



UNIVERSITY OF
ST. THOMAS

2019-2020 Professional Judgment Form

Last Name	First Name	Middle Initial	UST ID#
UST Email Address			Phone Number (include area code)

Instructions: Please select the appropriate option which reflects your special circumstance and attach the requested documentation. Failure to provide the required documentation will result in the denial of your appeal by the committee. All information will become a part of your confidential financial aid record and cannot be returned. Be sure to include your UST ID on all pages of documentation. You will receive notification from the Professional Judgment Committee via your UST email within two weeks regarding the outcome of your appeal.

A. LOSS OF INCOME

You, your parent(s) or your spouse have experienced a loss of income due to one of the following reasons:

Loss of Income Due to Retirement or Disability

You, your parent(s), or your spouse were employed in 2017, but are now not working due to retirement or a disability. **The required documentation is:** a detailed cover letter explaining the situation, completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Transcript, copy of all student, spouse and/or parent(s) 2017 W-2s, a copy of the retirement notice or the notice of declaration of disability with dates, and documentation identifying the loss of income.

Loss of Income Due to Termination or Job Loss

You, your parent(s) or spouse were employed in 2017, but are now unemployed. **The required documentation is:** a detailed cover letter explaining the situation, completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Transcript, copy of all student, spouse and/or parent(s) 2017 W-2 forms, letter from employer documenting date of layoff or termination, documentation of year-to-date earnings, documentation of unemployment benefits and WIA benefits, actual disability and Social Security Benefits received or to be received, and copy of current paycheck stubs.

Loss of Income Due to Reduction of Earned Income (Wages)

You, your parent(s), or your spouse were employed in 2017, but have experienced a substantial reduction of earnings in 2017. **The required documentation is:** a detailed cover letter explaining the situation, completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Transcript, copy of all student, spouse and/or parent(s) 2017 W-2 forms, verification from your employer of a reduction in earnings due to a change in employment or a natural disaster.

Loss of Income Due to Death of Parent or Spouse

Your parent or spouse passed away during 2016 or 2017. **The required documentation is:** a detailed cover letter explaining the situation, a copy of the death certificate, a completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Transcript, copy of all student, spouse and/or parent(s) 2017 W-2 forms, and documentation identifying the loss of income.

Loss of Income Due to Divorce or Separation

Your parents or you and your spouse were a married couple at the time of completing the FAFSA but have since separated and/or divorced. **The required documentation is:** A detailed cover letter explaining the situation, copy of the separation/divorce decree, a completed 2019-2020 Verification Form, signed copy of student and/or parent(s) 2017 Federal Income Tax Transcript, copy of all student and/or parent(s) 2017 W-2s, a copy of the order for child support paid or received (if applicable), and documentation identifying the loss of income (if applicable).

___ B. COST OF ATTENDANCE INCREASE

You, your parent(s) or your spouse have experienced unforeseen circumstances and/or expenses during the current academic year. **The documentation required is:** completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Return, along with:

- Dependent Care Allowance:** day care or care provider receipts and a letter from the child care facility on letterhead indicating the period of enrollment and the amount paid per child during that period.
- Computer Purchase:** a dated sales receipt outlining the specific item(s) purchases, or a dated estimated price quote from the computer vendor on the vendor’s letterhead [actual purchase receipt must be turned in within 30 days or Professional Judgment will be invalidated].
 - Maximum amount allowed \$2,150 or actual quote, whichever is less.
 - Only one computer purchase will be allowed per academic career.

___ C. UNUSUALLY HIGH UNINSURED OR UNREIMBURSED MEDICAL, OPTICAL, AND/OR DENTAL EXPENSES

You, your parent(s) or your spouse have incurred unusually high uninsured or unreimbursed medical, optical, and/or dental expenses (including insurance premiums in 2017 that are in excess of 11% of the total Adjusted Gross Income reported on the 2019-2020 FAFSA. **The required documentation is:** a detailed cover letter, a completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Transcript, a detailed list of expenses to be considered [in date order] and a copy of the receipts showing the amount(s) you, your parent(s), or your spouse paid in 2017 [in date order] (Please note that if you are filing due to medical expenses incurred with insurance, the receipt(s)/document(s) need to clearly illustrate the amount paid by insurance and the amount paid out of pocket.)

___ E. PRIVATE SCHOOL TUITION PAID FOR ANY STUDENT(S) IN THE HOUSEHOLD K-12

You or your siblings were enrolled in a private school in 2017 for which your parent(s) paid tuition. **The required documentation is:** a detailed cover letter, a completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Transcript, and a billing statement or tuition contract showing the amount(s) your parent(s) paid in 2017 for private school tuition.

___ F. OTHER UNUSUAL CIRCUMSTANCES OR ONE TIME LUMP SUM

You, your parent(s) or your spouse have experienced costly unusual expenses in 2017 that may affect your ability to cover your educational expenses. **The required documentation is:** A detailed cover letter along with the subject-appropriate documentation, completed 2019-2020 Verification Form, signed copy of student, spouse and/or parent(s) 2017 Federal Income Tax Transcript, copy of all student, spouse and/or parent(s) 2017 W-2 forms, and documentation identifying the unusual circumstance/lump sum. (If requesting a lump sum removal, you MUST attach documentation showing funds were used for living expenses, ONLY.)

CERTIFICATION AND SIGNATURES

I/we certify that the information and documentation provided is accurate and complete to the best of my/our knowledge. I/we understand that if the requested information or documentation is not provided, the special circumstances request will be denied without further review.

Student Signature

Date

Parent Signature (Only for Dependent Students)

Date

State law requires that you be informed of the following: (1) with few exceptions, you are entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.