

**REQUEST FOR PROFESSIONAL JUDGMENT**

STUDENT'S NAME: \_\_\_\_\_ STUDENT'S S.S.#: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ ACADEMIC YEAR: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

The Higher education Act of 1965, as amended, provide authority to Financial Aid Administrator (FAA) to determine, on a case by case basis, adjustments on students dependency status and to address the economic needs of a student's household.

These special circumstances must be reasonable and documented. Students requesting consideration for any of these categories of adjustment should complete and sign this form and submit it along with the required documentation to the Financial Aid Office.

For more details regarding the special circumstances acceptable for professional judgment and documentation required, read the information attached to this form.

You must provide a written statement explaining in detail why you are requesting a re-evaluation of your financial aid. Complete, sign, and submit this form with the required documentation to the Financial Aid Office.

**Requests submitted without the written statement and the required documentation will not be considered.** You will be notified in writing of the decision made on your case.

Please indicate the nature of your request for professional judgment (check all that applies).

- Dependency requirements override.
- Income Reduction.
- Extended Family Support.
- Unusual Medical, Dental or Nursing home expenses.
- Elementary and Secondary Education and Dependent Care Expenses
- Unusual Debts
- Other \_\_\_\_\_

**AFFIRMATION**

I (the student) certify that all information in this appeal, including the personal statement and other documentation, is complete and accurate to the best of my knowledge. I understand that if I am found to have knowingly or intentionally given false statements or fraudulent documentation, my appeal will be denied.

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

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(Dependent Student's)*

**RETURN THIS FORM, with proper documentation, TO THE OFFICE OF FINANCIAL AID**

# DEPENDENCY STATUS APPEAL

The U.S. Congress and the Department of Education determine the criteria by which a student is considered dependent or independent of their parents for financial aid purposes. The basic premise underlying is that parents have the primary responsibility to pay for their son's or daughter's educational expenses. However, if there is an unintentional, involuntary or uncontrollable break in the relationship between parent and student, the Financial Aid Administrator (FAA) may be able to consider the student independent for financial aid purposes.

The Higher Education Act of 1965, as amended (HEA), defines an independent student as someone who fits into one or more of the following specific categories:

1. 24 years of age or older by December 31 of the award year;
2. A married individual;
3. Working on a master's or doctorate degree or graduate certificate;
4. Currently serving on active duty in the U.S. Armed Forces;
5. A veteran of the U.S. Armed Forces;
6. Having legal dependents other than a spouse;
7. From age 13, an orphan, being in foster care, or a ward of the court;
8. An emancipated minor or in legal guardianship as determined by a court in applicant's state of legal residence;
9. An unaccompanied youth who was homeless or at risk of being homeless as certified by a school district homeless liaison, a director of a federally funded emergency shelter program or a director of a runaway or homeless youth shelter.

**There are four conditions that the Department of Education has identified and that, individually or in combination with one another, DO NOT qualify as "unusual circumstances" or that DO NOT merit a dependency override. Those circumstances are:**

1. **Parents refusing to contribute to the student's education;**
2. **Parents unwilling to provide information on the application or for verification;**
3. **Parents not claiming the students as a dependent for income tax purposes;**
4. **Student demonstrating total self-sufficiency.**

If you are a dependent student because you answered "No" to all the questions in Step Three of your FAFSA, but wish to apply for financial aid as an independent student, you may complete this form to appeal for status reclassification.

## **I – REASON FOR APPEAL**

If one of the following circumstances applies to you, check the category and provide the required documentation:



1. **A severe situation exists in your family that prevents you from obtaining your parents' financial information, such as physical or emotional abuse, severe estrangement, abandonment, parental drug or alcohol abuse, mental incapacity, or another such situation beyond your control.**

### **a. PERSONAL STATEMENT**

On separate paper, tell us in your own words why you should be considered an independent student. Please describe the events in your life that led up to your current separation from your family. If you are receiving support from friends or relatives, you must describe the nature of that support and how you came to receive it. If you are self-supporting, explain how you came to support yourself, and over what period of time you have done this.

### **b. DOCUMENTATION**

Provide statements from at least two adult professionals who are not family members that verify the family circumstances you describe in your personal statement. Adult professionals include clergy members, lawyers, guidance counselors, teachers or professors, doctors, family counselors or therapists, psychologists, psychiatrists or other qualified mental health professionals, and law enforcement officers. If you were raised by a family member or another person who is not your parent, one of the required statements may be from that person. The statements you submit must be originals, not photocopies. If you are self-supporting, be prepared to submit photocopies of your **two** most recent tax return or other financial documents.



2. You are a non-US. citizen (who is otherwise eligible to receive federal financial aid according to your non-citizen status) and your parents currently reside in a foreign country. However, you are unable to obtain parental information because of long-standing political policy or civil unrest in the country where your parents live that prevents mail or funds from passing in or out of the country.

**a. PERSONAL STATEMENT**

On separate paper, tell us in your own words why you should be considered an independent student. Please describe the situation in your country where your parents live that prevents mail of funds from entering or leaving the country. If you are receiving support from friends or relatives, you must describe the nature of that support and how you came to receive it. If you are self-supporting, explain how you came to support yourself, and over what period of time you have done this.

