

Professional Judgment Review Form

NAME: _____

ALLEN STUDENT ID: _____

E-MAIL ADDRESS: _____

PHONE#: _____

This form is to assist you in reporting significant changes in your financial circumstances. Review of your situation does not guarantee an adjustment to your aid eligibility. Please provide the following documentation to the Allen Community College Financial Aid Office.

- Written Explanation** of special circumstances affecting your financial situation
- Complete Documentation** supporting your review - acceptable documents listed below
- Federal Income Tax Returns** of student and parent (if applicable)
- Professional Judgment Review Form** (this form)

The student's name should be written on all attached documentation. Submit all information together. You will be notified via email of the results of your review.

PLEASE INDICATE BELOW THE BASIS OF YOUR REVIEW

- ___ **Loss of Income/Benefits** - this may not be calculated until the end of the calendar year
 - Copy of your/your parents most recent check stubs
 - For loss of untaxed income, such as social security benefits or child support, provide an official letter/court document indicating the date of benefit change
- ___ **Divorce/Separation of parents or student from spouse**
 - Copy of court order: final divorce decree, legal separation agreement, and
 - Copy of federal income tax return and W-2 forms
- ___ **Death of Parent or Spouse**
 - Copy of death certificate, and
 - Copy of federal income tax return and W-2 forms
- ___ **Excessive Medical Costs not covered by insurance**
 - Cancelled checks verifying payment made
 - Printout from pharmacy/doctor/dentist detailing expenses paid
- ___ **One-Time Income**
 - Statement detailing amount, type and date of receipt, and
 - Receipts or investment records indicating how funds were spent or invested
- ___ **Private Secondary/Elementary Tuition Expenses**
 - Canceled checks verifying payment made
 - Billing Statement from the school
- ___ **Parent in College** - Parent must be degree seeking and enrolled at least half-time
 - Documentation of parent's enrollment from attending college
- ___ **Other**

To the best of my knowledge all of the information attached is true and complete. I understand I may need to provide more detailed documentation if required.

Student Signature

Date

Spouse/Parent Signature

Date