

## 2017-2018 Unusual Enrollment History

_____ Last Name	_____ First Name	_____ M.I.	
_____ Social Security Number or Student ID	_____ Date of Birth	_____ /_____/_____ Date of Birth	
_____ Address (include apt no.)	_____ City	_____ State	_____ Zip Code
_____ Student's Phone Number	_____ Student's Email Address		

The Department of Education has selected your file for review due to your unusual enrollment history. You must submit this form and required documentation so that your financial aid eligibility can be determined.

- A. Submit official academic transcripts from all schools attended **during 2013-14, 2014-15, 2015-16 and 2016-17**. The U.S. Department of Education indicated you have attended multiple colleges/universities over the last four academic years. This is considered unusual enrollment history. As per the Cisco College Catalog, all certificate and degree seeking transfer students must submit official transcripts from all colleges or universities previously attended. These transcripts, if not already provided, must be submitted to the Financial Aid Office at:

Cisco College  
Financial Aid Department  
101 College Heights  
Cisco, TX 76437

- B. Academic credit received at other schools.

Mark One:

- I received academic credits from all the institutions that I attended during the past four award years (Award years 2013-14, 2014-15, 2015-16 and 2016-17) as confirmed by my official academic transcripts.
- I did not receive any academic credits from one or all institutions that I attended during the past four award years. (Award years 2013-14, 2014-15, 2015-16 and 2016-17). If you did not earn any academic credit at a previously attended institution (including CC), you must attach to this form a statement explaining why you failed to earn academic credit. You must submit a separate statement for each of the institution(s) which you attended and failed to earn academic credit. You must attach supporting documentation from a third party (doctor's statement, hospital records, police report, obituary, military orders, etc.) to support your claim.

**Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

_____ Print Student's Name	_____ Student's ID Number
_____ Student's Signature	_____ Date