

Unusual Enrollment History Verification Form

2019-2020

LAST NAME:	FIRST:	MI:	STUDENT ID #:
LOCAL ADDRESS:			ZIP:
PHONE:		E-MAIL:	

Verification Guidelines

The U.S. Department of Education may flag a student for Unusual Enrollment History Review because they received Federal funds at multiple education institutions during the review period (2015-2016, 2016-2017, 2017-2018 and 2018-2019 academic years). This flag requires the Office of Scholarships and Financial Aid (OSFA) to review the student's enrollment history during the review period. Submission of this form does not guarantee that the student will be eligible for Title IV financial aid.

Documentation

1. List below the name of any/all institution(s) at which you received federal student aid during the review period (2015-2016, 2016-2017, 2017-2018 and 2018-2019 academic years) and **did not earn any academic credit**.

2. For **each** school listed above, **attach a personal statement** explaining the reason for your failure to earn any academic credit at that institution while receiving federal student aid during the review period. Attach any relevant supporting documentation and include your student ID number at the top of each page. All documentation submitted is confidential. Some examples of unusual circumstances follow, along with examples of appropriate supporting documentation:

Circumstance

- The student's own mental or physical illness, injury or disability
- Personal circumstances beyond the student's control, other than the student's own mental or physical illness or injury or disability

Examples of supporting Documentation

- Verification of Health-Related Reasons for OSFA form from Campus Health* and personal statement
- Provide a written statement from an attorney, professional advisor or other individual describing circumstances and personal statement

Important: Incomplete or missing documentation will delay the appeal process. Any changes to financial aid awards will be contingent on the types of funds available, eligibility policies, and regulations. After initial review, additional documentation may be required. Appeal review may result in required application corrections. Students waiting for an appeal decision should be fully prepared to assume responsibility for all course enrollment and account balance payment, regardless of the appeal decision.

Student Certification

I certify that all information submitted is accurate and true to the best of my knowledge, that all copies are unaltered, and that I have appropriately obtained all supporting documentation. I have attached my personal statement(s) explaining my circumstances at each school listed above.

Student Signature _____ Date _____

Provide your licensed health care professional's letter to Campus Health Service to the attention of:

Dr. Harry McDermott
PO. Box 210095
Tucson, AZ 85721
FAX: 520-621-8412

Campus Health will review the letter and, if it meets the conditions for appeal based upon your own mental or physical illness, injury, or disability for the review period, they will issue a Verification of Health-Related Reasons for OSFA form. The Verification form will include the dates of onset of the condition and the dates through which such condition continued, but will not include information related to the nature of the condition. You must attach the Verification of Health-Related Reasons for OSFA form to your UEH verification form and return it, along with a personal statement, to the Office of Scholarships and Financial Aid (OSFA). The Campus Health Verification form alone (turned in without a student personal statement) is not sufficient documentation for UEH verification approval.



**SCHOLARSHIPS
& FINANCIAL AID**

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