



Student Name: \_\_\_\_\_ Student email: \_\_\_\_\_

## **Unusual Enrollment History (UEH) Appeal Form 2025-2026**

The U.S. Department of Education has determined that you have an unusual enrollment history, which indicates that you received the Federal Pell Grant and/or Federal Direct Loans at three or more institutions during the past four years.

We have reviewed your submitted academic transcripts and it was determined that you did not earn academic credit at \_\_\_\_\_

If you wish to appeal this decision, please include a typed statement to explain the extenuating circumstances for your failure to earn academic credit during the time period that you received federal aid. Explain all terms in which you failed to earn credit. You must include supporting documentation to support your written statement.

### **Certification and Signature:**

By signing my name below, I hereby acknowledge that I have read and understood the terms and conditions pertaining to the 2025-2026 UEH Appeal Form.

- I understand that the UEH Appeal Committee may deny my appeal and this decision is final.
- I understand that a denial decision means that I will not receive any federal financial aid until I successfully meet all UEH standards.
- By signing this form, I certify that the information on this form is truthful and accurate.

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**Student Signature**

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**Date**