

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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2023 - 2024 Unusual Enrollment History Form

Your 2023-2024 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.

SECTION A: St	tudent Information					
Last Name	First Name	Middle Name		Student VIP ID		
Email Address				Home Phone	Home Phone	
				Cell or Alternate Pho	one Number	
Please list an additioYou must a	chools Attended all colleges attended during the till nal page listing all schools you atte attach an academic transcript fron ttended will result in denial of you	ended and include your name on each college attended if the	e and VIP ID at the top of university does not ha	of each page.		
	Name of College	Di	ates of Attendance	Credit / Clock	Hours Earned?	
	-		2019-2020	☐ Yes	□ No	
			2020-2021	☐ Yes	□ No	
			2021-2022	☐ Yes	□ No	
			2022-2023	☐ Yes	□ No	
If extenuating of should include academic succe extenuating circumstance of the property of th	circumstances caused your failure of how the circumstance that led to your sailure of the circumstance that led to your sailure of the circumstance that led to your sailure of the circumstances include: In immediate family member (must seed hospitalization or illness of self ecords as to the student's readines ithdrawal (include documentation of circumstances not addressed in the about ation. In immediate family member (must seed hospitalization or illness of self ecords as to the student's readines ithdrawal (include documentation or the circumstances not addressed in the about sailures ation. In immediate family member (must seed hospitalization or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the student's readiness ithdrawal (include documentation or illness of self ecords as to the self ecords as to t	your academic difficulties hat by documentation to corrobot the include relationship of fame, child or parent (if self, must sto return to school) from commanding officer) clude copy of police report, the pove categories, submit a wrong reported on it is true and accompany to the reported on its interpretable true accompany to the reported on its interpretable true accomp	ily member to student at include signed doctor's hird party letters, etc.) itten statement that expurate. If I purposely give facurate.	e steps you have taken to will be denied financial and copy of death certifus letter on letterhead, a plains your situation incomplete.	o ensure your own aid. Examples of icate) long with dates and luding supporting	
 Student's Signatu	ıre		 Date			

Date