

 Received By:	

HONDO	E	OFFICE OF FINANCIAL AID 16 Unusual Enrollment History	y Form			
Student Nar	dent Name: RHC Student ID #					
to your unus	sual enrollment history over the p	al Student Aid (FAFSA) was selected for reviewast three years. Federal regulations require the all student aid. You must submit this form and results of the student aid.	at we must request addit	tional information		
	below. List all schools below that you 2017 academic years. Using NS attended. Please attach an addit Submit official transcripts from Transcripts must be mailed d transcripts will not be accepted		015, 2015-2016 and 202 trecords associated with 5, 2015-2016, 2016-201 Records Office only.	16- n the school you 7 years. Official		
4.		Rio Hondo College Admissions & Records Of 3600 Workman Mill Road Whittier, CA 90601 and submit official transcripts will result in deni		nancial aid at RHC		
Name of College Dates Attended Did You Earn Credits?						
	J	2014-2015	□ Yes	□ No		
		2013-2014	□ Yes	□ No		
		2012 - 2013	□ Yes	□ No		
If you have you failed to statement for	earn academic credit along with r each institution(s) which you a	rohibited you from earning academic credit, properties that this form and relevant supporting documental ttended and failed to earn academic credit. You financial aid at RHC. Examples of extenuation	tion. You must submit a bu must attach third part	a separate typed y documentation to		
	Death of an immediate family member (must include the relationship of family member to the student, copy of death certificate).					
	Documented hospitalization or illness of self, child or parent (if self, must include dates and a health care provider's decision, written on official letterhead, as to the student's readiness to return to school).					
	Military obligations (must include documentation from commanding officer).					
	Victim of a crime or unexpected disaster (include copy of police report, third party letters, etc).					
	Other circumstances not addressed in the above categories. Submit a typed statement that explains your situation including supporting documentation.					

I certify that all the information reported on this form is complete and correct. If requested, I agree to provide additional documentation to the Financial Aid Office.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature Dat e

For Financial Aid Office Use Only: **Reviewed by:** FA Advisor _____ Date: _____ Date: _____ FA Coordinator _____ FA Director _____ Date: **Approved** _____ All transcripts received Credit was earned at each institution _____ Cleared Flag No other concerns Comments: **Incomplete** Official Transcript from _____ unclear _____ Official Transcript from _____ unclear Official Transcript from _____ unclear Comments: **Not Approved** Credit not earned No supporting documentation submitted Transcript(s) missing Other Comments: