

FINANCIAL AID TRANSCRIPT

Student No. _____

PART I: To be completed by the STUDENT

Instructions: If you ever attended another postsecondary institution, you must complete Part I of this form and submit it to the Financial Aid Office of that institution. Federal regulations require that a Financial Aid Transcript request be sent to every institution you previously attended regardless of whether you received aid to attend that institution.

Name _____ Social Security No. _____
Last First M.I.

Name used at previous institution (if different from above) _____

Student's Address: _____

UNIVERSIDAD DE PUERTO RICO EN HUMACAO
ESTACION POSTAL CUH
OFICINA DE ASISTENCIA ECONOMICA
100 CARRETERA 908
HUMACAO PR 00791-4300

I request that the Financial Aid Office at _____
which I attended from _____ to _____
provide the information requested in Part II to the institution shown to the left.

I did did not received aid while a student at this institution.

Student's Signature: _____

PART II: To be completed by the STUDENT FINANCIAL AID OFFICE at the previous institution.

Complete either: Sections A, B, and F; OR
Section A, and C through F

SECTION A Other Institutions Attended. (Everyone must complete this section)

The institution has information indicating the student attended institutions other than this institution.

No, our records show no previous institution attended.

Yes, our records indicate that the student has attended the following institutions: _____

SECTION B To be completed if the institution is not completing Sections C, D, and E.

The information requested in Section C, D, and E is not provided because:

The student neither received nor benefitted from any Title IV aid while at this institution.

The transcript pertains solely to years for which the institution no longer has and is no longer required to keep records under the Title IV record keeping requirements.

If you have completed Section A and checked one of the reasons in Section B, and are not required to provide any other information, skip Section C, D, and E, and complete Section F. Otherwise, proceed with Section C.

SECTION C Check all statements that apply.

The student received increased Federal Perkins Loan/NDSL at this institution due to Expanded Lending Option or study abroad.

The student had an outstanding balance on an NDSL at this institution on July 1, 1987, *which is still outstanding as of today's date.*

The student had an outstanding balance on a Federal Perkins Loan/NDSL at this institution on October 1, 1992, *which is still outstanding as of today's date.*

The student owes a refund due to overpayment on a Federal Pell Grant, FSEOG or Federal Perkins Loan/NDSL at this institution.

The student is in default on a Federal Perkins Loan NDSL/Income Contingent Loan (ICL) at this institution.

The institution is aware that the defaulted Federal Perkins Loan/NDSL/ICL has been discharged in bankruptcy.

The institution knows the student owes a refund due to overpayment on SSIG received for attendance at this institution.

The institution knows that the student is in default on a Federal Family Education Loan or a William D. Ford Federal Direct Loan received for attendance at this institution (including consolidation loans).

The institution is aware that the defaulted Federal Family Education Loan or a William D. Ford Federal Loan has been discharged in bankruptcy.

The student received "additional unsubsidized" Federal Stafford/Federal Direct Stafford/Ford funds at this institution as an independent student or as a dependent student whose parent was unable to borrow Federal PLUS/Federal Direct PLUS.

SECTION D

Assistance Received of Benefitted From a this Institution.

For ALL federal aid programs: When indicating totals, deduct any refunds, repayment, or Federal Pell Grant recoveries which have been returned due to an overpayment or student withdrawal. Do NOT deduct Federal Perkins Loan/NDSL prepayments or payments made according to a repayment schedule.

Sources of Assistance	_____ - _____	19__ - 19__	19__ - 19__	19__ - 19__	19__ - 19__	19__ - 19__
Pell Grant Disbursement						
Scheduled Award						
Legislative						
PIBS						
SEOG						
SSIGP						
CWSP						
LOANS						
Stafford/GSL						
Federal Direct						
Perkins/NDSL						
Comments:						

Satisfactory Academic Progress: YES NO N/A

Comments:

SECTION E

Printed Name	Signature	Title
Address:	Telephone:	
	Fax Number:	
	Date:	