



Office of Financial Aid

1401 College Ave.
Levelland , TX 79336

PHONE (806)894-9611

EXT. 3800

FAX (806)894-8653

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 current year FAFSA on file.
- 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 aid 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

South Plains College

1401 College Ave, Levelland TX 79336

Phone: (806)894-9611 Ext. 3800

FAX: (806) 864-8653

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.

*** REQUIRED FOR ALL APPEALS ***

Your Application will not be processed without 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/Marriage of Student or Parent** (Attach separation/divorce agreement and W-2's of both parents on joint tax return)

- Who is separated/divorced/married? _____
- Date of separation/divorce/marriage: _____
- With whom do you now live? _____
- How many family members are 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 you: _____
- Date of death: _____

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

- Annual cost of insurance premiums: _____
- Annual amount paid for doctors visits, dentists visits, prescriptions, etc. not reimbursed by insurance: _____
- Estimated expense of other costs related to medical conditions: _____

☐ **Involuntary Loss of Income – Student and/or Parent** (Attach termination letter from previous employer stating last date of employment and provide Unemployment Compensation Statement, most recent tax documents 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? _____

☐ **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 parent (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 student explaining their extenuating circumstances, including relationship with both natural parents, and how they plan to support themselves and their educational expenses.
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) | | |
| Father/Stepfather's wages (full year) | | |
| Child Support received (full year) | | |
| Unemployment compensation | | |
| Severance Pay | | |
| Disability Benefits | | |
| Clergy or Military housing benefit | | |
| Pension | | |
| 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