

FINANCIAL AID, VETERAN SERVICES, AND SCHOLARSHIPS

Federal Student Aid Programs

Unusual Enrollment History Form 2025-2026

Student's Name	Student ID			
AddressCity			State	Zip
Home Phone		Cell Phone:		
The Department of Education has colleges you have attended. You need determine your financial aid eligi	nust submit this forn	_		-
I. Instructions				
below. 2. In Section II below, list all sch	nools at which you receivable 24-2025 academic year the school you attended anscripts from all school me the school(s). Forms	ved Pell Grant funds and s. Using NSLDS, you Please attach an additional ls you list in the boxes submitted without aca	nd/or Federal Loa will be able to vio ional piece of par s unless Pensacola demic transcripts	ew your Pell Grant and Federal per if more space is needed. a State College has accepted
II. Colleges Attended				
Name of College	Dates of Attendance	Credit/Clock Hours Earned?		Transcripts
		YesNo*YesNo*	☐ Attached	edits/clock hours accepted by PSC
		☐ Yes ☐ No*	Attached Transfer cr	edits/clock hours accepted by PSC
		YesNo*Yes		edits/clock hours accepted by PSC
*If you answered "No" to the Credit/Clock explanation of the special circumstance(s) that caused your explanation by the	your failure to earn acad	emic credit/hour and pr	ou listed above, yo	•
III. Signatures & Certifications				
I certify that the information submitted is provide additional proof of the informatic form may result in reduction or repaymen	on provided on this form.	I understand that purpo	sely providing fals	
udent Signature:Date:				

EXAMPLES OF SPECIAL CIRCUMSTANCES AND RECOMMENDED DOCUMENTATION

This list is not all inclusive. There may be other types of documentation that are acceptable. Please make sure the dates on the documentation coincide with the dates you received Pell Grant funds and did not earn academic credit. Submitting an explanation with supporting documentation <u>does not guarantee</u> financial aid eligibility will be reinstated.

Nature of Appeal	Recommended Documentation
Death of immediate relative	Obituary notice or death certificate
Illness of self or immediate relative	Signed doctor's note (must be on doctor's letterhead) Hospital records or bills with dates of stay
Divorce/separation	Divorce papers, signed letter from attorney (on letterhead) Signed statement from pastor or counselor (on letterhead) Copy of lease showing only yourself as the renter School records for children showing different household for their father/mother
Job schedule conflict	Employer's signed statement of schedule change or overtime hours worked <i>(on letterhead)</i> Timesheets – <i>must have company name printed on them</i>
Childcare problems	Signed letter from current daycare center (on letterhead) verifying enrollment of the child. If it is a personal friend or relative, the letter must be accompanied by one other signed letter from a friend or family member who is aware of the situation.

- If you had military obligations, please provide appropriate documentation from your commanding officer
- If you were a victim of a crime or unexpected disaster, please provide a copy of the police report and/or other documentation appropriate to your situation
- If none of the above, please provide alternate detailed documentation of your situation

Do not mail this worksheet to the U.S. Department of Education.

Upload this worksheet via your Workday dashboard to the Financial Aid Office.

You should make a copy of this document and any additional documents you submit for your own records.