



REQUEST FOR REVIEW: 2022–2023 UNUSUAL ENROLLMENT HISTORY

STUDENT NAME: _____ STUDENT ID #: _____

PHONE: _____ EMAIL: _____

In the 2022-2023 Award Year, the U.S. Department of Education has added Unusual Enrollment History (UEH) flags to some Free Application for Federal Student Aid (FAFSAs). The purpose of the Unusual Enrollment History Flag is to identify students with a possible unusual enrollment history who may have received Pell Grant and/or Federal Loan funds at numerous institutions within a short timeframe.

If a conflict code (C-code) of 359 (UEH Flag 2) or 360 (UEH Flag 3) exists on your FAFSA, the Financial Aid Office may schedule necessary documents that you will be required to complete and submit to this school for review. Once received, the Financial Aid Office will review your documentation and contact you if anything further is needed.

INDICATE THE REASON(S) FOR YOUR UNUSUAL ENROLLMENT HISTORY

Check the box relevant to your circumstance and circle the applicable award year when making your selection. You may select more than one circumstance and/or award year if applicable.

___ 1. During the 2018–19, 2019–20, 2020–21, and 2021-2022 award year(s), you or a member of your household suffered from severe illness.

___ 2. During the 2018–19, 2019–20, 2020–21, and 2021-2022 award year(s), you or a member of your household had a major family emergency.

___ 3. During the 2018–19, 2019–20, 2020–21, and 2021-2022 award year(s), you or a member of your household became unemployed.

___ 4. During the 2018–19, 2019–20, 2020–21, and 2021-2022 award year(s), you or a member of your household had a military obligation.

___ 5. During the 2018–19, 2019–20, 2020–21, and 2021-2022 award year(s), you or a member of your household had to change your address.

___ 6. Other: Attach a detailed statement regarding your circumstances, provide documentation to support your explanation, and explain why this kept you from earning academic credit.

If you do not submit the required documentation or leave pertinent sections of this form blank, the form will be returned to you for completion. If you do not submit the required documents, you will remain ineligible for Title IV student aid and could be personally responsible for education expenses.

Acknowledgement

I certify that all information on this form is true and accurate. I have provided and complete information to the best of my ability.

Student Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

Parent Signature (if student is dependent): _____ Date: _____

Please note: If after you have submitted all documentation you are denied Title IV eligibility, you will have the opportunity to question and appeal the decision.