

# Professional Judgment (Request for Adjustment to Family Income)

**2017-2018 (July 1, 2017 – June 30, 2018 / Tax Year 2015)**

This application is in response to your request for a review of special circumstances that you feel may change your financial aid eligibility. The Financial Aid Office requires that certain documents be provided to support you and your spouse's or you and your parent(s) (if applicable) claims of special circumstances. The Financial Aid Office begins the review process with an evaluation of the accuracy of the information that you have submitted on your Free Application for Federal Student Aid (FAFSA). The Financial Aid Office will evaluate the documents you submit along with your FAFSA information to determine if you are eligible for any financial aid adjustments.

The United States Department of Education provides in the Higher Education Amendments of 1998 a reaffirmation of the use of professional judgment in determining eligibility for federal financial aid. This provision allows for consideration of prior year income, rather than prior-prior year income, to calculate a student's eligibility. **Your family situation should meet one of the criteria used by Central Piedmont Community College to determine special circumstances.** If your family meets a special circumstance requirement for the current award year, your eligibility may be recalculated using income information from the 2016 or 2017 tax year. Please put your student ID number on all forms and documentation submitted to the Financial Aid Office.

**The decision reached by the Financial Aid/VA Office is final and cannot be appealed to the U. S. Department of Education.**

Student Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
\_\_\_\_\_ Date: \_\_\_\_\_

## PART I: Instructions for Completion

- **Please submit a copy of your IRS tax return transcript from the 2015 and 2016 tax years and all current earnings and any benefit documentation along with the required verification forms. Please check with your Financial Aid Administrator for a list of forms. Federal guidelines require the aid administrator to verify and correct any information on your FAFSA before your professional judgment can be applied.**
- Complete only the sections that apply to your situation and provide ALL required documentation.
- Provide all requested signatures. Write student name and student ID number all attached documents.
- If additional information is required, you will be notified promptly.

**To ensure a more accurate income adjustment for those who have lost employment, please wait at least 90 days after the change has occurred to submit a request for review of special conditions under criteria A and B. If this occurs after the beginning of the fall semester, please wait to submit this judgment after you complete your taxes for the 2017 year.**

**Warning: According to the U.S. Department of Education, if you purposely give false or misleading information on form, you may be subject to a fine of up to \$20,000 or imprisonment for up to 5 years, or both.**

Financial Aid/Veteran's Affairs – Central Piedmont Community College – PO Box 35009 – Charlotte, NC 28235-5009  
Telephone: (704) 330-6942 Fax: (704) 330-5053

*You may submit, fax or mail your documents to any of our six locations.*

Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

**PART II: List Household Members and Relationship, Including Self**

Please list all household members as defined on the FAFSA. Independent students include spouse and dependent children. Dependent students include: self, parents, and dependent children included in the parents' household. **If a listed family member will be attending college at least half-time in at least one semester of the 2017-2018 school year, please also include the name of that college.**

Full Name	D.O.B.	Relationship	Name of College
		SELF	Central Piedmont Community College

**PART III: Explanation of Situation**

Please check one box that corresponds to your situation:

SITUATION	DOCUMENTATION REQUIRED
<input type="checkbox"/> Divorce or Separation	-Divorce decree/separation papers or proof of separate living accommodations -Tax Return Transcript and Wage & Income Transcript
<input type="checkbox"/> Retirement	-Letter of separation from employer -Last pay stub showing earnings -Statement of Retirements benefits
<input type="checkbox"/> Death of parent/spouse	-Photocopy of death certificate
<input type="checkbox"/> Loss of Employment for Student, Spouse or Parent (loss employment should occur 12 weeks prior to request)	-Letter of separation from employer -Last pay stubs from both previous and current jobs if applicable -Unemployment benefits or statement of ineligibility for unemployment benefits -Tax Return Transcript
<input type="checkbox"/> Loss of other income	-Statement of benefits (e.g. Social Security benefits) -Letter from parent paying child support or Friend of the Court including stop date and amounts -Other applicable documentation to verify loss of other income -Tax Return Transcript
<input type="checkbox"/> Elementary/secondary tuition	-Paid invoice or Letter certifying enrollment from school
<input type="checkbox"/> Medical expenses (only applies if you filed a 1040 Schedule A)	-Federal 1040 income tax return form <u>Schedule A</u>
<input type="checkbox"/> Disability or Natural Disaster	-Date disability or natural disaster occurred -Proof of disability (medical documentation, letter from vocational rehabilitation, etc.) -Current year-to-date pay stubs from all jobs held -Proof of disability income
<input type="checkbox"/> Other	-Provide all supporting documentation

**PART IV: Explanation of Circumstances and Additional Required Documents****A) Student, Spouse or Parental total loss of untaxed income or benefit for more than 90 consecutive days.**

This will show a complete loss of the benefit. The untaxed income or benefit would have been from a public or private agency, company, or person because of a court order. Do not include veterans' educational benefits.

