

OFFICE OF FINANCIAL SERVICES 1401 Charlestown Road Phoenixville, PA 19460

Student Name: _

Student's ID Number: ____

All students receiving an ISIR Code of 359 or 360 must be evaluated to determine if they have been enrolling at institutions only to collect a Title IV credit balance without having earned any academic credit. Follow the instructions below to evaluate these students.

Which ISIR did the student receive?

Code: 359 or Value: 2

Did the student receive a Pell Grant or Direct Loan at UVF during the past 4 years?

- Yes. Did the student remain enrolled and receive academic credits during the entire semester(s) that the Pell Grant or Direct Loan was received?
 - _____Yes. No additional action is required.
 - No. Follow instructions for Code: 360 or Value: 3
 - ____ No. Follow instructions for Code: 360 or Value: 3

Code: 360 or Value: 3

- Using NSLDS, identify the institution(s) where the students received a Pell Grant or Direct Loan during the past 4 years. Review these academic transcripts which should be in the student's file. If not, the student must provide these transcripts. Was academic credit earned during each of the semester(s) where the student received a Pell Grant or Direct Loan?
 - _____Yes. No further action is needed.
 - _____ No. The student must provide an explanation and third party documentation to support the student's claim.

Did the student provide a reasonable explanation?

- Yes. Provide the student with an Academic Plan and an explanation of the Pell LEU. The student may receive Title IV funds.
- _____ No. Deny the student any additional Title IV aid until the student can provide proof of academic credit received at UVF or another institution.

College or University Enrolled	Transcript Received	Transcript Reviewed	



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Student Name: _

Student's ID Number: _

Instructions: Complete this form with information about each college/university that you attended during the last four academic year that you failed to earn academic credit while attending. Complete this form in its entirety and submit to the Financial Aid Office for review. In addition to this appeal form, you must submit documentation from an objective third party professional for each school and for each year of attendance to support your appeal statement.

Examples of a professional third-party include: physician, counselor, lawyer, social worker, teacher, religious leader, death certificate, and divorce decree, etc. *Please note that family members, friends, and University of Valley Forge employees are not considered an acceptable third party. If the Third Party Documentation is a letter from a professional (example - doctor, pastor, lawyer, etc.) it needs to be on letterhead and signed with an original hand-written signature.

Appeal Reason:	Medical	Personal Emergency	Military	Other
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Describe the reasons why you failed to earn academic credit at each of the following schools. If additional space is needed, please attach a seperate page.

Name of College:	 School Year 20	_ to 20
Name of College:	School Year 20	to 20
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Name of College:	 School Year 20	_ to 20

By signing this workseet, I certify that all the information reported on it is complete and correct. Because this information may affect federal aid eligibility, purposely giving false or misleading information may cause me to be fined up to \$20,000, sent to prison or both. I understand any false or incomplete information may be cause for the denial of my appeal.

Student Signature	Date
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