FRANCISCAN
MISSIONARIES OF OUR LADY
UNIVERSITY

2026-2027 ENROLLMENT HISTORY REVIEW APPEAL FORM

NAME: _____ **SID:** _____

PHONE: _____ **EMAIL ADDRESS:** _____

Your 2026-2027 FAFSA has been flagged for "Unusual Enrollment History Review" by the U.S. Department of Education because you received a Federal Pell Grant and/or Federal Direct Loan funds at multiple institutions during the review periods:

- **2015-2016, 2016-2017, 2017-2018, 2018-2019, 2019-2020, 2020-2021, 2021-2022, 2022-2023, 2023-2024, 2024-2025, 2025-2026, and 2026-2027.**

This flag requires the university to review your enrollment history and determine whether or not you are enrolling only long enough to receive cash refunds of federal student aid.

- You are not eligible for any federal aid at this time, but you have the option to appeal this decision by completing and returning this form and all supporting documentation to our office for review and evaluation.

1. List all post-secondary institutions you have attended during the review periods below:

Name of University	Dates Attended	Did you earn credits?
	2015-2016	☐ Yes ☐ No
	2016-2017	☐ Yes ☐ No
	2017-2018	☐ Yes ☐ No
	2018-2019	☐ Yes ☐ No
	2019-2020	☐ Yes ☐ No
	2020-2021	☐ Yes ☐ No
	2021-2022	☐ Yes ☐ No
	2022-2023	☐ Yes ☐ No
	2023-2024	☐ Yes ☐ No
	2024-2025	☐ Yes ☐ No
	2025-2026	☐ Yes ☐ No
	2026-2027	☐ Yes ☐ No

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2. For each school listed above where you did not earn any credits, attach a detailed signed explanation of why you failed to earn academic credits at that school.

- Your explanation should include why you did not complete (without a passing grades) all of your attempted coursework (including dates) and the specific circumstances that prevented you from successfully completing your courses. It should also give an explanation of how the circumstances that contributed to you not earning credits have since been resolved and the steps you have taken to ensure your successful academic progress in the future.

3. Attach documentation to support your appeal (e.g., medical claims/statements, police reports, copy of death certificates/obituary, signed statements from a third party such as a counselor, priest, rabbi, employer, etc.). Failure to attach proper documentation will result a denied appeal.

Certification and Signature: (Initial each statement and sign below.)

____ I am attaching a completed appeal form and all supporting documentation as outlined above for review and evaluation by the Financial Aid Office (FAO). If asked by an authorized official, I agree to provide additional proof of this information provided on this form.

____ I understand that the submission of this form does not guarantee my federal aid will be reinstated. My appeal will be reviewed by the FAO and upon final review; a decision will be made at that time.

____ I understand this appeal may take approximately 7-10 business days to review (longer during peak periods).

____ I understand if this appeal is denied, I am not eligible for federal financial aid and I am responsible for all charges.

☐ I certify that the submitted information is true and correct to the best of my knowledge and that I have not enrolled at Franciscan University for the sole purpose of receiving Title IV credit balance refunds. I understand that purposely providing false or misleading information on this form may result in fines, jail time, or both.

_____ _____

Student's Signature **Date**

FINANCIAL AID OFFICE USE ONLY

☐ **Eligibility Granted---Approved** ☐ **Eligibility not Granted—Denied**

Comments:_____

_____

Reviewer: _____ **Date:**_____

Student notified by: ☐ **E-mail** ☐ **Mail** ☐ **Phone**

Please email this form to financialaid@franu.edu