INDIANATECH

Unusual Enrollment Appeal Form

Student Name:	Student ID:
Email Address:	Phone: ()
Current Address:	
during the 2021-2022, 2022-2023, 202 your transcripts to be sure that you co	ed us to collect all transcripts from any school you attended 23-2024, and 2024-2025 school years. We are to review impleted at least one class in each of the schools where you based on what is considered an unusual enrollment history multiple schools.
-	not pass at least one class at each of the schools where you ently ineligible to receive Federal financial aid funds. You n.
	on explaining why you were unable to complete your ch school. You should provide third party documentation to
Third party documentation includes, b	out is not limited to:
 Medical paperwork if you wer 	family member passed away f you were trying to pass the class hospitalized while attending class ncarcerated while attending class
may be sent to Financial Aid via emai	tted with this form. Completed forms and documentation I (financialaid@indianatech.edu), via fax (260.422.1578) adents will receive a response via email within ten days of
I certify that all information and do is true and accurate.	ocumentation I have submitted pertaining to this appeal
Student Signature:	Date:

Form updated 1/6/2025