

# 2020-2021



## Unusual Enrollment History (FSUEH)

Student's Name (PRINT): \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

HCC ID: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Home Campus: \_\_\_\_\_  
(9-digit number required) (Primary location of attendance)

The U.S. Department of Education indicates that you have attended multiple colleges/universities over the last four academic years. This is considered an unusual enrollment history. You must submit this form and required documentation to the financial aid office to determine your financial aid eligibility.

If you haven't already, please submit official transcripts from all institutions attended during 2016-2017, 2017-2018, 2018-2019 and 2019-2020 years. Official transcripts can be sent to the Admissions Office electronically at [admissions@hccs.edu](mailto:admissions@hccs.edu) (preferred method) or by mail to the address below:

Houston Community College Admissions/Records  
P.O. Box 667517  
Houston, TX 77266-7517

### Prior financial aid received (check one):

I received academic credits from all the institutions that I attended during the past four award years (2016-2017, 2017-2018, 2018-2019 and 2019-2020) 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. (2016-2017, 2017-2018, 2018-2019 and 2019-2020)

If you did not earn any academic credit at a previously attended institution including (HCC) you must attach to this form a typed statement explaining why you failed to earn academic credit. You must submit a separate typed statement for each institution(s) which you attended and failed to earn academic credit. Attach any relevant supporting documentation (i.e. medical records, doctor's statement, police report, obituary, etc.) to support your claim.

**\*Copies of transcripts from all schools attended from 2016 – 2020 must be attached and can be either official or unofficial. A letter may also be attached to explain any classes attempted but not successfully completed.**

### Certification

By signing below, I/we acknowledge and confirm that the above information is complete and correct. Purposely giving false or misleading information may result in federal fines, jail sentence, or both.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**To be completed by a financial aid representative**

- \_\_\_\_\_ Student did not enroll in multiple institutions solely to obtain a credit balance payment and is eligible to receive aid.
- \_\_\_\_\_ Student appears to have enrolled in multiple institutions solely to obtain the credit balance payment and is ineligible to receive aid.

\_\_\_\_\_

Financial Aid Representative Signature

\_\_\_\_\_

Date