

Unusual Enrollment History Appeal Form

Dear Student:

The U.S. Department of Education has determined that your financial aid file must be reviewed due to your unusual enrollment history, which is defined as your having received Federal Pell Grant or Federal Student Loan funds at multiple educational institutions during the period of 2014-15, 2015-16, 2016-17, 2017-18, and 2018-19.

In order to determine your continuing eligibility to receive financial aid, SFA requires that you complete the following form and submit an official or unofficial transcript.

Last Name First Name M.I. UFID

- List each school that you attended and from which you received a Pell Grant or Federal Stafford Loan (FSL) during the review period of 2014-15, 2015-16, 2016-17, 2017-18, and 2018-19. You may access that information using the National Student Loan Data System (www.NSLDS.ed.gov). Sign in with your FSAID and review your federal financial aid history. If one or more of the institutions you previously attended does not appear on UF's academic transcript, you will be required to obtain an academic transcript from that school.

Name of Institution.	Academic Years Attended.	Received Pell Grant? (Yes or No)	Received FSL? (Yes or No)

- If you did not earn any academic credit at an institution during the review period, you must attach a written statement that outlines, in detailed narrative form, any extenuating circumstances which may have contributed to your failure to earn academic credit. Third-party documentation is required and must be on official letterhead.
- Reason for appeal:

<input type="checkbox"/> Personal Injury/Illness	<input type="checkbox"/> Illness/Death of Immediate Family Member	<input type="checkbox"/> Poor Judgment
<input type="checkbox"/> Employment Change	<input type="checkbox"/> Divorce/Separation	<input type="checkbox"/> Other
- Provide a **plan of work** (courses and/or course load), using page 2 of this document. The plan must be signed by the student's academic adviser.

Student Signature Date

No Electronic Signatures.

Academic Plan of Work

Course	Required?*(Y/N)	Course	Required?*(Y/N)

*Required for major, minor, or degree completion.

Additional Comments

Academic/Faculty Adviser Signature

Date

No Electronic Signatures.