

**Unusual Enrollment History Worksheet**

**2017-18**

Student's Name: \_\_\_\_\_  
Last First MI

Phone: \_\_\_\_\_ - \_\_\_\_\_

Your 2017-18 Free Application for Federal Student Aid (FAFSA) has been flagged for "unusual Enrollment History Review" by the U. S. Department of Education because you received federal student financial aid funds at multiple education institutions during the review period 2013-14, 2014-15, 2015-16 and 2016-17. This flag requires your school to review your enrollment history and determine whether or not you are enrolling only long enough to receive cash refunds of federal student aid. In the process of reviewing your enrollment history, your school will check the National Student Loan Data System (NSLDS) to obtain a complete history: the name of institutions you have attended, and the dates of attendance.

**Please complete the steps below.** Your application for financial aid will not be considered until you submit this completed form and required documentation.

**Section 1: Institutions Attended**

Please list all Institutions that you attended in the award years listed.

**2013-2014 Award Year**

Institutions Name	City	State

**2014-2015 Award Year**

Institutions Name	City	State

**2015-2016 Award Year**

Institutions Name	City	State

**2016-2017 Award Year**

Institutions Name	City	State

**Section 2: Academic Transcripts**

Please Request from the above listed institutions an academic transcript and provide those academic transcripts to your Financial Aid office at your school.



**Section 3: Institutions Attended**

For each school listed on page 1 that you did not earn any credits, provide below a statement explaining the reason for your failure to earn any academic credit at that institution while receiving Federal Pell Grant and/or Loans. Attach any relevant documentation (i.e., medical bills, hospitalization records, accident reports, etc).

School Name: \_\_\_\_\_ Award Year \_\_\_\_\_

\_\_\_\_\_

School Name: \_\_\_\_\_ Award Year \_\_\_\_\_

\_\_\_\_\_

School Name: \_\_\_\_\_ Award Year \_\_\_\_\_

\_\_\_\_\_

School Name: \_\_\_\_\_ Award Year \_\_\_\_\_

\_\_\_\_\_

School Name: \_\_\_\_\_ Award Year \_\_\_\_\_

\_\_\_\_\_

School Name: \_\_\_\_\_ Award Year \_\_\_\_\_

\_\_\_\_\_

**Section 6: Sign this worksheet**

By signing below, both student and parent(s) acknowledge and confirm that the above is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both. **If the student is Dependent, one parent whose information was reported on the FAFSA must sign and date.**

**Student's name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Section 7: School Official Certification**

After review of the above information and documents presented, I, \_\_\_\_\_, have decided to award the above named student Title IV financial aid for the purpose of attending Summit Salon Academy – Gainesville.

**Financial Aid Advisor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_