



Office of Financial Aid Request for Professional Judgment

Your application for financial aid was processed using information you furnished on the Free Application for Federal Student Aid (FAFSA) and the CSS/Financial Aid PROFILE® (if you have filed this form). That information was calculated to determine how much you, your spouse, and/or your parents are expected to contribute towards your college costs. While federal law defines the Expected Family Contribution (EFC) calculation, the law does provide some flexibility.

SMU requires each student requesting special consideration for additional financial aid file a FAFSA and a CSS/Financial Aid PROFILE®. The fee for filing the CSS/Financial Aid PROFILE® is \$9.00 for registration and a \$16.00 application fee (\$25.00 total). The Non-Custodial Parent PROFILE (NCP) is required if the parent reported marital status is divorced/separated. Processing fee for the NCP is \$25.00. SMU's PROFILE code is 6660. Please go to <https://student.collegeboard.org/css-financial-aid-profile> to complete this form if you have not already done so.

Additionally, students and/or families are required to complete the Dependent V1 or Independent V1 Standard Verification Statement. These forms may be found in our Forms Library at <http://www.smu.edu/EnrollmentServices/FinancialAid/Forms>.

The SMU Financial Aid Appeals Committee may consider making an individual adjustment of your financial aid based on professional judgment. The components of your Cost of Attendance (COA) and the data elements used to calculate the Expected Family Contribution (EFC) are adjustments that may be considered. Such adjustments must be made on a case-by-case basis, and the reasons for the adjustment must be documented in the student's file.

If you decide to continue with your request for special circumstances, please return the completed Professional Judgment Worksheet and other required forms to the Division of Enrollment Services – Financial Aid at the address or facsimile number listed below.

Professional Judgment is reviewed on a case-by-case basis and is valid for ONE academic year only. Therefore, if your request for this year is approved, this adjustment should not be construed as a commitment for adjustments in future periods. Also, Professional Judgments will not be approved consecutively for the same circumstance.



SMUSM

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Student Name: _____ SMU ID: _____

Student Telephone: _____ Student email: _____

Parent Telephone: _____ Parent email: _____

_____ **Dependent Student** _____ **Independent Student**

This worksheet is being provided because the FAFSA and/or CSS/Financial Aid PROFILE® do not represent a current financial situation due to extreme changes in income. All requests are reviewed by committee to determine if additional financial information may be used to recalculate eligibility.

*All resources must be exhausted before filing. This includes all loan options available to the student and parent.

*Do not wait until the appeal is completed to accept your awards.

*Your current award amounts may be adjusted if your request is approved.

*Failure to accept your awards may incur late charges to your account. **It is your responsibility to ensure that all charges are paid in full or that payment arrangements have been made with the University Bursar's Office regardless of the status of your appeal.**

The following circumstances will **NOT** be included in your appeal:

- Consumer Debt
- Private School costs for Minor Children
- 401K or retirement withdraws (except in unusual circumstances)
- Voluntarily leaving employment

Professional Judgment requests submitted after July 1st for Fall semester and December 1st for Spring semester will not be reviewed before payment due date. Please make alternative payment plans, as you will be responsible for any late fees incurred.

The following items must be submitted in order for your request to be considered.

- FAFSA, completed and results received by SMU.
- Dependent V1 or Independent V1 Standard Verification Form: Verification requires that you utilize the FAFSA Data Retrieval Tool or provide a copy of your IRS Tax Return Transcript (www.irs.gov). Please be aware that the verification review process may change your EFC. An increase to your EFC may result in a decrease to need based aid already awarded.
- Estimated Monthly Expense Sheet for Student and/or Parent.
- CSS/Financial Aid PROFILE® (<https://student.collegeboard.org/css-financial-aid-profile>) completed and results received by SMU.
- This Professional Judgment worksheet and documentation to support special circumstances.
- Letter explaining your special circumstances as to why your financial aid award application should be recalculated.

Please document your request fully so we can correctly evaluate your appeal for additional aid. Additional documents may be required.



Please complete only the sections that apply to your current situation.

☐ **Loss or reduction in income of the student or parents.**

Decrease in income must be a minimum of at least 25% of your 2015 adjusted gross income. Your Financial Aid Advisor may consider making an adjustment to the reported income in cases of involuntary unemployment, workforce cutbacks, mandatory retirement, illness, separation/divorce, disability, or death. If you are filing due to loss of employment you must allow 3 months before submitting this appeal. It is expected that you provide any combination of the following documents to support your situation.

Effective date of loss or reduction of wages: (must allow 3 months before filing)

- Termination notice or letter of resignation
- Last full month paycheck stub(s)
- Severance Package
- Death Certificate
- Legal separation or divorce decree
- 2015 Tax Return (1040, 1040A, etc.)—must be filed and processed by the IRS.

☐ **Loss or change of benefits, alimony, and/or child support:**

Unemployment, retirement, disability claims, Worker's Compensation are types of benefits that could change income. Alimony or maintenance agreements, and child support are types of income that are discontinued when child reaches 18. You must provide official documentation that benefits have been discontinued. It is expected that you provide any combination of the following documents to support your situation.

Effective date of loss or change of benefits, alimony, and/or child support:

- Unemployment Benefits Statement
- Disability/Death Benefits notice of termination
- Alimony or Child Support notice of termination
- Worker's Compensation notice of termination
- Retirement or Veterans Administration benefits notice of termination
- 2015 Tax Return (1040, 1040A, etc.)

☐ **Unusually high medical expenses (*must exceed 11% of your adjusted gross income and be paid out of pocket in 2015*): Must provide IRS form 1040 schedule (A) as supporting documentation.**

A large percentage of income paid towards medical expenses may be used to offset income. Out-of-pocket expenses such as doctor, hospital stay, and prescriptions related to extreme illness, testing, and insurance premiums may be considered. Only expenses not covered by insurance or paid by another party may be considered. It is expected that you provide sufficient documentation to support your claim.

☐ **Other Circumstances:**

Special Circumstances that severely impact income and cause extreme hardship.

- Dependent or elder care expense
(Include documentation of expenses paid)
 - Name and age of dependent _____
 - Relationship to student _____



Anticipated Income for January 2016 – December 2016

Income Source	Total Amount
Student's wages, salaries, tips, etc.	
Spouse's wages, salaries, tips, etc.	
Mother/Stepmother's wages, salaries, tips, etc.	
Father/Stepfather's wages, salaries, tips, etc.	
Other taxable income	
Child support received for all children	
Untaxed income such as: Military, clergy, or other housing allowance	
Any other source of untaxed income	

Your and your parent or spouse's signatures below will attest to the accuracy of information provided.

Certification: The information on this form is true, and complete to the best of my knowledge. I agree to furnish additional information as required by my Financial Aid Advisor. I understand that purposely giving false or misleading information is subject to a fine of up to \$10,000, federal imprisonment of up to five years, or both.

- I have read and understand that it is my responsibility to ensure that all charges are paid in full or a monthly payment plan is set up by payment due date, regardless of my appeal status.
- I have read and understand that my Financial Aid Advisor may request additional forms necessary for my appeal.
- I have read and understand that purposely providing false or misleading information is submit to a fine of up to \$10,000, federal imprisonment or up to five years, or both.

Student signature

Date

Parent/Step Parent/Spouse signature

Date

FOR OFFICE USE: Date Reviewed _____ Approved: _____ Denied: _____

Comments: _____

