Lourdes Financial Aid Office (FAO)

**2024-25 UNUSUAL ENROLLMENT HISTORY APPEAL FORM**

|  |  |  |
| --- | --- | --- |
| Last Name | First Name |  |
| Mailing Address | City |  State Zip |
| E-mail Address | Lourdes ID | Telephone |

The U.S. Department of Education has determined that you have an unusual enrollment history which indicates that you received Federal Pell Grant and/or Federal Direct Loan funds at three or more institutions during the past four award years. A review of your financial aid history is required. This has resulted in a denial of any additional Federal Title IV funds.

**In some cases, the student may present personal reasons to explain their academic credit history. If you wish to appeal this decision,** please provide a written statement which provides an explanation for your past academic history. For the 2024-25 year, enrollment reviewed will be from 2023-24, 2022-23, 2021-22, and/or 2020-21. Please refer to a situation that occurred during those academic terms in which you failed to earn credit. Within your statement, please include the name of the school and academic period in question. *Please include any third party documentation which would support your statement.* Typed explanations or additional pages, if needed, may be attached and submitted with this form. **You must submit official academic transcripts from each college attended.**

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**Appeal Deadline:** An Appeal is due 21 calendar days prior to the first day of the semester for which the financial aid is desired. Appeals received beyond this timeframe may not be processed prior to the semester Freeze date. *Students whose appeals are denied and are enrolled on or after the Freeze date will be responsible for their financial obligations to the University.*

**Notification of Appeal Determination**: Students are normally notified in writing through their Lourdes email account and U.S. Mail as to whether their appeal for reinstatement of financial aid is approved or denied.

**Statement of Understanding:**

I am submitting a complete and accurate appeal including all required documents and documentation. I understand that if my appeal is incomplete or if we do not have all official academic transcripts it cannot be accepted and/or processed. I understand that that any decision by Lourdes University is final and not appealable to the Department of Education. I further understand that I am responsible for making payment arrangements with Lourdes Student Accounts Office if my appeal is, 1.) Not processed by the freeze date due to being incomplete; or 2.) My appeal is denied and I am enrolled at or after the freeze date.

**Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Please forward both pages of this appeal form and all required documents to:**

Lourdes Financial Aid Office

**Attn: Unusual Enrollment APPEAL**

6832 Convent Blvd

Sylvania, OH 43560

Phone 419-824-3732, FAX 419-517-8921

Email: finaid@lourdes.edu Website: [www.lourdes.edu](http://www.lourdes.edu)

**For FAO Office use only**:

Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Incomplete: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved \_\_\_\_\_\_\_\_\_ Denied \_\_\_\_\_\_\_\_ Sent for FA processing \_\_\_\_\_\_\_\_\_

Date student notified \_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_ Paper Letter \_\_\_\_\_