



2020-2021 Unusual Enrollment History Form

Your 2020-2021 Free Application for Federal Student Aid (FAFSA) was 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 Grants and/or Federal Direct Loans over the past four years.

STUDENT INFORMATION		
Last Name:	First Name:	Middle Initial:
Student ID:	Email:	Date of Birth:

SCHOOLS ATTENDED

- Please list all colleges attended during the time frame listed below. If you attended multiple schools during the indicated timeframe, attach an additional page listing all schools you attended and include your name and Student ID at the top of each page.
- You **must** attach an academic transcript from each college attended. Please note: If any transcript is unclear, you will be required to provide official academic transcripts.
- Failure to report all colleges with attached transcripts will result in the denial of your request for federal financial aid at SUNY Old Westbury.

Name of college	Dates attended	Did you earn credits?	
	2016–2017	Yes	No
	2017–2018	Yes	No
	2018–2019	Yes	No
	2019-2020	Yes	No

EXTENUATING CIRCUMSTANCES

If personal reasons explain your failure to earn academic credit in any semester attended which financial aid was utilized, you must attach third party documentation to corroborate your claim or you will be denied federal financial aid at SUNY Old Westbury.

Examples of extenuating circumstances include:

- Death of an immediate family member
- Documented hospitalization or illness of self, child or parent
- Military Withdrawal
- Other circumstances not addressed in the above categories, submit a written statement that explains your situation including supporting documentation.

CERTIFICATION AND SIGNATURES

Each person signing this form certifies that all of the information reported on it is complete and correct.

Student's Name	Student's Signature	Date
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Office Use only:

Financial Aid Advisor's Name	Advisor's Signature	Date
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