

Students and Families:

Prior to submitting an appeal for special circumstances, please read the following important information:

- Before we can process a request for consideration of special circumstances, we must have a FAFSA on file for the academic year you are applying for.
- As we review the documents submitted we may find it necessary to request additional documents, these requests will be made via student SPC e-mail account.
- Please be aware that as we review the documents, we must make necessary corrections to the FAFSA. These corrections may result in a reduction or loss of current need based financial aid.
- Once we receive your application, please allow 2-3 weeks for processing

If previously selected for verification, that process must be complete before the Professional Judgement process can be completed. Be aware that applying for a Professional Judgment evaluation may result in any of the following:

- A delay in awarding financial aid
- A delay in any expected financial refund
- The loss of previously awarded financial aid

Please review the attached application which lists other items necessary for your specific situation. **Please do not return this form without including all completed and signed paperwork.**

Sincerely,
South Plains College Office of Financial Aid



Professional Judgement Application

STUDENT NAME: _____

Student ID: _____

The student named above has indicated that special or unusual circumstances affect the family's ability to contribute to the student's education. Completing this information and documentation does not guarantee an offer of additional assistance. It also does not guarantee a change in eligibility for financial assistance. Financial difficulty resulting from consumer debt cannot be considered.

Your Application will not be processed until a PERSONAL Statement written by the STUDENT, describing the reason the Professional Judgment evaluation is needed, has been received

SECTION A: PLEASE CHECK THE APPROPRIATE BOX BELOW WHICH BEST DESCRIBES YOUR SITUATION

Divorce/Separation of Student or Parent (Attach separation/divorce agreement and W-2 of parent with whom student resides if dependent student)

Who is Separated/Divorced? Student _____ Parent _____

Date of Separation/Divorce: _____

With whom does student now live, if dependent student? _____

How many family members in the household now? _____

Death of a Spouse or Parent (Attach death certificate and complete the loss of income "Section B" on the next page)

Name of Deceased: _____

Relationship to Student: _____

Date of Death: _____

Involuntary Loss of Income – Student and/or Parent (Attach termination letter from previous employer stating last date of employment and provide Unemployment Compensation Statement and year to date earnings and complete the loss of income "Section B" on the next page)

Loss of income: Whose? _____ When? _____

Change of Employment: Whose? _____ When? _____

Why? _____

Extraordinary Medical Bills (In excess of 7.5% of adjusted gross income. Official documentation including a copy of Federal tax return Schedule 1 and/or copies of bills must be included with other required documents.)

Annual Cost of Insurance Premiums: \$ _____

Annual **amount** paid for medical expenses **NOT** reimbursed by insurance: \$ _____

Dependency Status Appeal (The twelve (12) questions on Step three (3) of the Free Application for Federal Student Aid determine dependency status; however, there may be special circumstances which may qualify an otherwise dependent student as independent for the purpose of receiving financial aid)

Circumstances NOT qualifying a student for a dependency status change:

- ❖ Parents refuse to contribute to the student’s education
- ❖ Parents are unwilling to provide information on the FAFSA or for verification
- ❖ Parents not claiming the student as a dependent for income tax purposes
- ❖ Student demonstrates total self-sufficiency

Circumstance which may qualify a student for a dependency status change:

- ❖ Total abandonment by the parent(s) (not parent/student disagreements)
- ❖ Abusive parent household forcing student to be removed from residence

Student Who Believe they Qualify for a Dependency Change MUST Provide the following documents:

1. A signed, detailed letter from the student explaining the extenuating circumstances, including relationship with natural parents.
2. Two (2) separate letters from independent sources who can attest first hand to the student’s circumstance. Preferably, at least one of the letters will be from a person in a position of authority (i.e. high school counselor, clergy). The letters must be detailed and include each person’s individual relationship to the student and as much information about the student’s circumstances as possible. Identical letters will not be accepted.
3. In the case of abusive household, court papers or an official written statement from Department of Social Services will be accepted in lieu of letters from independent sources.

SECTION B: Demonstrate how your family income has changed to the best of your ability. Complete ALL lines that pertain to your situation in both categories (previous year and current year expected).

If special circumstances apply due to divorce/separation of parents or death of a parent, report only your custodial or living parent’s portion of the income information.

INCOME SOURCE	Previous Year Annual Income	Current Year Expected/Estimated Income
Student wages (full year)		
Student’s Spouse wages (full year)		
Mother/Stepmother’s wages (full year) { If Dependent Student }		
Father/Stepfather’s wages (full year) { If Dependent Student }		
Child Support received (full year)		
Unemployment compensation		
Severance Pay		
Ira Distribution		
Other		
Total		

Do Not Include:

- * Money from student financial aid
- * Payments received from states for foster care and adoption assistance
- * Any income reported elsewhere on this form
- * Non-monetary gifts received from friends or relatives

All of the information on this form is true and complete to the best of my knowledge.

Student Signature

Date

Parent Signature (for Dependent Students)

Date