



Office of Financial Aid
 1704 S. Slappey Blvd.
 Albany, Ga 31701
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 Fax: 229-430-6180

**Unusual
 Enrollment
 2019-20 School Year**

Name: _____

Student ID: _____

E-Mail: _____

Telephone: _____

1.) The U.S. Department of Education has selected your file for a review due to a pattern of unusual enrollment history at colleges / universities you have attended. Federal regulations dictate that we must ask you for additional information before determining your eligibility for federal student aid. You must **list all schools** that you attended during the 2015-16, 2016-17, 2017-18 and 2018-19 academic years. You can visit www.NSLDS.ed.gov to view a list of schools that paid you financial aid.

2.) In addition, **you must provide unofficial transcripts** or grade reports from all schools unless Albany Technical College (ATC) has accepted transfer credits from that school(s) or you submitted documentation to complete the unusual enrollment form last year. Please note: If any transcripts are unclear you will be required to provide official academic transcripts. Forms submitted without academic transcripts or grade reports will not be processed. Failure to report all schools will result in denial of your request for financial aid at ATC.

3.) **If you did not earn credit** at any of the schools attended (including ATC), you **must provide a signed statement with an explanation of the special circumstance(s) that caused your failure to earn academic credit and provide third-party documentation to support your explanation.** Submit a separate statement for each of the schools where you failed to earn academic credit. Please allow 4 weeks for your academic transcript to be evaluated.

School	Earn Credits	Transcripts	Office Use Only
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Transfer credit accepted at ATC <input type="checkbox"/> Submitted last year with EHIST	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Transfer credit accepted at ATC <input type="checkbox"/> Submitted last year with EHIST	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Transfer credit accepted at ATC <input type="checkbox"/> Submitted last year with EHIST	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Transfer credit accepted at ATC <input type="checkbox"/> Submitted last year with EHIST	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Transfer credit accepted at ATC <input type="checkbox"/> Submitted last year with EHIST	

Certification Statement

I certify that the information on this form and any attached documents is complete and correct to the best of my knowledge. I also understand that if I give false or misleading information, I may be fined, jailed, or both.

Student Signature: _____

Date: _____