

Financial Aid Office 316 Washington Ave, Wheeling, WV 26003 304-243-2304 – finaid@wheeling.edu

2024 - 2025 Unusual Enrollment History Form

2024-2025 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.

			
Last Name	First Name	Middle Name	Student ID#
Email Address			Phone Number

Section B: Schools Attended

Section A: Student Information

- Please list all colleges attended during the time frame listed below. If you attended multiple schools during the indicated time frame, 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 if the university does not have it on file already. Failure to report all colleges attended will result in denial of your request for financial aid at Wheeling University.

Name of College	Dates of Attendance	Credit / Clock Hours Earned?
	2020-2021	Circle one: Yes or No
	2021-2022	Circle one: Yes or No
	2022-2022	Circle one: Yes or No
	2023-2024	Circle one: Yes or No

Section C: Extenuating Circumstances

Parent's Signature (required, if dependent student)

If extenuating circumstances caused your failure to earn academic credit, you must write a detailed explaining the situation. This letter should include how the circumstance that led to your academic has been resolved and the steps you have taken to ensure your own academic success. You must a third party documentation to corroborate your claim or you will be denied financial aid. Examples extenuating circumstances include:	difficulties Iso attach				
\square Death of an immediate family member (must include relationship of family member to students)	ent and copy				
of death certificate)					
\square Documented hospitalization or illness of self, child or parent (if self, must include signed do	ctor's letter				
on letterhead, along with dates and medical records as to the student's readiness to return to school)					
☐ Military withdrawal (include documentation from commanding officer)					
\Box Victim of a crime or unexpected disaster (include copy of police report, third party letters, ϵ	etc.)				
☐ Other circumstances not addressed in the above categories, submit a written statement that explains					
your situation including supporting documentation.					
Section D: Certification and Signatures					
By signing this document, I certify that all the information reported on it is true and accurate. If give false or misleading information on this document, it will be cause for denial or repayment aid and I may also be fined, sentenced to jail, or both.					
Student Signature ————————————————————————————————————					
					

Date