**b. DOCUMENTATION**

Provide a statement from an official from the embassy (or other diplomatic office) of the country where your parents live or from an appropriate refugee agency that describes the long-standing political policy or civil unrest that exists there. The statement must verify that it is impossible to get mail or funds in or out of the country. The statement must be an original, not a photocopy.

**II - MONTHLY INCOME & EXPENSE WORKSHEET**

*You must complete this worksheet regardless of your reason for appealing your dependency status and be prepared to document the amounts listed. Documentation of current income might include recent pay stubs, benefit letters, bank statements, etc. Expenses documentation could include a lease, utility bills, paid receipts, etc.*

**CURRENT INCOME** – List your average monthly income and from what sources you receive it.

TYPE OF INCOME	SOURCE	AMOUNT PER MONTH
Wages		
Savings/Investments		
Untaxed Benefits (Please specify)		
Cash Support from other people		
Other		

**CURRENT EXPENSES** – List your average monthly expenses and how they are covered. The types of expenses are listed in the first column. In the second column, fill in the amount that is paid each month for each category. In the third column, give the name and relationship of the person who pays the expenses or provides the item for you. If you pay the cost, enter “self” in the third column.

TYPE OF EXPENSE	WHAT IT COSTS PER MONTH	WHO PAYS OR PROVIDES IT
Housing		
Utilities		
Food		
Clothing		
Transportation		
Medical		
Personal		

# Other Special circumstances

The Financial Aid Administrator may use professional judgment on a case by case basis and with adequate documentation to alter the values of the data elements used to calculate the expected parent or student contribution (or both) or to adjust the student's cost of attendance. The decision to adjust either a data element or the cost of attendance depends on whether the special circumstance relates to the family's ability to pay or reflects higher than usual educational costs for the particular student.

Examples of special circumstances where a financial aid administrator may wish to exercise his or her professional judgment include but are not limited to:

- Tuition expenses at an elementary or secondary school.
- Medical, dental or nursing home expenses not covered by insurance.
- Unusually high child-care or dependent-care costs .
- Recent unemployment of a family member or an independent student.
- A student or family member who is a dislocated worker as defined in section 101 of the Workforce Investment Act of 1998. Enrollment of a dependent student's parent in college.
- A change in housing status that results in an individual being homeless as defined in section 103 of the McKinney-Vento Homeless Assistance Act.

## Income Reduction

Submit all documentation required for your special circumstances as listed.

### 1. Involuntary loss of employment (e.g. termination, lay off) of

Student       Spouse       Mother       Father

Please provide the following documentation:

- Statement from student explaining circumstances in detail
- Letter of termination or resignation
- Student's \_\_\_\_\_(yr.) tax return
- Unemployment compensation letter
- Final pay stub from previous employment.
- Workman's compensation statement
- Most recent pay stub from current employer(s)
- Disability notice

### 2. Divorce/Separation

Divorce       Separation of       Student       Parent

Provide copy of divorce decree. Include both student and spouse or both parents 2007 tax return with W-2 form(s).

### 3. Death of

Spouse       Mother       Father

*Provide a copy of death certificate. Include student/spouse or parent(s) 2008 tax return with W-2 form(s).*

### 4. Other

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## Extended Family Support

Do you contribute financial support to a relative not counted as member of your household?

Yes

No

If yes, please explain and provided necessary support documentation to prove your claim. Be specific. List the name of supported relative, age, when support began and ends, amount paid, reason for support and if you will continue to provide support.

## Unusual Medical, Dental or Nursing Home expenses paid by (not covered by insurance)

Student

Spouse

Mother

Father

1. How much did you pay for your medical /dental insurance in 2008? ( Do not include employers contribution)

\$ \_\_\_\_\_

2. What were your 2008 medical, dental, nursing home expenses not paid by insurance?

\$ \_\_\_\_\_

3. Please explain, if your unreimbursed expenses will be lower, the same, or higher in 2009 or 2010, and why?

4. Provide copy of Copy of the 2008 Income Tax Return and Schedule A; or receipts of medical/dental payments and payroll check stubs of health premiums paid in 2008; or cancelled checks of medical/dental payments and payroll check stubs of health insurance premiums paid in 2008.

## Elementary and Secondary Education and Dependent Care Expenses

1. Do you paid for elementary or secondary education expenses or dependent care expenses?

Yes

No

2. Name the family member and the type of support and total amount for the year.

3. Explain if these expenses will be lower, the same or higher in 2009 or 2010 and why.

4. From what sources will you finance this support?

5. Provide receipt of tuition payment to verify your Elementary and Secondary School cost for 2008.

## Unusual debts

1. Do you or your parents have unusual debts or loans for which you or they are **currently** making monthly payments? (Include mortgages or credit card debts to cover unemployment expenses or failed businesses; legal fees for divorce, adoption, etc.; education loans of parents or spouses; or personal debts for nondiscretionary expenses.)

Yes

No

2. If yes, list type and purpose of debt, total amount owed and amount of monthly payment.

3. Please explain if these expenses will be lower, the same, or higher in 2008 or 2009, and why.

4. From what sources will you finance this support? \_\_\_\_\_

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