

SECTION A: STUDENT INFORMATION

SECTION C: CREDITS NOT EARNED

Financial Aid Office

9601 Germantown Ave, Philadelphia, PA 19118 Phone: (215) 248-7182 / Fax: (215) 242-7705

finaid@chc.edu

2024-2025 Unusual Enrollment History Verification Form

Your 2024-25 Free Application for Federal Student Aid (FAFSA) has been flagged for Unusual Enrollment History Review by the U.S. Department of Education because you have received Federal Pell Grant and/or Federal Direct Loan funds from multiple institutions during the following review period: 2020-2021, 2022-2023, 2023-24. This flag requires Chestnut Hill College to review your enrollment history to determine aid eligibility.

SECTION B: ENROLLMENT HISTOR	<u>W</u>		
 Please list all colleges/universities College (CHC) during any of the if needed, which includes the inf You must attach an academic trace College Financial Aid Office. Please note: If any unoffice academic transcripts. Fail processing your file or de You may reference your academic transcripts. Remember that all official transcripts. 	ese years, you are require formation form the chart inscript (official or unofficial transcripts are uncleadure to report all colleges inial of your request for fice periods for financial ai	ed to list our school. Attabelow, your name and Cocial) from each college attact, you will be required to with attached transcripts inancial aid at CHC. d at studentaid.gov.	ach an additional page, CHC ID. cended to Chestnut Hill provide official
Name of School	Dates of Attendance	Did you earn credits?	Transcripts?
Example: Chestnut Hill College	8/1/2019-5/1/2020	_X_YESNO	_X_Attached Already Submitted
		YES NO	Attached Already Submitted
		YESNO	Attached Already Submitted
		YESNO	Attached Already Submitted
		YES NO	Attached Already Submitted
		YESNO	Attached Already Submitted
		YES NO	Attached Already Submitted
STUDENT NAME:		CHC ID #:	



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Complete the chart below if you did not earn credit at of the school(s) listed in Section B. You must provide an explanation as to why you did not earn credit AND submit supporting documentation. Attach an additional page, if needed, which includes the information from the chart below, your name, and CHC ID. Examples include, but are not limited to:

- Death of immediate family member-Provide the relationship to you and a copy of the death certificate
- Victim of crime or unexpected disaster-Provide copy of police report and/or other supporting documentation
- Military obligations-Provide documentation from your commanding officer, military orders
- Birth of child-Provide birth certificate
- Illness or hospitalization of self or family member Provide documentation of medical treatment including dates, medical records, and letter from doctors which include a student's readiness to return to school
- Other circumstances beyond your control Provide documentation to support not earning credits

Name of School Dates of Attendance		Explanation of why you did not earn credit:			
Example: Chestnut Hill College	8/1/2019-5/1/2020	Birth of child on 11/1/2019. I am providing a copy my child's birth certificate and my official transcript.			
SECTION D. CERTIFICATIO	NS AND SIGNATIRE	ES (Required)			

Please Read Carefully: By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that if I purposely give false or misleading information on this worksheet it may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment, or both, under provisions of the United State Criminal Code and disciplinary actions by Chestnut Hill College. If I have any questions or concerns, I will contact Chestnut Hill College (CHC) Financial Aid Office immediately. Your documentation must contain an original signature. We cannot accept forms containing esignatures, typed signatures, or e-pen.

Please use myCHC Document U	nload mail	fax or in-t	person to deliver	vour documentation	to the Financia	al Aid Office
i icase use my crite Document o	proau, man,	iax, or iii-j	ocison to derive	your documentation	to the Phianes	ai mu Omu.

Student Signature: _____ Date: _____