

Please return this form to:

Wilmington College Pyle Box 1184 1870 Quaker Way 937.382.6661 x600 sos@wilmington.edu wilmington.edu

Wilmington, OH 45177

2025-2026 ENROLLMENT HISTORY VERIFICATION FORM

SECTION A: STUDENT INFORMATION			
STUDENT NAME:).
The U.S. Department of Education has determined you have an unusual enrollment history that indicates you received Federal Pell Grant and/or Federal Direct Loan funds at three or more institutions during the past four award years. Upon review of the academic transcripts submitted, it was determined that you did not earn academic credit at one, or more, of the previously attended institutions. This has resulted in a denial of any Federal Title IV funds.			
PLEASE NOTE: ✓ We cannot continue processing your financial aid until all required financial aid documents have been submitted. ✓ All required documents must uploaded to your Financial Aid Student Self-Service Portal. ✓ We will update your FAFSA, if needed, based on the information provided on this form.			
SECTION B: ENROLLMENT INFORM	MATION		
NAME OF SCHOOL	Dates of attendance	CREDIT HOURS EARNED?	TRANSCRIPTS
		□ No □ YES	PLEASE UPLOAD ON FILE AT WILMINGTON COLLEGE
		□ No □ YES	PLEASE UPLOAD ON FILE AT WILMINGTON COLLEGE
		□ No □ YES	PLEASE UPLOAD ON FILE AT WILMINGTON COLLEGE
		□ No □ YES	PLEASE UPLOAD ON FILE AT WILMINGTON COLLEGE
		□ No □ YES	PLEASE UPLOAD ON FILE AT WILMINGTON COLLEGE
SECTION C: EXTENUATING CIRCUMSTANCES			
YOU MAY OFFER PERSONAL REASONS TO EXPLAIN YOUR FAILURE TO EARN ACADEMIC CREDIT. YOU MUST ATTACH THIRD PARTY DOCUMENTATION TO CORROBORATE YOUR CLAIM OR YOU WILL BE DENIED FINANCIAL AID AT WILMINGTON COLLEGE. EXAMPLES OF EXTENUATING CIRCUMSTANCES INCLUDE:			
☐ DEATH OF AN IMMEDIATE FAMILY MEMBER (I NCLUDE THE RELATIONSHIP OF FAMILY MEMBER TO THE STUDENT AND COPY OF DEATH CERTIFICATE.)			
☐ DOCUMENTED HOSPITALIZATION OR ILLNESS OF SELF, CHILD OR PARENT (IF SELF, INCLUDE DATES AND MEDICAL RECORDS AS TO THE STUDENT'S READINESS TO RETURN TO SCHOOL.)			
☐ MILITARY WITHDRAWAL (INCLUDE DOCUMENTATION FROM COMMANDING OFFICER.)			
□ VICTIM OF CRIME OR UNEXPECTED DISASTER (INCLUDE COPY OF POLICE REPORT, THIRD PARTY LETTERS, ETC.)			
☐ OTHER CIRCUMSTANCES NOT ADDRESSED IN THE ABOVE CATEGORIES (SUBMIT A WRITTEN STATEMENT THAT EXPLAINS YOUR SITUATION INCLUDING SUPPORTING DOCUMENTATION.)			
SECTION D: CERTIFICATION			
By typing my name below, which serves as my electronic signature, I certify the information on the form and any associated documents submitted are accurate and complete to the best of my knowledge and that there is no forgery. The information supplied on this form supersedes that which was provided on the FAFSA. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.			
STUDENT SIGNATURE:		D,	ATE: