

Concord University Office of Financial Aid

2017-2018 Professional Judgment Appeal

Student Name: _____ SS#: _____ - _____ - _____

Parent(s) Name: _____ Parent email: _____

Concord University recognizes that families experience special circumstances which merit recalculation of their financial aid eligibility based on this year's information, rather than **2015** income information. Please be advised that all professional judgment appeal decisions are **final**.

Instructions:

To request a review of your extenuating financial circumstances:

1. Complete and submit 2016-2017 *Dependent Student Verification Worksheet* if you are a dependent student.
2. Complete and submit the 2016-2017 *Independent Student Verification Worksheet* if you are an independent student.
3. Use the IRS Data Retrieval on your FAFSA or order (free) a tax return transcript -- **Dependent Student**.
4. Link your taxes, if married your spouse's taxes, on your FAFSA or order (free) a tax return transcript – **Independent Student**.
5. Submit the required documents in support of your appeal as listed below.

Circumstances:

Please check [] the box beside the circumstances that apply to your situation and submit the necessary paperwork.

- [] **Separation from Employment due to Layoff, Termination, or Disability for at least 10 weeks in 2017.**
- * Letter from employer on company's letterhead including last date of employment
 - * Unemployment benefits determination document
 - * Documentation of year-to-date income (last pay stub, severance pay, SSI benefits, etc.)
- [] **Excessive non-reimbursed medical and/or dental expenses**
- * Documentation of non-reimbursed medical and/or dental expenses
 - * Canceled checks verifying payments made in **2016**.
 - * Copy of Schedule A from previous year's Federal Income Tax Return
- [] **Loss or Reduction of Untaxed Income Source (disability benefits, welfare benefits, child support, etc.)**
- * Copy of notification of benefits reduction/termination, including the effective date
 - * Documentation of 2017 expected benefits
 - * Documentation of 2017 year-to-date income (taxable and non-taxable)
- [] **Separation or Divorce which occurred after applying for financial aid**
- * Copy of court order, final divorce decree or legal separation agreement
- [] **Death of a parent (or spouse) which occurred after applying for financial aid**
- * Copy of death certificate
- [] **Other Unusual Circumstances**
- * A signed, dated letter explaining the situation
 - * Any additional documentation you want the Financial Aid Administrator to take into consideration

continued on reverse

Statement of Projected 2017 Income (annual amounts only):

This section asks about income and benefits that you and your family expect to receive between January 1, 2017 and December 31, 2017. **Please note if a question does not apply to you or if you do not expect any income from that source, write in "0"**. Provide your best estimate for the remainder of the year.

Taxable Income	Income Earned from Jan 1, 2017 until now	Total Projected Income for the entire 2017 year
Father's earnings	\$	\$
Mother's earnings	\$	\$
Student's earnings	\$	\$
Spouse's earnings	\$	\$
Untaxed Income		
Social Security Benefits	\$	\$
Child Support Received	\$	\$
Public Assistance	\$	\$
Other Untaxed Income (workman's compensation, Veterans Administration non-educational benefits, cash support, etc.)	\$	\$

Unemployment Compensation Earned \$ _____

Certification:

I/we certify that the information provided on this form is complete and accurate to the best of my/our knowledge. I/we agree to provide more detailed documentation if required. If additional changes occur during the 2016-2017 academic year that would alter the information provided on this form, I/we will immediately contact the Office of Financial Aid at Concord University.

I / We understand that failure to provide the required documentation will result in denial of this appeal.

Student's signature

Date

Spouse's Signature (if married)

Date

Parent's Signature

Date