

2025-2026 Unusual Enrollment History Form

Student's Name: _____ Student ID: _____

Due to your unusual enrollment history, the Department of Education has selected your file for review. You must submit this form and the required documentation to determine your financial aid eligibility. Access the National Student Loan Data System (NSLDS) at www.nsls.ed.gov for assistance in filling out the following information. List information for the 2021-22, 2022-23, 2023-24, and 2024-25 school years. **You may be required to submit transcripts from all schools attended upon review of this form by the Briar Cliff University (BCU) Financial Aid Office.**

Name of School	Dates Attended	Credits Earned?	Transcripts
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Credits already transferred to BCU
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Credits already transferred to BCU
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Credits already transferred to BCU
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Credits already transferred to BCU

If you answered “no” to the Credits Earned question for any of the schools you listed above, you must provide an explanation of your failure to earn credit and provide third-party documentation to support your explanation.

- Death of an immediate family member (you must include the relationship of the family member and a copy of the death certificate)
- Documented hospitalization or illness for yourself or an immediate family member (must include dates and a health care provider's decision, written on official letterhead, of your readiness to return to school)
- Military obligation (must include documentation from the commanding officer)
- Victim of a crime or unexpected disaster (must include a copy of police report, third-party letters, etc.)
- Other (must include appropriate third-party documentation):

A. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

 Student's Signature (Required) Date

Do not mail this worksheet to the U.S. Department of Education.
Submit this worksheet to the financial aid administrator at your school.

Briar Cliff University
Attn. Office of Financial Aid
3303 Rebecca St.
Sioux City, IA 51104

Financial.Aid@briarcliff.edu

Office Use Only

Review Date:	Reviewed By:		
<input type="checkbox"/> Clear flag	<input type="checkbox"/> All transcripts received	<input type="checkbox"/> Credit was earned at each school	<input type="checkbox"/> No other concerns
<input type="checkbox"/> Incomplete	<input type="checkbox"/> Missing Information:		
<input type="checkbox"/> Deny aid	<input type="checkbox"/> Credit not earned	<input type="checkbox"/> Transcript(s) missing	<input type="checkbox"/> Other: