



## **2023-2024 Request for Professional Judgement Form**

---

Student Name

Peirce ID

@student.peirce.edu

---

Phone #

Peirce College Email

### **Ability to Benefit from an Appeal**

**Please refer to the below guidelines to determine if you will benefit from an appeal**

---

**I filed my FAFSA and received an Expected Family Contribution (EFC\*) of zero (0).**

You are already receiving the maximum in federal financial aid. Submitting this form **will not** result in any changes. For more information about EFC visit: <https://studentaid.gov/help-center/answers/article/what-is-efc>.

**I filed my FAFSA and received an Expected Family Contribution (EFC\*) significantly higher than 7000.**

Submitting an appeal may result in either no change or a change to a partial subsidized student loan rather than all unsubsidized. Note: To be eligible for a Federal Pell Grant, your EFC must be 5846 or less. For more information about EFC visit: <https://studentaid.gov/help-center/answers/article/what-is-efc>.

Peirce College recognizes that special circumstances may affect a student's eligibility for federal financial aid. Special circumstances can include, but are not limited to, loss of income, loss of employment, loss of benefits, death or divorce.

This request form is designed to document such information for review by the Office of Student Financial Services. Complete **all** sections of this form and submit it with the appropriate documentation indicated in Step 1 and Step 2 of this form. Please note that additional documents may be requested.

**To be considered for a Professional Judgment:**

- **You must have a 2023-2024 FAFSA on file.**
- **If your FAFSA was selected for verification, the verification process must be completed before submitting this form.**

**\*Professional Judgement decisions are final and are based upon the regulatory parameters established by the U.S. Department of Education.**



**Step 1: Please identify the special circumstance(s) from the list below and check the applicable box(es) for the person(s) affected.**

Special Circumstance	Explanation	Person(s) Affected	Required Documentation
<b>Employment Change</b>	Student/spouse and/or your parent(s) had a significant loss of income in 2022, 2023, and/or 2024 due to a period of unemployment, a change of job or going from full-time to part-time employment. Loss of employment or substantial reduction in income from work that has lasted at least 6 weeks in 2022.	<ul style="list-style-type: none"> <li>● Student</li> <li>● Spouse</li> <li>● Parent</li> </ul>	<ul style="list-style-type: none"> <li>● 2023-2024 Standard Verification Worksheet</li> <li>● Detailed signed personal statement</li> <li>● *2021 and 2022 IRS Tax Return Transcripts, W-2s and/or 1099 statements</li> <li>● Signed statement from employer on official letterhead with termination date and last paystub</li> <li>● Print out of Unemployment Payment Record <a href="https://www.uc.pa.gov/">https://www.uc.pa.gov/</a></li> <li>● Public and/or other type(s) of Assistance Letter (if applicable)</li> <li>● Most recent paystubs</li> </ul>
<b>Income Loss</b>	Student/spouse and/or your parent(s) earned income in 2021, but have not been able to earn income in 2022, 2023, 2024 because of a disability or natural disaster that occurred in 2022 or 2023.	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>● 2023-2024 Standard Verification Worksheet</li> <li>● Detailed signed personal statement</li> <li>● *2021 and 2022 IRS Tax Return Transcripts, W-2s and/or 1099 statements</li> <li>● Statement from agency with effective dates of benefits</li> <li>● Most recent paystubs</li> </ul>
<b>Benefit Loss</b>	Student/spouse and/or your parent(s) received unemployment compensation and/ or untaxed benefit in 2021 or 2022, but have completely lost the benefit in 2022, 2023, and/or 2024. The untaxed income or benefit must be from a public or private agency, from a company or from an authorized individual due to a court order.	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>● 2023-2024 Standard Verification Worksheet</li> <li>● Detailed signed personal statement</li> <li>● *2021 and 2022 IRS Tax Return Transcripts, W-2s and/or 1099 statements</li> <li>● Statement from agency with effective date(s) of loss/cancellation of benefits</li> </ul>
<b>Separation</b>	Student or parent separated or divorced after filing a FAFSA.	<input type="checkbox"/> Student <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>● 2023-2024 Standard Verification Worksheet</li> <li>● Detailed signed personal statement</li> <li>● *2021 and 2022 IRS Tax Return Transcripts, W-2s and/or 1099 statements</li> <li>● Copy of divorce decree. If not legally separated, proof of different addresses for both parents (utility bill, lease indicating period of separation)</li> <li>● Lease with dates that include the period of separation for both parents</li> <li>● Child support received or paid</li> </ul>
<b>Death</b>	Death of spouse or parent after filing a FAFSA	<input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>● 2023-2024 Standard Verification Worksheet</li> <li>● Detailed signed personal statement</li> <li>● *2021 and 2022 IRS Tax Return Transcripts, W-2s and/or 1099 statements</li> <li>● Copy of death certificate</li> <li>● Social Security benefits (if applicable)</li> <li>● Most recent paystubs</li> </ul>



**Step 2:** Provide a **typed and signed** (Digital or handwritten signature), detailed statement, in your own words, describing the changes that occurred.

<b>The statement must include:</b>	<ul style="list-style-type: none"> <li>• Date when the circumstance(s) changed.</li> <li>• Explanation of living expenses during this time period for:             <ul style="list-style-type: none"> <li>• You/Spouse</li> <li>• Parent (If dependent student)</li> </ul> </li> </ul>
------------------------------------	--

**Step 3:** In the chart below, please indicate the monthly amount that is applicable to the time- frame indicated in Step 2. Please complete all fields. Enter "0" for any fields that do not apply

Income Source	Student/Spouse	Parent
Wages earned	\$	\$
Unemployment Compensation	\$	\$
Pension Withdrawal	\$	\$
Worker's Compensation	\$	\$
Child Support Received	\$	\$
Child Support Paid	\$	\$
Veteran's Benefits	\$	\$
Disability Benefits	\$	\$
Severance Pay	\$	\$
Cash Support	\$	\$
Other Income	\$	\$
<b>Total Income</b>	\$	\$

**Step 4: Certification**

I certify that the information provided on this form, and supporting documents, is true and complete to the best of my/our knowledge. I agree to provide additional documentation, if requested. **I understand that if at any time there is a change in the estimate of the income that was submitted on this form, I will notify the Office of Student Financial Services.** I understand that the Professional Judgment form submitted without required supporting documentation and letter of explanation will not be reviewed. **I also understand that submission of a Professional Judgment form does not guarantee that my financial aid will be adjusted, and that I am responsible for any outstanding balance owed to the college.**

**Certification Statement:**

Student Signature:	Date:
Spouse Signature (if applicable):	Date:
Parent Signature (Dependent Student Only):	Date:

**Submit your completed form using the Secure Document Upload Portal**  
<https://forms.peirce.edu/4725699>