

UNUSUAL ENROLLMENT HISTORY

Student Name: ___

_____ COM ID: _____

The U.S. Department of Education indicated you have attended multiple colleges/universities over several academic years. This is considered unusual enrollment history in attempting to receive federal financial aid.

Institutions must work to resolve unusual enrollment when a student's FAFSA is flagged by identifying all institutions where the student received a Federal Pell Grant or a Federal Direct Loan for any of the 2013-2014 thru 2016-2017 award years and determine whether academic credit was earned at each of those institutions during the award year for which you received aid. If credit was not earned during any of those years for which you received aid, you must document the reason in order to continue receiving financial aid.

All academic transcripts for all colleges/universities attended for the years 2013-2014 thru 2016- 2017 must be submitted and evaluated by the Admission's Office before financial aid can be processed.

Mark one:	
	Academic credit was received from all institutions attended during the past four award years
	(Award Years 2013-2014, 2014- 2015, 2015-2016, and 2016-2017) as confirmed by academic transcripts.
	Academic credits was not received from one/all institutions attended during the past four award years
	(Award Years 2013-2014, 2014- 2015, 2015-2016, and 2016-2017).
If academic	credits were not received, students must submit the following:
• This	s completed Unusual Enrollment History form
• Det	ailed letter explaining circumstance for Unusual Enrollment
Doc	umentation of extenuating circumstance (request with no documentation may be denied).
Exte	enuating Circumstances may include:
Per	sonal injury or illness (must have occurred during semester(s) of academic difficulty)
	 Acceptable documentation: Doctor's statement, hospital records, or accident/police report
 Dea 	th or serious illness of an immediate family member (parents, grandparents, children, spouse, sibling)
	• Acceptable documentation: Doctor's statement, hospital records or a death certificate/obituary notice.
■ Em	ployment changes—Requires documents to show loss of job or other changes in employment
 Dive 	orce or separation in the student's immediate family—Requires divorce/separation documents or letter from attorney
 Oth 	er—Requires supporting documentation
purposely give	the information provided herein is true and correct to the best of my knowledge. I also understand that if I ve false or misleading information in connection with my application for federal aid, I may be subject to a fine of up ent to prison, or both.

Student Signature:	Date:	
FOR OFFICE USE ONLY		
Approved Denied		
Comments:		
F.A. Staff signature:	Date:	