

2016-2017 Unusual Enrollment Appeal Form

** Please complete in black or blue ink only! **

	<u>H</u>
Student's Name	HGTC ID
U.S. Department of Education. The reason it has been flagged is Colleges or Universities during the past three years. Upon review	of the academic transcripts submitted, it was determined that you ended institutions AND/OR you have not submitted transcripts from
To appeal this decision, complete the following steps:	
<u>STEP 1</u>	
Submit ALL academic transcripts to the Admissions office and he Please allow $6-8$ weeks for the transcript evaluation process.	ave the transcripts evaluated prior to proceeding with the next step.
<u>STEP 2</u>	
Reason for appeal:	
<u>Personal injury or illness</u> (must have occurred during semester) accident/police report.	s) of academic difficulty)—Requires doctor's statement, hospital records, or
<u>Death or serious illness of an immediate family member</u> (paren hospital records or a death certificate/obituary notice.	ts, grandparents, children, spouse, sibling)—Requires doctor's statement,
Employment changes—Requires documents to show loss of job	or other changes in employment.
Divorce or separation in the student's immediate family—Requ	ires divorce/separation documents or letter from attorney.
Poor judgment or immaturity (may only be used as an excuse f	or 1 institution).
Other—Requires supporting documentation.	
Items to submit:	
 Completed Unusual Enrollment History Appeal Form Letter explaining circumstance for Appeal Documentation of extenuating circumstance (appeals with 	h no documentation will be denied).
Student Certification:	,
I hereby certify that all information provided on this form is true, a federal crime to purposefully give false or misleading information	complete, and correct to the best of my knowledge. I understand it is on, and may be subject to a fine, imprisonment, or both.
	Date

COMMENTS:

FA Signature:

Date: