

Office of Scholarships & Financial Aid

1200 Murchison Road, Fayetteville, NC 28301 | (910) 672-1325 | www.uncfsu.edu/finaid

2023 - 2024 Special Circumstances/Professional Judgment - Independent

| Name: | Banner ID: | |
|--------|---------------------|--------|
| Email: | @broncos.uncfsu.edu | Phone: |

This application is a request for a review of special circumstances that you feel may change your financial aid eligibility. Professional Judgment refers to the school's authority to adjust data elements reported on the Free Application for Federal Student Aid (FAFSA®) so that the Department of Education can recalculate the Expected Family Contribution (EFC). The EFC is the number that the school uses to determine a student's eligibility for need-based financial aid. The school does not have the authority to make direct adjustments to the EFC and can only change data elements that may change the EFC.

The Office of Financial Aid requires you to provide certain documents to support your claim of special circumstances. The review process begins with an evaluation of the accuracy of the information you submitted on your FAFSA. The Office of Financial Aid will evaluate the documents you submit along with your FAFSA information to determine if you are eligible for any financial aid adjustments. The U.S. 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 projected year income, rather than prior year income, to calculate a student's eligibility. If you or your spouse meet a special circumstance requirement in the 2023-2024 award year, your eligibility may be recalculated.

Please Note:

- Only submit this form if it is complete, including all required documentation and signatures.
- Incomplete Professional Judgment applications will not be considered.
- Complete <u>Step One</u>, <u>Step Two</u>, and <u>Step Three</u> of this form.
- Processing times for the Professional Judgment Application takes 2-4 weeks once all requires documents have been received. Submission of the Professional Judgment application in no way guarantees an adjustment to the student's financial aid and does not waive payment deadline dates. We recommend that the student complete all current award requirements and accept any financial aid that the student wishes to pay his/her bill.

STEP ONE: Explanation of Special Circumstances

Provide a typed, detailed letter of explanation regarding your current situation that you are asking us to consider. Please remember to include applicable dates and any documentation supporting your circumstance. If sufficient documentation is not provided, the Professional Judgment application will be denied as the application will be incomplete.

STEP TWO: Projected Year Income

| STEP TWO. Projected Tear income | | |
|--|---------|--------|
| Complete this section to the best of your ability to project your 2023 income. | Student | Spouse |
| Expected 2023 income earned from work | \$ | \$ |
| Expected 2023 US income tax to be paid | \$ | \$ |
| Expected 2023 unemployment benefits | \$ | \$ |
| Expected 2023 other taxable income and benefits Type: | \$ | \$ |
| Expected 2023 untaxed income and benefits Type: | \$ | \$ |

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STEP THREE: Explanation of Circumstances and Additional Required Documents

| CITUATION (shook the boy for your city stion) DECUMENTATION (shook if included) | | | |
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| 311 | TUATION (check the box for your situation) | | QUIRED DOCUMENTATION (check if included) |
| | You were employed full-time (at least 35 hours per week) for at least 30 weeks in 2022 or 2023 but are not working full-time now. | | Copies of 2021 and 2022 IRS Tax Return Transcripts Copies of all 2021 and 2022 W-2 and 1099 Forms 2023-2024 Independent Verification Worksheet |
| | Your spouse was employed full-time (at least 35 hours per week) for at least 30 weeks in 2022 or 2023 but lost employment for at least 10 consecutive weeks and is not working full-time now. | | Employer's written notice of termination of employment Copies of most recent pay stubs for all 2023 employment Copy of <i>Benefit Payment History</i> for all unemployment compensation Document all other sources of income (taxed & untaxed) |
| | You or your spouse lost employment due to a disability or federally designated natural disaster for more than 10 consecutive weeks in 2022 or 2023. This situation must be a total loss of employment. Pase Note: Loss of Employment must result from columnary actions beyond the control of the employee. | | Addition (as applicable) Attending physician's statement of disability Document date disability/disaster caused unemployment Documentation of employer disability payments Documentation of Worker's Compensation received Documentation of Official Declaration of Natural Disaster status |
| # o | f weeks unemployed in 2022 or 2023: | | |
| | You or your spouse had a total loss of untaxed income. Benefit Lost: Unemployment Social Security Child Support | | Copies of 2021 and 2022 IRS Tax Return Transcripts Copies of all 2021 and 2022 W-2 2023-2024 Independent Verification Worksheet Benefit provider's notification of loss of benefit Copies of most recent pay stubs for all 2023 earnings Document all other sources of income (taxed & untaxed) |
| Las | st Date Benefit Received: | <u>In <i>A</i></u> | Addition (as applicable) Copy of Benefit Payment History for all unemployment compensation |
| | You have already filed your FAFSA and since that time: You have separated/divorced. Date: | | Court documents verifying date of loss of child support Copies of 2021 and 2022 IRS Tax Return Transcripts Copies of all 2021 and 2022 W-2 2023-2024 Independent Verification Worksheet Copy of student's birth certificate |
| | ☐ Your spouse has passed away. Date: | <u>ln #</u> | Addition (as applicable) Copy of court documented separation/divorce Copy of spouse's death certificate or obituary |
| inde vill p | erstand that completing this form does not guarantee forovide documentation to support the information prov | inand ided | is form is true and correct to the best of our knowledge. We cial aid will be increased. We agree that, if requested, we on this form. We understand that failure to provide the e understand that this form does not guarantee a change in |

the amounts or types of financial aid awarded and that professional judgment decision may result in decreased eligibility for certain financial aid programs. The Office of Financial Aid will review all requests on a case-by-case basis and adjust if deemed appropriate. Finally, we understand that the financial aid administrator's decision is final and cannot be appealed.

| Student's Signature | Date | Spouse's Signature | Date |
|---------------------|------|--------------------|------|

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If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both and lose your financial aid funding.

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