

2021-2022 Unusual Enrollment Review Form

1500 College Parkway Elko, NV 89801

E-mail address: financial-aid@gbcnv.edu
Website: www.gbcnv.edu/financial

Phone: (775) 327-2095

Fax: (775) 753-2390

Student Name:		Date of Birth:	Student ID	
Home Address	PO Box#	City	State	Zip Code
Cell Phone#	Work Phone #:	Email address:		

The federal processor, U.S Department of Education, has flagged your **2021-2022** Free Application for Federal Student Aid (FAFSA) for "**Unusual Enrollment History Review**". The U.S. Department of Education has established regulations to prevent fraud and abuse. According to the federal processor, you have received Federal Pell Grants and/or Federal Direct Student Loans at multiple institutions for the past four years.

The period of enrollment for review are: **2018-19**, **2019-20**, **2020-21**. **Per federal regulations**, Great Basin College is required to review your entire enrollment history to determine if you are eligible to receive federal financial aid.

Please provide the follow documentation to accompany this UEH form for review:

•	Send OFFICIAL transcript to: Great Basin College, Attn: Admission & Records Office
	1500 College Parkway
	Elko, NV 89801
Log i	nto <u>www.nslds.ed.gov</u> to review your enrollment history.
	 Must have a FSA ID Username & Password to access.
	 Up-to-date Grant and Loan information of each school you have attended along with the School Contact Information (i.e. address & phone number)
Subr	nit in writing explanations (below) for <u>each</u> school the failure to:

- Earn academic credit or Did not meet the Federal Satisfactory Academic Progress (SAP) Standards at each school.
- Reasons for transferring to each school.
- Extenuating circumstances that that were out of your control. You must submit documentation to support your extenuating circumstances.

(i.e., illness, injury, death of family member, change in living circumstances or military obligations etc.)

Explain what you will do to improve your academic performance.

Student

By signing this form, I acknowledge that by submitting this UEH form there is no guarantee of an approval. If denied, I will be responsible for payments for tuition, housing, or any institutional charges. Furthermore, I certify that I have read and understand the Federal Satisfactory Academic Progress (SAP) requirements. I also certify that all information submitted with UEH form is accurate and true, to the best of my knowledge, that all copies are unaltered, and that all documentation has been appropriately obtained. I understand that monetary or criminal penalties may be imposed for fraud committed in relation to obtaining Federal Financial Aid.

Student's signature		Date:	
		For Financial Aid Office only:	
Pell LEU %: UEH: 2 or 3	Approved: Yes or No Date:	Reason for Approval or Denied:	