

VIRGINIA PENINSULA COMMUNITY COLLEGE

Unusual Enrollment History 2023-2024

Student's Name: _____

Student ID#: _____

It has been determined by the U.S. Department of Education that you have an unusual enrollment history with regard to the receipt of Pell Grant funds and/or Federal Direct Loans. As a result, your 2023-2024 FAFSA was selected for review. Federal regulations require we ask you for additional information before determining eligibility for federal student aid. The purpose of this form is to analyze your receipt of these funds.

Complete the following information and submit this form to the Financial Aid Office by uploading it to <http://mysupport.tncc.edu> or fax to (757.825-3537):

1. Log on to <https://studentaid.gov> and click on My Aid; then go to Aid Summary to view grants and loans received at the colleges and universities you have attended.

School Name	Year(s) Attended	City/State
	2019-2020	
	2020-2021	
	2021-2022	
	2022-2023	

2. Submit grade transcripts from all the institutions you attended between the 2019-2023 academic years to the Financial Aid Office at VPCC. Note: VPCC will not automatically evaluate your transcript to determine if credits will transfer to VPCC. To have your transfer credits evaluated you must meet with an Academic Advisor.
3. Complete the questions below, sign and return this form with appropriate documentation to the Financial Aid Office.

Check the appropriate box(es) pertaining to your situation.	Let us know if the situation affecting your performance was a one-time situation and any other notes you may want to add.
<input type="checkbox"/> Health reasons. Include medical documentation (physician's note of release to work or school and documentation showing dates corresponding with the semester(s) in question).	Ongoing: _____ One time: _____ Date(s) of incident: _____
<input type="checkbox"/> Death of an immediate family member. Include a copy of the death certificate or obituary.	Date(s): _____ Relation: _____
<input type="checkbox"/> Undue Hardship. Include document(s) from a third party professional (instructor, counselor, clergy, etc.) or legal documentation (court records) which can verify your claim.	Ongoing: _____ One time: _____
<input type="checkbox"/> Academic Reasons. Unexpected difficulties of a program or the program was not what was expected. Attach academic advisor or instructor documentation if available.	Dates or semester(s): _____ _____

I certify that all information submitted with this form is true and complete to the best of my knowledge. If you purposely give false or misleading information, you may be fined \$20,000, sent to prison, or both.

Signature: _____

Date: _____