

2018-2019 Professional Judgment Request

Office of Student Financial Aid
P.O. Box 9031
Virginia State University, VA 23806
Fax: (804) 524-6818 or Email: finaid@vsu.edu



Name of Student _____
(PLEASE PRINT)

Phone#: _____ Email: _____

Student ID V # _____ SSN (Last 4 Digits) _____

Deadline to submit: Fall 2018 semester (July 13th) or Spring 2019 semester (Nov. 15th).

Virginia State University recognizes that standard financial aid forms do not always capture the full financial profile of our students and their families. Through the use of Professional Judgment, the Financial Aid Office **may** be able to make adjustments to your FAFSA which **could** result in a recalculation of aid eligibility at Virginia State University. All Professional Judgment cases are subject to a review and are not guaranteed to result in any additional financial aid. **All decisions are final.**

All documentation required must be attached. Incomplete information and telephone requests will not be accepted. Please **NOTE** the student/and or parent(s) have the primary responsibility for any financial obligation that may exist prior to the completion of the review process.

Response and Turnaround Time:

Professional Judgment Appeals are frequently a committee process. **Please allow at least 3 weeks for a response.** During peak processing times (January through May), it may take 4-6 weeks for an appeal to be reviewed by the committee. **The student and parent will be informed of the decision by e-mail to the e-mail address indicated above.**

Virginia State University will accept the following cases. Please check the case that applies to your situation and include a detailed letter with your request.

Dependency Status Override

- Letter from student
- A detailed letter from a third party source familiar with your family circumstances. The source must be a teacher, minister, lawyer, physician, counselor, social worker or other professional who is willing to verify your circumstances.
- Student's 2016 tax return or other documentation of resources or in-kind support
- Parent tax return (2016 and 2017)
- A copy of **ALL** living expenses such as utility bills (light, telephone, gas), house/apartment lease, vehicle insurance, etc.
- Court documents

□Loss /Reduction in Employment (Unemployment must be for at least ten weeks before an Appeal will be considered.)

- A letter from the former employer on company letterhead detailing the employee's termination/separation date
- Notice of severance/pay-out
- Notice of unemployment benefits
- A copy of the employee's year-to-date pay stub
- A copy of the current year tax forms and W-2's

□Loss /Reduction of Income or Benefits

- A copy of a letter from the appropriate state or federal agency that specifies the termination date and the amount of benefits received, such as Social Security benefits, Unemployment Benefits, Child Support, etc.
- A benefits schedule/documentation

□Divorce or Separation

- A copy of the divorce decree or separation agreement (preferably from a lawyer).
- Documentation indicating that the divorce or separated parties have been living separately and have incurred their own living expenses (i.e., utility bills, lease, etc.).
- A copy of the current tax forms and W-2 Forms

□Death of Parent or Spouse

- A copy of the death certificate or obituary
- A copy of the current tax forms and W-2 Forms

STATEMENT OF UNDERSTANDING

- I/we certify that all of the information provided and the supporting documentation submitted is true and accurate.
- I/we understand that the request will not be considered until all adequate and complete documentation is submitted. In addition, the Office of Student Financial Aid may require additional documentation in order to verify and substantiate the situation.
- I/we understand that the Office of Student Financial Aid will review the request and let me/us know of the outcome in approximately 3 weeks.
- I/we understand that completion of this form does not guarantee additional aid, and Billing Office/Student Accounts payment deadlines and procedures need to be adhered to during the review process in order to avoid potential late fees.

Student Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

For office use only:

Approved Denied Reason: _____

Student: 2016 AGI _____ 2016 Taxes Paid _____ 2016 Untaxed Income _____

Parent: 2016 AGI _____ 2016 Taxes Paid _____ 2016 Untaxed Income _____

ISIR Trans# ____ Old EFC _____ New EFC _____

FAA Signature/Date: _____