Office of Financial Aid

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2017-2018 UNUSUAL ENROLLMENT HISTORY

| STUDENT NAME | MARITIME ID# |
|---|--|
| TELEPHONE | EMAIL |
| Review" by the U.S. Department of Education because at multiple education institutions during the review p SUNY Maritime College to review your enrollment h enough to receive cash refunds of federal student ai | Aid (FAFSA) has been flagged for "Unusual Enrollment History e you received Federal Pell Grant and/or Federal Direct Loan funds period 2013-14, 2014-15, 2015-16, and 2016-17. This flag requires history and determine whether or not you are enrolling only long id. In the process of reviewing your enrollment history, Maritime ISLDS) to obtain a complete history: the name of institutions you |
| • | n for financial aid will not be considered until you submit this u will be notified via e-mail of our decision within 10 days of |
| Federal Direct Loan funds at any/all education institu | port for the entire time you received Federal Pell Grant and/or utions during the review period (2011-12, 2012-13, 2013-14, and top of each page. Note that, if any transcripts/grade reports are ademic transcript. |
| | itution/s at which you received Federal Pell Grant and/or Federal not earn any academic credit. If you need additional space, please itime ID# at the top of each page. |
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| | |
| academic credit at that institution while receiving Fed | ement explaining the reason for your failure to earn any deral Pell Grant and/or Federal Direct Loan funds during the .e., medical bills, hospitalization records, accident reports, etc.) of each page. |
| By signing below, I certify that the information subn | mitted on and with this form is accurate and complete. |
| STUDENT'S SIGNATURE | DATE |