

Professional Judgment Appeal Form Instructions

We understand that the FAFSA does not take into account all situations and some students have special circumstances that impact their ability to pay for college. In order to review these situations, we require certain documentation. We encourage you to email or call our office to discuss your appeal. Prior to submitting an appeal, please read the following information.

- If you have been selected for Verification, it must be completed prior to filing an appeal.
- During the appeal review, if any of the provided documentation conflicts with any information previously reported on the FAFSA, then our office is required to resolve the conflicting information regardless of if the appeal is approved or denied. This requirement could cause an increase or a decrease to your existing financial aid award.
- We may request additional information after reviewing the required items listed on this form.
- Please allow a minimum of three weeks for processing.
- Please ensure that you provide all required documentation upon initial submission. Fill in every blank. Sign where required.
- Approval of an appeal does not guarantee additional aid.
- Appeals cannot be used simply to request more financial aid.
You will not be eligible for institutional aid if you have not accepted your loans.

GRADUATE STUDENTS – this type of appeal is not beneficial to you as your financial aid options through our office are limited to student loans. Please contact our office to discuss other options.

Reasons for Appeal:

Examples of appeal reasons include, but are not limited to the following:

- Unemployment of more than 4 weeks following job loss
- Death of a student's parent (or spouse if independent)
- The family has incurred extraordinary medical/dental expenses
- The student's parent is attending college at least half-time in a degree-seeking program
- The student or the student's parents have separated or divorced
- The student or parent(s) no longer receives recurring income such as child support or other sources of income
- The parent or student has received payment(s) of non-recurring income (e.g., 401(k) or IRA withdrawal) which were unavailable for educational expenses

Deadlines:

There is no deadline, but we are limited near the end of a semester by the time it takes to process an appeal.

Please review the attached Professional Judgment Appeal Form which lists the additional items for each type of appeal. **If you choose to pursue the appeal, please submit all required documents upon initial submission.**

Select **Professional Judgment Appeal Form** in our secure [document uploader](#) to submit your appeal. Please, do not upload this instruction page. Also, do not send your appeal via email. Virginia Tech does not open email attachments.

**2024-2025
Professional Judgment Appeal Form**

Student ID #: _____ Email _____ Grad Date _____
 _____ Month/Year

Student's Full Legal Name: _____
 (Please print clearly) Last First

Deadlines:

There is no deadline, but we are limited near the end of a semester by the time it takes to process an appeal.

Required:

- Professional Judgment Appeal Form (this form), completed and signed by both student and parent, if student is dependent.
- Written statement by **student or parent** describing the appeal circumstances. Use the box provided on this form or attach a signed separate document.
- Additional documentation listed below. You will find any forms or worksheets requested below [here](#).

CHECK	REASON FOR APPEAL	REQUIRED DOCUMENTATION
<input type="checkbox"/> 1.	Significant reduction in student or parent(s) income. *Please note that the <u>earliest</u> we will consider an appeal due to unemployment will be 4 weeks from the date of separation.	<p>Significant loss of income due to job loss or change in employment</p> <ul style="list-style-type: none"> <input type="checkbox"/> Copy of separation notice, showing last day worked. <input type="checkbox"/> Final pay stub and documentation of severance pay (if applicable). <input type="checkbox"/> Documentation of unemployment benefits (UB) dated within 90 days of submitting this appeal. If you chose not to apply for UB, let us know in your written statement. <input type="checkbox"/> Copy of signed 2023 tax return. <p>Significant reduction in income due to special circumstances</p> <ul style="list-style-type: none"> <input type="checkbox"/> Copy of last pay stub prior to income reduction. <input type="checkbox"/> Copy of most recent pay stub showing reduced earnings. <input type="checkbox"/> Copy of signed 2023 tax return.
<input type="checkbox"/> 2.	The student's or the student's parents' separation or divorce.	<p>Dependent Student</p> <ul style="list-style-type: none"> <input type="checkbox"/> Letters from both parents stating the date of separation and identifying the parent who provides the most financial support, regardless of whom the student resides with for the majority of the year. <input type="checkbox"/> Copies of a utility bill, etc. from each parent documenting separate physical addresses. <input type="checkbox"/> Complete Marital Status/Tax Filing Worksheet for Parent(s) <p>Independent Student</p> <ul style="list-style-type: none"> <input type="checkbox"/> Letters from both student and spouse. The letters should list any dependents and include the amount of support payments (if any) provided to the student or dependents. <input type="checkbox"/> Complete Marital Status/Tax Filing Worksheet for Students.

Student ID Number _____

Last Name _____

CHECK	REASON FOR APPEAL	REQUIRED DOCUMENTATION
<input type="checkbox"/> 3.	Death of student's parent or spouse since completion of the FAFSA.	<input type="checkbox"/> Copy of the parent's or spouse's death certificate <input type="checkbox"/> Complete Marital Status/Tax Filing Worksheet (for parents or student/spouse as applicable)
<input type="checkbox"/> 4.	Parent or student received payment(s) of non-recurring income that is not available for educational expenses.	<input type="checkbox"/> Documentation of fund amount and the source of the funding examples may include 401(k) or IRA early withdrawal, etc. <input type="checkbox"/> Documentation of how funds were spent or obligated,
<input type="checkbox"/> 5.	Extraordinary family medical/dental expenses not covered or reimbursed by insurance. Paid expenses can only be appealed for one calendar year, either 2022 or 2023.	<input type="checkbox"/> For 2022 expenses: submit a 2022 IRS 1040 Schedule A if you itemized medical expenses. If you did not itemize, submit proof of medical expenses paid in 2022. <input type="checkbox"/> For 2023 expenses: submit a signed 2023 IRS 1040 Schedule A. If that has not yet been filed or if you will not itemize, submit proof of medical expenses paid in 2023. Insurance Explanation of Benefits (EOB) is <u>not</u> acceptable documentation.
<input type="checkbox"/> 6.	The student's parent(s) attends college and is enrolled at least half-time in a degree seeking program.	<input type="checkbox"/> Documentation of parent's enrollment including credits for the 2024-2025 academic year. <input type="checkbox"/> Documentation of parent's enrollment in a degree-seeking program. <input type="checkbox"/> Documentation of any cost reimbursement (by employer for example) or signed statement that it will not be reimbursed.
<input type="checkbox"/> 7.	The student or parent(s) no longer receives recurring income such as child support, taxable Social Security, alimony, or other sources of income.	<input type="checkbox"/> Termination of recurring income: documentation of the monthly benefit amount received and date of benefit termination. <input type="checkbox"/> Reduction of recurring income: documentation of both original benefit amount, date of reduction, and reduced benefit amount.

Statement describing the reason for appeal request

- Allow at least **three weeks** after submitting all requested documents for your appeal results.
- Any additional aid received from this one-time appeal is only for this year. It will not be a recurring award.

If I purposely give false or misleading information, I may receive a fine, a prison sentence, or both. By signing this form, I certify that all information is complete and correct.

Student's Signature _____

Electronic signatures are not allowed

Date _____

Parent's Signature _____

Dependent students only

Date _____