

Office of Financial Aid and Scholarships



## 2023-2024 Unusual Enrollment Form

Student Last Name	First Name	Coyote ID#
		() Phone Number
	ent history reflects a pattern tha	ived a Pell Grant or Direct Loan disbursement at includes enrollment at numerous institutions. The past four academic years.

Please list the colleges that you have attended over the past four years.

<b>College Name</b> (i.e. Valley College)	Enrollment Period (i.e. 8/13 - 5/14)	Number of Units Earned

- Please provide an academic transcript (Unofficial transcripts are acceptable) for each college listed above.
- If you did not complete the course(s) that you enrolled in at any of those institutions, you must provide a written explanation regarding your lack of course completion.

## **CERTIFICATION:**

By signing this form, I certify that all of the information reported on this form is true, complete and accurate. I agree to provide additional documentation if requested.

Student's Signature:

\_\_Date:\_\_

Office Use Only		
Unusual Enrollment History Resolved:	□ No (Please explain)	
Comments:		
Staff Signature:	Date:	

Return To: 5500 University Parkway UH 150 San Bernardino, CA 92407 Tel: (909) 537-5227 Fax: (909) 537-7024