

2018–2019 Unusual Enrollment History Appeal Form

Your Free Application for Federal Student Aid (FAFSA) has been selected for review based on your enrollment history. Please complete this worksheet, printing clearly in ink. All signatures must be handwritten and dated. Typed or electronic signatures cannot be accepted. Along with this form, we must review academic transcript(s) or grade report(s) showing dates attended and credits earned for all schools listed in Section 3. Note that if you waived transcripts for any school(s) during the admissions process, they are still required for this review.

Section 1. Student Information			
Student first name	Student last name	Student ID number	
Street address		State	Zip
Phone number (including area code)	Date of birth	Email address	

Section 2. Waukesha County Technical College Enrollment History	
Have you previously enrolled or are you currently enrolled at WCTC and have earned credit(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section 3. Colleges Attended			
Name of school	Dates of attendance	Credits earned?	Transcripts
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already submitted

Please continue to next page.



**2018–2019 Unusual Enrollment
History Appeal Form** *(continued)*

Financial Aid Department
800 Main Street; room C-019
Pewaukee, WI 53072
262.691.5436 (Phone); 262.691.5123 (Fax)
money@wctc.edu

Section 4. Credit Not Earned

Complete the chart below if you did not earn credits at any of the school(s) listed in Section 3. You must provide an explanation for lack of credit, in addition to supporting third-party documentation. Examples of appropriate third party documentation are listed below:

- If you, your child, or your parent/spouse experienced illness or were hospitalized, please provide documentation on letterhead of dates and, if applicable, a healthcare provider’s decision of student’s readiness to return to school.
- If you experienced the death of an immediate family member, please provide the relationship of this person and a copy of the death certificate.
- If you had military obligations, please provide appropriate documentation from you commanding officer.
- If you were the victim of crime or unexpected disaster, please provide a copy of the police report and/or other documentation appropriate to your situation.
- If none of the above, please provide alternate detailed documentation of your situation.

Name of school	Explanation for lack of credit

Section 5. Signatures & Certification

I certify that the information provided on this form is true and correct to the best of my knowledge. I am aware that if I intentionally give false or misleading information on this form, I may be fined, sentenced to jail, or both.

Student signature _____ Date _____