

Indian River State College  
Office of Student Financial Aid

Enrollment Pattern Review

Student Name \_\_\_\_\_ ID# \_\_\_\_\_

Your 2025-26 Free Application for Federal Student Aid (FAFSA) has been flagged for “Unusual Enrollment History” by the U. S. Department of Education because you received Federal Pell Grant funds at multiple education institutions during the review period 2021-2022, 2022-2023, 2023-2024 and 2024-2025. This flag requires IRSC to review your enrollment history and determine your eligibility to receive federal student aid. In the process of reviewing your enrollment history, IRSC will check the National Student Loan Data System (NSLDS) to obtain a complete history: the name of institutions you have attended, and the dates of attendance. Please visit and click on “financial aid news” for more details regarding Unusual Enrollment History flags.

**Please complete the steps below.** Your application for financial aid will not be considered until you submit this completed form and required documentation. You will be notified via e-mail of our decision within 30 days of completing these requirements.

**STEP 1:** Submit or request for an official sealed academic transcript for any colleges previously attended to be sent to the IRSC Admissions & Records office. **PLEASE DO NOT TURN THIS FORM IN UNTIL ALL TRANSCRIPTS HAVE BEEN RECEIVED.**

**STEP 2:** List below the name of all education institutions you attended during the review period - 2021-2022, 2022-2023, 2023-2024 and 2024-2025. If you need additional space, please attach a separate page. **Include your name and ID# at the top of each page.**

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

**STEP 3:** If you did not earn academic credits at any of the above schools during the review period: 2021-2022, 2022-2023, 2023-2024 and 2024-2025, attach a statement explaining the reason for your failure to earn any academic credit at that institution. Attach any relevant documentation (i.e., medical bills, hospitalization records, accident reports, etc.) and **include your name and ID# at the top of each page.**

By signing below, I certify that the information submitted on and with this form is accurate and complete.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Upload completed form to your MyPioneerPortal Student Account

OFFICE USE ONLY

REVIEWED BY \_\_\_\_\_ REVIEW DATE \_\_\_\_\_

☐ All transcripts received

☐ Credit was earned at each institution

☐ No other concerns

☐ Transcript/s missing

☐ Credit not earned

☐ Other: \_\_\_\_\_

☐ Clear Flag

☐ Deny Aid