



John A. Logan College
700 Logan College Road
Carterville, IL 62918

Phone 618-985-3741 Fax 618-985-4116 or 618-985-9751

*2017-2018
Unusual Enrollment History*

Please explain why you have attended the colleges/universities you have within the past four academic years.

Please explain any failing grades and/or withdraws on each transcript.

I certify that the information I have provided is accurate to the best of my knowledge. I understand that this form, my written explanation, the documentation submitted and the results of this process will become part of my educational record at John A. Logan College.

Student's signature _____ Date: _____

Financial Aid Office: **Approve** **Deny**

Financial Aid Office Signature: _____ **Date:** _____