

2021-22 Professional Judgment Application (Dependent)



Student Name _____ Student ID _____
Last First MI

Address _____
Street City State Zip

Cell Number () _____ Email _____

Number of members in the household _____ Number of household members in college _____

If your family's income will be significantly less than the income reported on your FAFSA, your parents can complete this form and return it to the student finance office for further consideration of your financial aid. Your parents must submit third-party documentation to substantiate their reduction in income.

Please review the sections below and complete the explanation(s) that best applies to your reduction(s) in income. Potential supporting documentation that may be needed is listed under each item. Please review the relevant section for your situation and work with the Student Finance Office to determine what is needed for your appeal.

- Parent(s) employment changed due to job loss, job reduction, or retirement**
 - Date of change (mm/dd/yy): _____ Mother/Step Mother Father/Step Father
 - Reason for change: _____
 - copy of relevant year parental tax documentation
 - employer's notice and/or written documentation of termination/cessation
 - copy of most recent pay stubs or statement of earnings-to-date for latest employment
 - notice of application for unemployment compensation and amount received
- Tuition Payments paid for elementary/secondary school costs for younger siblings**
 - letter from school(s) showing tuition payments for the 2020 calendar year (January-December)
- Parents have separated/divorced since student filed FAFSA**
 - Date of change (mm/dd/yy): _____ Parent with whom the student now resides? _____
 - copy of relevant year parental tax documentation
 - court documented separation agreement or divorce decree/settlement
- Death of parent since student filed FAFSA**
 - Date of change (mm/dd/yy): _____ Mother/Step Mother Father/Step Father
 - copy of relevant year parental tax documentation
 - copy of parent's death certificate or obituary
- Permanent and total disability of parent since student filed FAFSA**
 - Date of change (mm/dd/yy): _____ Mother/Step Mother Father/Step Father
 - copy of relevant year parental tax documentation
 - attending doctor's statement of disability

- documentation of date disability resulted in termination of employment
- documentation of employer disability payments
- notification of workers' compensation
- copy of most recent pay stubs or statement of earnings-to-date for latest employment

Reduction in Social Security benefits, alimony, or unemployment

Date of change (mm/dd/yy): _____

- copy of relevant year parental tax documentation
- benefit provider's notification to you of loss of benefit
- copy of most recent pay stubs or statement of earnings-to-date for latest employment

Reduction or loss in court-ordered child support

Date of change (mm/dd/yy): _____

- court documents verifying loss and date/conditions of loss
- copy of most recent pay stubs or statement of earnings-to-date for latest employment
- proof of child support paid in 2020 and 2021
- documentation of all other sources of parent income (taxable and non-taxable)

Dependency status override

- letter of explanation from the student
- 3 reference letters explaining the situation

One time income adjustment (i.e. pensions, annuities, IRA movement, etc.)

- copy of relevant year parental tax documentation
- written statement explaining why money was taken and what it was used for

Other unusual expenses paid (i.e. medical or dental expenses not covered by insurance)

- copy of relevant year parental tax documentation
- copy of all receipts

Cost of Attendance Increase (i.e. housing expenses, computer purchase, etc.)

- copy of all receipts, statements and/or bills

Use the area below to provide a written explanation detailing all reasons your family's yearly income will be reduced. If you need more space attach a separate sheet.

CERTIFICATION STATEMENT

Each person signing this form certifies that all information reported is complete and accurate. **WARNING:** If you purposefully give false or misleading information in attempt to obtain federal financial aid you may be fined, sentenced to jail or both.

I understand that failure to provide the required documentation may result in denial of this application.

Student's Name (print)	Student's Signature	Date
Parent's Name (print)	Parent's Signature	Date

Complete and mail to Student Finance P.O. Box 370 Collegedale, TN 37315, fax to 423.236.1894 or email to studentfinance@southern.edu