

UNUSUAL ENROLLMENT HISTORY APPEAL FORM

OFFICE OF SCHOLARSHIPS AND FINANCIAL AID

601 S. Martin Luther King Jr. Drive, Winston-Salem, NC 27103 Phone: (336) 750-3296 Fax: (336) 750-3297

	First Name	MI	Student ID	
Your 2026-2027 FAFSA has been flag you received Federal Pell Grant fund 2022-23, 2023-24, 2024-25 and 20 via the National Student Loan Data refunds of federal student aid.	ds and/or Federal Direct Loans at 125-26. This flag requires Winston	multiple education institu -Salem State University t	itions during the review period of or review your enrollment history	
According to the NSLDS, you receive academic credit at the following i		irect funds, but we could I	not verify that you earned	
Academic Year	School Name_	chool Name		
Academic Year	School Name	School Name		
Academic Year	School Name	School Name		
Academic Year	School Name_	School Name		
your failure to earn any academic c include your name and student ID# this completed form and all require requirements. Please check the circumstance that	redit at that institution while rece f at the top of each page. Your ap d documentation. You will be not best describes why you failed to e	eiving Federal Pell Grant f olication for financial aid fied via e-mail of our deci	ed explanation explaining the reason for funds during the review period. Please will not be considered until you submit ision within 30 days of completing these	
Personal Related Issues • Death certificates, obituaries of th • Letter from family member verifyi • Copy of police reports of the incid Health Related Issues	nefamily member(s) ing circumstances.	letterhead. • Statement from emplicating your circu	of employment printed on company ployer (printed on company letterhead) mstances. List changes implemented he issue has been resolved and the	
i i lealtii neiateu 155UE5	_	timeframe affected.		
Signed letter from doctor.				
	of medical office or	 Other Circumstance Provide appropriate your statement. 	es Not Listed documentation supporting	

UNUSUALENROLLMENTHISTORYAPPEAL OFFICE USE ONLY:

_ All transcript/s reviewed	Credit was earned at each institution	No other concerns	Clear Flag	
_ All transcript/s received/reviewed	d Credit not earned Date student notified/Requirement added:			
Date appeal reviewed:	Incomplete	_Appeal Approved	_Appeal Denied	
Add'l Notes/Comments:			_	
State reason for concern/denial:				
DEVIENATED DV/FA A sign store)		DATE		
REVIEWEDBY(FAA signature)		DATE		
QCReviewer(FAA signature)		DATE		