

Parent's Signature (Required, if dependent student)

University of South Carolina Beaufort

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

Office: 843-521-3104 ♦ Fax: 843-521-3194 ♦ www.uscb.edu

Email: uscbfina@uscb.edu

2021 - 2022 Unusual Enrollment History Form

Your 2021-2022 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.

ast Name	First Name	Middle Name		Student VIP ID		
mail Address				Home Phone		
			Cell	Cell or Alternate Phone Number		
SECTION B: Scho	ols Attended					
Please list all	colleges attended during the ti	me frame listed below. If you atter	ded multiple sch	ools during the indicate	ed time frame, attac	
		ended and include your name and \		· -		
		n each college attended if the unive	rsity does not hav	e it on file already. Fa	ailure to report all	
colleges atten	nded will result in denial of you	r request for financial aid at USCB.				
	Name of College	Dates of	Attendance	Credit / Clock	Hours Earned?	
		201	7-2018	☐ Yes	□ No	
		201	8-2019	☐ Yes	☐ No	
		201	9-2020	☐ Yes	□ No	
		202	0-2021	☐ Yes	D.N.	
			0 1011	1 163	□ No	
f extenuating circu hould include hov	v the circumstance that led to You must also attach third par	to earn academic credit, you must your academic difficulties has been ty documentation to corroborate y	vrite a detailed le resolved and the	tter explaining the situsteps you have taken t	uation. This letter to ensure your own	
f extenuating circuloud include how academic success. extenuating circum Death of an in Documented medical recor Military without	umstances caused your failure of the circumstance that led to You must also attach third parastances include: Immediate family member (must hospitalization or illness of selfords as to the student's readinest drawal (include documentation ime or unexpected disaster (incitances not addressed in the allowed).	to earn academic credit, you must your academic difficulties has been ty documentation to corroborate yest include relationship of family ments, child or parent (if self, must include to return to school)	vrite a detailed le resolved and the our claim or you w nber to student a le signed doctor's	tter explaining the situ steps you have taken t vill be denied financial nd copy of death certif letter on letterhead, a	uation. This letter to ensure your own aid. Examples of ficate) along with dates and	

Date