



OZARKA COLLEGE

Financial Aid

Unusual Enrollment Confirmation 2021-2022

Student Name: _____ Student ID: _____

This form must be completed because the U.S. Department of Education has determined you to have an UNUSUAL ENROLLMENT HISTORY in the past four academic years.

By signing the Statement of Educational Purpose as part of your FAFSA, you certified that you would use the financial aid you received only to meet educational costs. You must be earning credit toward a degree to be eligible for financial aid.



LIST all schools attended since Fall 2015 to Present:

Check ONE	Requirements
<input type="checkbox"/> I received academic credit from all of the schools that I attended during the past four academic years as confirmed by my official transcripts.	1. Sign below and submit this form to the Financial Aid Office. 2. Provide ALL college transcripts We are unable to continue processing your FAFSA until all of your college transcripts have been received by the Registrar's Office.
<input type="checkbox"/> I did not receive academic credits from one or more of the schools that I attended during the last four academic years.	1. Sign form below and submit with the following documents: a) Signed statement explaining your reasons for not earning academic credit at one or more institutions you have attended (explain each occurrence separately) b) Support documentation to justify your reasons. c) Degree Plan , signed by your advisor, stating the courses you will take to complete graduation requirements. 2. Provide copies of ALL college transcripts We are unable to continue processing your FAFSA until all of your college transcripts have been received by the Registrar's Office.

If you did not receive credit at one or more schools attended, we will review your transcripts, your explanation(s) and supporting documentation. If you are denied financial aid for your enrollment history, you may request review to regain eligibility only after completing all courses attempted in one semester. You must be meeting Ozarka College Satisfactory Academic Progress Policy (SAP) to receive aid. It may be accessed at www.ozarka.edu/finaid/finaid_sp.cfm.

REQUIRED SIGNATURE: I certify that all information reported on this form and on any attached documents is complete and correct. Warning: If you purposefully give false or misleading information for the purpose of receiving federal aid, you may be fined, sentenced to jail or both.



_____ Date _____