Student Financial Aid
Saulsbury Campus Center
201 W. University • Odessa, TX 79764
financialaid@odessa.edu
(432)335-6429 • Fax: (432) 335-6824

2025-2026 ENROLLMENT HISTORY APPEAL FORM

Name: _____ Student ID#_____

Address: _____ Major: _____

City/ST/Zip: _____ Phone: _____

When you applied for financial aid for the current year, the Department of Education identified you as having an UNUSUAL ENROLLMENT HISTORY and as such your FAFSA was selected as requiring further information about the last four academic years of college enrollment: **2022/2023 ,2023/2024, 2024/2025 and 2025/2026.**

As required by Federal regulations, you will need to submit an academic transcript for every institution you have attended beginning with the **2022/2023** award year thru the present. Please explain in the space provided below the reason(s) you attended several colleges during the aforementioned time frame.

Please explain in the space provided below why you did not receive any academic credit (zero credits) at any of the previously attended institutions. Supporting documentation is required.

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Student's Signature_____ Date_____

FA OFFICE ONLY

Initials: _____ **Date: _____**