

## 2018 - 2019 Unusual Enrollment History Form

Last Name	First Name	M.I.	Social Security Number
Address (inclu	ude apt. no)		Date of Birth
City	State	Zip Code	Phone Number (include area code)
enrollme Colleges federal fi	8 - 2019 Free Application for Federal Student A ent history in college. The U.S. Department of Ec /Universities over several years. This is consider inancial aid. Federal regulations dictate that we jibility for federal student aid. The purpose of th rs.	ducation indicated that you red unusual enrollment his must ask you for additiona	I have attended multiple tory in attempting to receive al information before determining
Mark on	e: I received academic credits from all the inst (Award Years 2014-2015, 2015-2016, 2016-2 transcripts.		
	I did not receive any academic credits from award years (Award Years 2014-2015, 2015- academic credit at a previously attended form, and provide a statement for each o academic credit. Attach supporting docum applicable. You must attach third party doc financial aid at Galveston College. Examples	2016, 2016-2017 and 2017 I <b>institution (including Ga</b> <b>of the institutions which y</b> nentation to substantiate y umentation to corroborate	-2018). <b>If you did not earn any</b> <b>Iveston College), attach to this</b> <b>ou attended and failed to earn</b> our Extenuating Circumstances, if your claim or you will be denied
	<ul> <li>Death of an immediate family me student, copy of death certificate</li> <li>Documented hospitalization or il medical records as to the student</li> <li>Military withdrawal (include docu</li> <li>Victim of a crime or unexpected of</li> <li>Other circumstances not address</li> </ul>	e) Iness of self, child or paren t's readiness to return to sc umentation from command disaster (include copy of po	t (if self, must include dates and hool) ding officer)
<u>Sign this</u>	<u>s Worksheet</u> By signing this worksheet, I (we) c	ertify that all the information	on reported on it is complete and correct.
Student'	's signature required:		Date:
Spouse's	s signature (optional):		Date:
Submi	it this worksheet to the Financial A	Aid Office.	WARNING: If you purposely give false or misleading

give false or misleading information on this worksheet, you may be fined, be sentenced to jail or both.

Note: all documents and forms submitted become the property of Galveston College and cannot be returned.