**Unusual Enrollment History (UEH)**

**2018 – 2019**

The U.S. Department of Education has selected your file for review due to your unusual enrollment history. An **unusual enrollment history is defined by having attended multiple colleges/universities during the 2014-2015, and 2015-2016, 2016-2017, 2017-2018 years.** You must submit this form and required documentation so that your financial aid eligibility can be determined. **This is an appeal to be considered for financial aid.**

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**LAST NAME FIRST NAME MI SSN OR STUDENT ID NUMBER**

**Please list every institution of higher learning attended and provide transcripts for each.**

|  |  |  |
| --- | --- | --- |
| **Name of College/University** | **Dates Attended** | **Received Academic Credit?**  **Yes or No** |
|  |  |  |
|  |  |  |
|  |  |  |
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Provide your own written statement describing the reasons and the extenuating circumstances if you failed to earn any academic credit at any college/university attended by you. Be specific and concise in your explanation and provide any supporting documentation (i.e. – death or serious illness of an immediate family member, employment changes, divorce or separation, and failure to have a set academic goal/major or misunderstanding of the Satisfactory Academic Policy (SAP) standards) to support the circumstances of your appeal.

**Certification and Signatures**

By signing this form I certify that the information reported and submitted on it is complete and correct. **Purposely giving false or misleading information on this worksheet will lead to this appeal being denied and your ineligibility to receive aid.**

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**Student’s Signature Date**

**Return this form and all requested documentation to:**

**FINANCIAL AID USE ONLY FAA Initials\_\_\_\_\_\_\_\_**

Appeal: **Approved** \_\_\_\_\_\_\_ **Denied**\_\_\_\_\_\_\_\_

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office of Student Financial Aid** (recommended)

**MVSU 7268 ~14000 Hwy 82 W**

**Itta Bena, MS 38941**

**OR**

**Fax to: (662) 254-7900**

**1819 UEH 05/24**