



**UNUSUAL ENROLLMENT HISTORY
2020-2021**

According to your financial aid records and transcripts from previous colleges you have attended, you have received federal Pell Grants at multiple schools during 2016-2017, 2017-2018, 2018-2019 and 2019-2020 without earning any academic credit during all, or a portion of, this time. New federal regulations, effective for 2018-2019, make you ineligible for further federal aid. You may appeal this status if you experienced extenuating circumstances during 2016-2017, 2017-2018, 2018-2019 and/or 2019-2020 that prevented you from earning credit. Use this form to explain your situation. Attach third party documentation as verification of your statement. Submit this form and all supporting information to the Financial Aid Office. Appeals are reviewed on a case-by-case basis. You are not eligible to receive federal student aid for 2020-2021 unless this appeal is approved.

Please type or print using blue or black INK. Do not use pencil.

CF ID No.: _____

Legal Name: _____
Last First Middle (complete) Jr., etc.

Mailing Address: _____
Street/P.O. Box City State Zip Code

Telephone: _____ **Program of Study:** _____

Attach a typed statement to explain what extenuating circumstances occurred that caused you not to earn any academic credit during all, or a portion of, 2016-2017, 2017-2018, 2018-2019 and 2019-2020. The strength of your appeal rests on the documentation you provide and must include your plan to overcome any future obstacles and an education plan signed by an academic advisor. Attach all documentation to this appeal with your ID number on each page.

I certify that all of the information submitted in this appeal is true and accurate. I understand that all documentation is subject to verification by the Financial Aid office. In cases where submitted documentation is forged, tampered with or otherwise fraudulent, I may face criminal and/or disciplinary actions in accordance with federal and state laws and/or college policy, as defined in the Student Conduct Code.

 Student Signature (must be signed in order to be considered) Date: _____
MM/DD/YY

Office use only.	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Affected Session(s): <input type="checkbox"/> Fall 2020 <input type="checkbox"/> Spring 2021 <input type="checkbox"/> Summer 2021	
Notes: _____ _____ _____	
Signature: _____	Date: _____ <small>MM/DD/YY</small>