

Unusual Enrollment History 2024-2025

Student's Name: Click or tap here to enter text.

Student ID#:Click or tap here to enter text.

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 2024-2025 FAFSA was selected for review. Federal regulations require us to 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 https://mysupport.vpcc.edu or fax to 757.825-3537:

1. Log on to https://studentaid.gov and drop down on your name and click on My Aid; then click to view grants and loans received at the colleges and universities you have attended.

School Name	Year(s) Attended	City/State
	2020-2021	
	2021-2022	
	2022-2023	
	2023-2024	

2. Submit grade transcripts from all the institutions you attended between the 2020-2021 through 2023-2024 financial aid years to the Financial Aid Office at VPCC (You do not need to submit transcripts for other Virginia Community Colleges).

Note: VPCC will <u>not</u> use transcripts submitted to financial aid to evaluate your credits for transfer to VPCC. To have your transfer credits evaluated you must complete the Request for Transfer Evaluation.

3. Complete the questions below, sign and return this form with appropriate documentation to the Financial Aid Office.

Select situati	the appropriate option(s) pertaining to your on.	Let us know if the situation affecting your performance was a one-time situation and any other notes you may want to add.
	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:
	Death of an immediate family member. Include a copy of the death certificate or obituary.	Date(s):Relation:
	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 :
	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. Note: Must be hand-signed or electronically signed, such as with a digital stamp or a stylus, finger, or touchpad.

Signature:	Date: