-2027**

**The General Scholarship is a need-based program. The requirements are:**

- Complete the Free Application for Federal Student Aid (FAFSA)
- Maintain a 2.0 cumulative GPA or higher
- Enroll in an eligible degree or certificate program
- Demonstrate unmet financial need, based on the results of the FAFSA

Name \_\_\_\_\_ Date \_\_\_\_\_

Phone \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Major \_\_\_\_\_ Grade Point Average \_\_\_\_\_

I will be enrolled:  Full Time  Half Time  Less Than Half Time

Married  Single Number of dependent children \_\_\_\_\_

**Submit the following with the application:**

1. Please provide a statement of your educational goals and your plans for your anticipated degree.
2. Please mention any unusual circumstances affecting your ability to pay for school
3. Attach your class schedule and book list with cost

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

Please return to the Financial Aid Office by email, or in person.  
financialaid@southflorida.edu