

## Office of Scholarships & Financial Aid

1200 Murchison Road, Fayetteville, NC 28301 | Ph: (910) 672-1325 | Fax: (910) 672-1423 | www.uncfsu.edu/finaid

## 2023-2024 Unusual Enrollment History Verification Form

STUDENT N	AME:	BANNER ID	):	
EMAIL ADI	ORESS:			
TELEPHON	E NUMBER:	CELL PHONE NUMI	BER:	
DATE:		CLASSIFICATION	÷	
I. UNUSU	JAL ENROLLM	MENT HISTORY		
The Department of Education has selected your 2023-2024 FAFSA application for review based on your unusual enrollment history for the past four years as reported to the U.S. Department of Education. The U.S. Department of Education requires Fayetteville State University's Office of Financial Aid to review all students who are selected for verification due to an unusual enrollment history to determine if there are valid reasons for the unusual enrollment history.  1) Please read and answer all questions below. Submit all unofficial transcripts needed to complete the verification of your unusual enrollment history to Fayetteville State University's Office of Financial Aid. You may fax to (910) 672-1423, e-mail to finaid@uncfsu.edu or mail to Fayetteville State University, Office of Financial Aid, 1200 Murchison Road, Fayetteville, NC 28301.  Allow ten (10) business days for review by the Financial Aid Approval Committee. You will be notified of an approval with an award or a denial in writing via email.  All decisions are final and not appealable to Fayetteville State University or the U.S. Department of Education.				
II. VERIFICATION OF ENROLLMENT HISTORY				
<ol> <li>2.</li> <li>3.</li> </ol>	a. 2022-2023:	university did you attend for the following academic  of your academic transcript for each institution you h  financial aid for the following academic years?  Yes No	ave attended. lease indicate which institution	

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5. Explain why you attended different institutions for the past four academic years. Please attach all documentation you have to explain your unusual enrollment history to this form.				
<b>Explanation for Unusual Enrollment History:</b> If you need additional space, please attach another page to this form:				
W. CEDTIFICATION AND GLOVATINE				
III. CERTIFICATION AND SIGNATURE				
By signing below the student certifies that all of the information reported on this form is complete and correct. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be				
sentenced to jail, or both.				
Student's Signature	Date			
IV. FINANCIAL AID COMMITTEE REVIEW				
IV. FIVARCIAL AID COMMITTEE REVIEW				
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Financial Aid Committee:	Decision:			
Financial Aid Committee:	Decision:			
Financial Aid Committee:	Decision:			
Financial Aid Director:	Decision:			
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