

2024-2025 PROFESSIONAL JUDGMENT - DEPENDENT

Student Name (please print)

Phone Number (including area code)

Campus ID Number

Parent 1 Name (please print)

Parent 2 Name (please print)

Parent E-mail (questions re: this appeal)

Who should submit this form?

Dependent students who have unusual circumstances that exist that may warrant reconsideration of financial aid eligibility. These special circumstances may be either changes that have occurred in your family since you filed the Free Application for Federal Student Aid (FAFSA) or unusual family circumstances not accounted for on the FAFSA. **NOTE:** Filing this appeal does not guarantee additional financial aid.

When should this form be submitted?

Please submit all documentation relating to your special circumstance appeal at least 4 weeks prior to the end of term to ensure our office has enough time to review and process. All appeals must be completed prior to the end of the semester for aid eligibility purposes. **Incomplete forms or missing appeal documentation will be denied.**

What circumstances qualify for a dependent special circumstances appeal?

The situations outlined on this form are circumstances that normally qualify a student to file a Special Circumstances Appeal. If your circumstance does NOT fit into one of the situations listed on this form, you may still file the Special Circumstances Appeal and attach a detailed letter explaining your situation. Provide documentation to support your circumstance and attach all required forms.

Who should not complete this form?

Do not complete this form if your family income for 2023 and/or 2024 will be more than 2022, if you have not filed the FAFSA, or if your Student Aid Index (SAI) is zero or less; as indicated on the results of your FAFSA.

Please check the box(es) next to the situation(s) that apply to you.

Situation:

Required Documentation:

Loss of Income

Reduction or loss of income from work must be for **at least ten (10) weeks** in 2023 or 2024.

A detailed letter explaining your particular situation.

A copy of **both** parent's 2022 W-2 Forms.

A **signed** copy of your parent's 2022 IRS Tax Return Form 1040 including any applicable Schedules: 1, 2, and 3 if DDX (Direct Data Exchange) was not utilized.

Parent 1 (father/mother/stepparent)

Date of layoff/termination: _____

A letter from employer verifying loss of employment including effective date.

Did Parent 1 receive unemployment benefits?

No Yes

***If yes,** provide a copy of unemployment determination letter from state agency.

Did Parent 1 receive any severance pay?

No Yes

***If yes,** how much? \$ _____

Has Parent 1 started another job?

No Yes

***If yes,** give start date: _____ and include most recent pay statement from new job.

Parent 2 (father/mother/stepparent)

Date of layoff/termination: _____

A letter from employer verifying loss of employment including effective date.

Did Parent 2 receive unemployment benefits?

No Yes

***If yes,** provide a copy of unemployment determination letter from state agency.

Did Parent 2 receive any severance pay?

No Yes

***If yes,** how much? \$ _____

Has Parent 2 started another job?

No Yes

***If yes,** give start date: _____ and include most recent pay statement from new job.

Student Name (please print) _____

Campus ID Number _____

2024-2025 PROFESSIONAL JUDGMENT - DEPENDENT (Continued)

Situation:

Required Documentation:

<input type="checkbox"/> Receipt of One-Time Income in 2022	<input type="checkbox"/> A detailed letter of appeal explaining your particular situation including information on what necessary expenses the funds were used for. <input type="checkbox"/> Documentation of the necessary expenses the funds were used for (e.g. receipts, billing statements, etc.). <input type="checkbox"/> A signed copy of parent's 2022 IRS Tax Return Form 1040 including any applicable Schedules: 1, 2, and 3 or parent's 2022 Form 1099 if DDX (Direct Date Exchange) was not utilized. <input type="checkbox"/> A signed copy of parent's 2023 IRS Tax Return Form 1040 including any applicable Schedules: 1, 2, and 3.
<input type="checkbox"/> Death of a Parent in 2023 or 2024	<input type="checkbox"/> A detailed letter explaining your particular situation. <input type="checkbox"/> A copy of the death certificate or obituary. <input type="checkbox"/> A signed copy of parent's 2022 IRS Tax Return Form 1040 including any applicable Schedules 1, 2 and 3 or parent's 2022 Form 1099 if DDX (Direct Data Exchange) was not utilized. <input type="checkbox"/> Surviving parent's 2022 W-2 Form(s).
<input type="checkbox"/> Separation or Divorce of Parents in 2023 or 2024 Please note that separation must have occurred at least ten (10) weeks prior to the submission of this request and your parents must be residing in separate households.	Date of Separation/Divorce: _____ Which parent will the student live with or which parent will provide the most financial support? Name and Date of Birth: _____ <input type="checkbox"/> A detailed letter explaining your particular situation. <input type="checkbox"/> A copy of supporting parent's most recent pay statement. <input type="checkbox"/> A copy of supporting parent's 2022 W-2 Form(s). <input type="checkbox"/> A copy of legal separation/divorce papers/ or proof of separate residence (driver's license, lease agreement, etc.). <input type="checkbox"/> Documentation of spousal support and/or child support, if any.
<input type="checkbox"/> Student Loss of Income Reduction or loss of income from work must be for at least ten (10) weeks in 2023 or 2024.	<input type="checkbox"/> A detailed letter explaining your particular situation. <input type="checkbox"/> A signed copy of your 2022 IRS Tax Return Form 1040 including any applicable Schedules: 1, 2, and 3 if DDX (Direct Date Exchange) was not utilized. <input type="checkbox"/> Copy of all student W-2 Form(s) from 2022. Date of your layoff/termination: _____ <input type="checkbox"/> A letter from your employer verifying loss of employment including effective date. Have you started another job? <input type="checkbox"/> No <input type="checkbox"/> Yes *If yes, give start date: _____ and include <u>most recent pay statement</u> from new job.

Certification and Signatures

SIGNATURES REQUIRED: I certify that the information provided on this form is true and complete to the best of my knowledge. I understand that I may be asked to submit additional documentation if necessary. I realize that if I do not fully prove my special circumstance, this form may be denied and that all decisions are final. I understand that approval of submitted special circumstances may not always result in additional funding. I certify that the Office of Scholarships and Financial Aid will be notified if circumstances change.

 Student Signature (Handwritten Required **OR ELECTRONIC SIGNATURE USING GLOBAL ID**)

 Date

 Parent Signature (Handwritten **OR ELECTRONIC SIGNATURE USING YOUR CREATED PASSWORD**)
 (only one parent signature is required)

 Date