

Parent's Signature (Required, if dependent student)

## **University of South Carolina Beaufort**

Financial Aid/Veterans Affairs Office 801 Carteret Street ♦ Beaufort, SC 29902

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## 2024 – 2025 Unusual Enrollment History Form

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) has been selected for review due to your unusual enrollment history in college. Federal regulations dictate that we must ask you for additional information before determining your eligibility for federal student aid. The purpose of this form is to analyze your receipt of **Pell Grant** and **Federal Direct Loan** funds over the past **four** academic years.

<u>SEC</u>	TION A: Studen	t Information					
Last Name First Name		Middle Name		Student VIP ID			
Email Address					Home Phone	Home Phone	
					Cell or Alternate P	hone Number	
<u>SEC</u> *	an additional pag	leges attended during the ti ge listing all schools you att	ended and include your n n each college attended i	f you attended multiple scho ame and VIP ID at the top of f the university does not hav at USCB.	f each page.		
		Name of College		Dates of Attendance	Credit / Clock	Hours Earned?	
				2020-2021	☐ Yes	□ No	
				2021-2022	☐ Yes	□ No	
				2022-2023	☐ Yes	☐ No	
				2023-2024	☐ Yes	□ No	
If ex should acade exte	tenuating circum ild include how the lemic success. You nuating circumstand Death of an immal Documented how medical records Military withdrand	the circumstance that led to u must also attach third par ances include:  mediate family member (must spitalization or illness of seleas to the student's readines wal (include documentation or unexpected disaster (include documentation)	your academic difficulties ty documentation to corn st include relationship of f, child or parent (if self, r iss to return to school) I from commanding office clude copy of police repo		steps you have taken t vill be denied financial nd copy of death certif letter on letterhead, a	o ensure your own aid. Examples of icate)	
SEC.	documentation.  TION D: Certific	cation and Signatures					
		nt, I certify that all the informati or repayment of financial aid ar		accurate. If I purposely give fal. aced to jail, or both.	lse or misleading informat	tion on this document, it	
Stude	ent's Signature		<del></del>	Date		<del></del>	

Date