

All students who are beginning their enrollment period at Gogebic Community College during the second semester or summer session must have their financial aid history reviewed before we can process any financial aid data. Return this document to the Office of Student Financial Aid after completing all three steps.

Name:	GCC ID#:	GCC ID#:	
SSN:	Date of Birth:		
Have you ever attended Go	ogebic Community Colle Ye	s 🔲 No	
If yes, when did you att enrollment here:	end? List year(s) of		
Have you ever attended any any other post-secondary ed	other colleges, technical schools, ucational institution?	or □Yes □No	
If yes, list all schools the dates of attendance.	at you have attended along wit	h their location and your	
Name of College:	Location (city/state):	Dates Attended:	
	·		
Signature:	Date:		