

FINANCIAL AID OFFICE 2021-2022 Request for Professional Judgment

You have indicated that there are circumstances that may affect the results of your 2021-2022 Free Application for Federal Student Aid (FAFSA). If the circumstance falls into one of the categories listed on this form, you may submit a Request for Professional Judgment. You must include all required documentation. Incomplete submissions will not be reviewed. If a correction is made to your FAFSA, it may result in a reduction in the base year income or the use of projected income for the current year. In many cases, an adjustment does not increase eligibility for grants. You will be notified after your request has been reviewed.

Nam	ne:	HCC ID # or SSN (last 4 digits):	HCC ID # or SSN (last 4 digits):		
Addı	ress:		_		
Phor	ne: (Hor	ome) (Work) (Cell)	_		
Ema	il:	Date of Birth:	Date of Birth:		
1. <i>A</i>	Attach a	n a written statement explaining circumstance.			
		n a complete 2021-2022 Verification-Number in Household & College Form. Form may be downloaded haywood.edu/financial-aid/forms.	at		
3. (heck t	the mitigating circumstance that best describes your situation. Complete required steps and attach to onal required documentation as indicated in italics.	he		
	UNEN	MPLOYMENT/LOSS OF INCOME (check one): father mother student spouse			
	0	. ,			
	0	, ,, , , , , , , , , , , , , , , , , , ,			
	0	3 3			
	0				
	0		From all		
	0	employers	rom un		
	0				
	0				
	0	Business Balance Sheet & Statement of Owner's Equity (if applicable)			
	DEATI	TH OF PARENT OR SPOUSE AFTER FAFSA WAS COMPLETED (check one): father mother spouse			
	0	Copy of death certificate			
	0	2019 Federal Tax Return and 2019 Federal Tax Return & W-2s for student, parents (if dependent), or spouse (if	married,		
	DIVOF	ORCE OR LEGAL SEPARATION AFTER FAFSA WAS COMPLETED (check one): student/spouse parents			
	0		if married, date		
	0	If the separation is not yet legal, rent receipts/mortgage statements, gas, electric, or water bills showing separa households	ite		
	0	2019 Federal Tax Return & W-2s for student, parent (if dependent), or spouse (if married)			
	UNUS	JSUAL MEDICAL/DENTAL EXPENSES			
	0	2019 Federal Tax Return with Schedule A			



FINANCIAL AID OFFICE 2021-2022 Request for Professional Judgment

- o Statements from medical providers showing amounts PAID by parents/student/spouse in 2019.
- Statements from medical providers showing outstanding BALANCES DUE by parents/student/spouse in 2019.

DEPENDENCY OVERRIDE- DEPENDENT STUDENT RI	EQUESTING DEPENDENCY STATUS CHENGED TO INDEPENDENT
	Armed Forces for other than training purpose? Or, have you been called to om the National Guard or Ready Reserves? Yes or No
No Process as a dependent student unless to 2. Have you been legally adopted?	he student meets the criteria, below:
Yes Provide court papers documenting legal	adoption by relative or someone other than a relative.
IRS Tax Information.	nust apply for financial aid as a dependent, using you & your parent(s) 2019
*If you are unable to contact your paren	t(s), you need <u>Required Documentation (see below</u>).
Required Documentation:	
 Letter from student explaining unusual circu Statement of third party documentation on or agency documenting unusual circumstan 	letterhead from a clergy, doctor, lawyer, counselor, teacher, social worker
	ider explaining your living arrangement and unusual circumstance.
	ld Members and Number in College form and Students 2019 Federal Income
Tax Return. Lease &/or rent receipts, utility bills, health own.	insurance policy to support documented unusual circumstance, if on your
 Supporting court documents. 	
4. CERTIFICATION & SIGNATURES: If student is classified as dependent, the student and parent	t whose information was reported on the FAFSA must sign and date.
By signing this form, I certify the following:	
 I understand that this request will not be reviewed if in I will be notified of the status of this request, allowing to 	
Requests to have financial aid based on 2019 income w	
	e my appeal has been reviewed, but that my award may be revised if the
support the information herein. By signing this form, I agree	nd correct. I understand I may be asked to provide additional documentation to e to allow Haywood Community College to submit corrections to my FAFSA ederal or state income tax that I filed or was required to file.
Print Student Name	HCC ID # or SSN (last 4 digits)
Student Signature	

WARNING! If you purposely give false or misleading information, you may be fined, imprisoned, or both.

Parent Signature (if dependent)

Date



FINANCIAL AID OFFICE 2021-2022 Request for Professional Judgment

Income Sources	Father/Step-father	Mother/Step-mother	Student	Spouse
Wages/Salaries/Tips				
Unemployment Benefits				
Other Income lines 8a-36 1040				
Other Taxable Income				
Social Security Benefits				
Child Support Received				
Untaxed Income (D,E,F,G,H,S)				
Total Estimated adjusted Income				
Total Income less deductions				
Estimated US Income Tax Paid				
Current Assets/Business				
Date Received:	Reviewed By:			
Date FAFSA Revised/Submitted: _				
Notes:				