



PROFESSIONAL JUDGMENT ADJUSTMENT REQUEST FORM
FOR INDEPENDENT STUDENT
CHANGE OF CIRCUMSTANCES
2023-2024

Name Last First Middle Student ID Number

Mailing Address

Home Telephone Work Telephone

Complete this form only if FGC has already received and finalized the results of the Free Application for Federal Student Aid (FAFSA) for the aid year and there has been a change in your family circumstances which has affected your ability to pay for school since your original FAFSA was completed. Documentation must be included or your request will not be processed.

You must meet one of the following conditions for student and/or spouse:

- I. Student/Spouse Income Information: Check one or more of the following applicable reasons if your parents' income will be significantly less in 2022 or 2023 as compared to 2021 actual income.
- Involuntary loss of employment (attach a copy of proof of unemployment benefits and documentation of year-to-date income if employed for any part of 2022 or 2023). Date employment ended
- Change of employment status from full to part time: I (and/or my spouse worked full time (at least 35 hours per week) for four (4) months or more in 2022 and/or 2023 but is/are no longer working full time (attach documentation to show change in employment and include copies of most recent paystubs).
- Disability of student or spouse (attach medical documentation as proof and documentation of the amount of disability income expected in 2023).
- One-time Income, such as inheritance, moving expense allowance, back year Social Security payments, IRA or pension distribution, etc. (attach documentation).
- Other (explain and attach documentation):

II. Estimated Student/Spouse Income: Complete the following using actual and estimated income information for January 1, 2022, through December 31, 2022.

<i>Student</i>	<i>Spouse</i>	
\$ _____	_____	Income from work (wages, salaries, tips, severance pay, etc.)
_____	_____	Other Taxable Income (unemployment compensation, pension, etc.)
_____	_____	Untaxed Social Security Benefits
_____	_____	Child Support Received
_____	_____	Other Untaxed Income
\$ _____	_____	Total

Supporting Documentation MUST be attached for the above:

- Student and/or spouse (if filed separately) 2021 and 2022 IRS Federal Tax Transcript or a copy of signed tax return (including W-2 forms)
- Any supporting forms such as year-to-date paystub, unemployment office notice, social security office correspondence
- If no longer employed, please provide reason why with employer documentation.
- A letter stating explaining the special circumstances for the loss in income.
- Copies of receipts, bills, and payroll statements.
- A letter from a third party attesting to the special circumstance.

Submit this completed form along with documentation to the Financial Aid Office. The Director of Financial Aid will review all professional judgment requests on a case-by-case basis. Please note that a determination can take as long as 2 months; therefore, be prepared to pay for classes up front. You will be notified of the results.

Certification Statement

I certify that the submitted information is true and correct to the best of my knowledge and belief. I agree to provide proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines, and/or imprisonment in this and/or future years.

Student/Spouse's Signatures: Everyone giving information on this form must sign below. If you do not sign the form, it will be returned to you unprocessed.

Student's Signature

Date

Spouse's Signature

Date