

York County Community College

Financial Aid Office 112 College Drive Wells, ME 04090 Email: Finaid@yccc.edu

## 2023-2024 Unusual Enrollment History Form

Last Name	First 1		YCCC Student ID (required)
Please list all institution already done so.	ns of higher	learning and provide official trans	scripts for each to Admissions if you have not
Name of College/Univ	versity	Dates Attended	Received academic credit? Y or N
Duravida vara avva vari	ttan statana	mt describing the reasons and th	a automosting airconnector and if you failed to
receive any academic documentation. Some	credits. Be circumstan	specific and concise in your expces for appeal are death or serio	e extenuating circumstances if you failed to planation and provide any supporting ous illness of a family member, illness(es) you failure to meet academic goals or Satisfactory
receive any academic documentation. Some may have had, employ Academic progress stated Certification and Signary By signing this form, I	credits. Be circumstant ment change and ards.  ature I certify that or mislead	specific and concise in your expects for appeal are death or serious, moves, divorce/separation, to the information reported and so	planation and provide any supporting ous illness of a family member, illness(es) you

York County Community College is an equal opportunity/affirmative action institution and employer.

If you have questions, e-mail us at: finaid@yccc.edu

For more information, please call 1-207-216-4435.