

# Concord University Office of Financial Aid

## 2023-2024 Professional Judgment Appeal

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

Student ID# \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_

**Concord University** recognizes that families experience special circumstances which merit recalculation of their financial aid eligibility based on this year's information, rather than **2021** income information. Please be advised that all professional judgment appeal decisions are **final**.

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**

- Letter from employer on company 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 **2022**.
- 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 2023 expected benefits
- Documentation of 2023 year-to-date income (taxable and non-taxable)

[  ] **Separation or Divorce which occurred after completing FAFSA**

- Copy of court order, final divorce decree or legal separation agreement
- W-2s for year **2021**.
- Documentation of **2021** year-to-date income

[  ] **Death of a parent (or spouse) which occurred after completing FAFSA**

- Copy of death certificate
- Documentation of **2023** year-to-date income (taxable and non-taxable)

[  ] **Cost of attendance adjustment.**

- Supporting documentation of additional educational expense incurred

[  ] **Other unusual circumstances**

- Supporting documentation as requested by the Office of Financial Aid

**\*REQUIRED**

**HOUSEHOLD SIZE** (Number of people supported by household income) \_\_\_\_\_

**NUMBER IN COLLEGE** \_\_\_\_\_

