

2026-2027
Unusual Enrollment History Appeal**A. Student Information**

Student Name:	7-digit NAU ID Number:
Phone:	NAU E-mail:

We received information from the National Student Loan Data System (NSLDS) indicating that you received federal student aid at multiple institutions and that you did not earn academic credit at one or more of these institutions during the applicable review period. Additional information is required in order to determine your continued financial aid eligibility.

Instructions: Complete this form and submit along with any other pending financial aid documents by secure upload to nau.edu/OSFAdoc-upload.

B. Documentation

Please provide the following:

- A personal statement that explains why you did not receive academic credit at your previous institution(s) for each applicable academic year, **and**
- Third-party documentation to support your statement. (Examples include, but are not limited to: letter from advisor at your previous institution, letter from a physician, police reports, etc.)

Note: Your appeal will not be considered until this form and all supporting documentation is received by our office. Allow up to 25 business days for processing.

C. Personal Statement (attach additional pages if necessary)**D. Agreement and Understanding** (please read carefully before signing)

By signing this form, you certify that all the information reported on this form is true and accurate to the best of your knowledge. If requested, you agree to provide proof of the information that you have reported on this form. If you purposely give false or misleading information on your FAFSA or on this form, you may be fined, sentenced to jail, or both (20 U.S. Code § 1097) and may face disciplinary action at Northern Arizona University.

Important: Review this form before signing to confirm all fields have been completed. Incomplete forms will not be processed and will be shredded for security purposes.

Hand-written signature only; typed, electronic, or digital signatures cannot be accepted.

Student Signature:	Date:
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