**Check only one box that corresponds to your situation and provide the documentation listed whenever applicable.**

Loss of unemployment compensation for \_\_\_\_\_ weeks

***Required documentation of loss of unemployment compensation benefits:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Termination Letter;
- Unemployment insurance benefits;
- Letter from employer evidencing employment status change;
- Projected income earned for current year;
- Statement regarding any anticipated retirement benefits (including social security) for the current year

Loss of Social Security benefits for \_\_\_\_\_ weeks

***Required documentation of loss of social security benefits:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Date benefits stopped;
- Documentation from agency providing benefits that states when benefits stopped and amount received (if any) in the current year;
- Most recent pay stubs or statements of earnings to date for all employment of both parents

Loss of Disability benefits for \_\_\_\_\_ weeks

***Required documentation of loss of disability benefits:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Date disability occurred;
- Proof of disability (medical documentation, letter from vocational rehabilitation, etc);
- Current year-to-date pay stubs from all jobs held;
- Proof of disability income;
- Documentation on all other sources of parent income (taxable and non-taxable)

Loss of Welfare benefits for \_\_\_\_\_ weeks

***Required documentation of loss of welfare:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Benefit provider's notification to you of loss of benefit;
- Most recent pay stubs or statements of earnings to date for all employment of both parties;
- Documentation on all other sources of parent income (taxable and non-taxable)

Loss of Court Ordered Child Support for \_\_\_\_\_ weeks

***Required documentation of loss of court ordered child support:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Court documents verifying loss and date/conditions of loss;
- Most recent pay stubs or statements of earnings to date for all employment of both parties;
- Documentation on all other sources of parent income (taxable and non-taxable)

Other \_\_\_\_\_ for \_\_\_\_\_ weeks

Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

**B) Student, Spouse or Parental loss of employment for more than 90 consecutive days.** This is for a complete loss of employment.

**Check only one box that corresponds to your situation and provide the documentation listed whenever applicable.**

Termination or cessation of employment for \_\_\_\_\_ weeks

***Required documentation of termination or cessation of employment:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Employer's notice and/or written documentation of termination/cessation
- Most recent pay stubs or statement of earnings to date for all employment of both parties
- Notice of application for unemployment compensation and amount received
- Documentation on all other sources of parent income (taxable and non-taxable)
- Attending Doctor's statement of disability
- Notification of Worker's Compensation
- Documentation of employer disability payments

**Name of person who is unemployed** \_\_\_\_\_

If not the student, please list the relationship \_\_\_\_\_

Disability or natural disaster; unable to earn money for \_\_\_\_\_ weeks

***Required documentation of disability or natural disaster:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Attending Doctor's statement of disability
- Documentation of date disability or natural disaster resulted in termination of employment
- Documentation of employer disability payments
- Notification of Worker's Compensation
- Documentation of Official Declaration of Natural Disaster
- Most recent pay stubs or statement of earnings to date for all employment of both parties
- Documentation on all other sources of parent income (taxable and non-taxable)

**C) You have already filed your Free Application for Federal Student Aid (FAFSA or Renewal FAFSA) and, since that time, you and your spouse have separated or divorced.**

Please provide the date you separated or divorced (month/day/year): \_\_\_\_\_

***Required documentation:***

- 2015 and 2016 Tax Returns, including all schedules, and W2s or Wage & Income Statement(s);
- Court documented separation agreement **or** divorce decree/settlement
- Student's birth certificate

**D) You have already filed your Free Application for Federal Student Aid (FAFSA or Renewal FAFSA) and, since that time, one of your parents (or your spouse) has died.**

Please provide the date your parent (or spouse) died (month/day/year): \_\_\_\_\_

***Required documentation:***

- Death Certificate
- Student's Birth Certificate (if reporting death of a parent)
- Student's Marriage Certificate (if reporting the death of a spouse)
- All 2015 and 2016 W2 forms for both tax filers **or** Wage & Income Transcript for surviving tax filer



Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

**PART VII: Certification Statements and Signatures for Corrections**

I certify that all of the information provided and corrected on my Student Aid Report is true and complete to the best of my knowledge. If I am asked, I agree to give proof that any information is correct. This proof might include a copy of my U.S. Tax Return filed by my family or me. I understand that if I purposely give false or misleading information on my Student Aid Report, I may be subject to a \$20,000 fine, a prison sentence, or both. **I understand that failure to provide the required documentation may result in denial of this application.**

If your Professional Judgment is approved and you would like for us to indicate your estimated earnings for this year on your FAFSA, please read and sign the following:

**I authorize Central Piedmont Community College's Financial Aid/VA Office to make corrections to my original and/or subsequent applications based on the documents that I am now submitting.**

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Spouse's Signature (for married Independent Students)

\_\_\_\_\_

Date: \_\_\_\_\_

Parent 1 (Father's/Mother's/Step-parent's) Signature

\_\_\_\_\_

Date: \_\_\_\_\_

Parent 2 (Father's/Mother's/Step-parent's) Signature

*(If you are a dependent student, it is required that at least one parent also sign the form.)*

**FOR FINANCIAL AID/VA OFFICE USE ONLY**

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  APPROVED  DENIED

Reason/Explanation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

	Verified Income	Verified AGI	Verified Taxes Paid	Adjusted Income for PJ	Adjusted AGI for PJ	Adjusted Taxes Paid for PJ
Parental Information	\$ \$	\$	\$	\$ \$	\$	\$
Student Information	\$	\$	\$	\$	\$	\$
Spouse Information	\$	\$	\$	\$	\$	\$

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