

Your Free Application for Federal Student Aid (FAFSA) has been selected for review based on your enrollment history. Please complete this worksheet and provide academic transcripts showing credits earned for all schools attended from July 1, 2019 to present.

**Section 1: Student Information**

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

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number (including area code) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Email Address \_\_\_\_\_

**Section 2: Colleges Attended**

Please list all colleges attended from July 1, 2019 to present. If needed, you may reference your academic history at <https://studentaid.gov>. You will need your FSA ID and password to log in.

Name of School	Dates of Attendance	Credits Earned?	Transcripts
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already Submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already Submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already Submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already Submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already Submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Attached <input type="checkbox"/> Already Submitted

**Section 3: Credit Not Earned**

Complete the chart below if you did not earn credit at any of the school(s) listed in Section 2. You must provide an explanation for lack of credit, in addition to supplying third party documentation. Examples of appropriate third-party documentation are listed below:

- If you, your child, or your parent/spouse experienced illness or were hospitalized, please provide documentation on letterhead including dates of treatment.
- If you experienced the death of an immediate family member, please provide the relationship of this person and a copy of the death certificate.
- If you had military obligations, please provide documentation from your commanding officer.
- If you were the victim of a crime or unexpected disaster, please provide a copy of the police report and/or other documentation supporting your situation.
- If none of the above, please provide alternative detailed documentation of your situation.

Name of School	Explanation for Lack of Credit

**Section 4: Signatures and Certification**

I certify that the information submitted is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines, and/or imprisonment in this and/or future years.

\_\_\_\_\_  
 Student Signature (**Must** be signed in blue or black ink)

\_\_\_\_\_  
 Date

**Submit your completed verification documents to the Financial Aid Office by electronic submission from your Westmoreland student email account to [financialaid@westmoreland.edu](mailto:financialaid@westmoreland.edu) (SUBJECT LINE: VERIFICATION), by uploading to your student portal, in person (Student Enrollment Center located in the Student Achievement Center), or by mail (Westmoreland County Community College, Financial Aid Office, 145 Pavilion Lane, Youngwood, PA 15697).**

Please allow 3 business days to confirm receipt of documents in your student portal and 2 weeks for processing **AFTER** we receive **ALL** requested documents.