



OFFICE OF STUDENT FINANCIAL AID

ROBESON COMMUNITY COLLEGE

Student Center Building 13

PO Box 1420

Lumberton, NC 28359

T 910.272.3352

Email: finaid@robeson.edu

F 910.272.3314

Website: <https://www.robeson.edu/fa/>

2020-2021 Professional Judgment Request Form

(July 1, 2020 – June 30, 2021-Tax Year: 2018)

Student's Name: _____ Student ID: _____

Address: _____ City/State/Zip _____

Phone #: _____ Email: _____

On a case-by-case basis, the U.S. Department of Education authorizes financial aid administrators to adjust certain data elements on a student's FAFSA to account for special circumstances that can better reflect their ability to pay for their education. The Financial Aid Office will reevaluate your financial aid eligibility based on your income for either the 2019 tax year (1/1/19 to 12/31/19) or projected income for the 2020 tax year (1/1/20 to 12/31/20). **If request is received after the Fall semester has ended, please complete and submit your taxes for the 2019 year.**

SECTION I: Please select the option that best describes your special circumstances.

- Loss of Job/Change of Job Status for Student/Spouse/ Parent** *(must be for 90 consecutive days or more)*
 - Typed statement explaining circumstances
 - Termination letter/Severance letter from employer with last date of employment. If military discharge, provide a copy of DD214.
 - Most recent pay stubs or statement of earnings to date
 - Unemployment benefits statement **or** statement of ineligibility for unemployment benefits.
 - 2018 and 2019 Tax Transcript including W2s or Wage & Income Transcript
 - Retirement benefits (if loss of income is due to retirement)

- Loss of Benefits/Other Untaxed Income** *(due to Child Support, Alimony, Worker's Compensation, Disability, Social Security Benefits, Unemployment Compensation, etc.)*
 - Typed statement explaining circumstances
 - Statement from agency with last date of benefits and year-to-date amount received
 - 2018 and 2019 Tax Transcript including W2s or Wage & Income Transcript

- Death of Spouse or Parent (for dependent students)**
 - Typed statement explaining circumstances
 - A copy of the death certificate
 - A copy of student's Birth Certificate (if reporting death of a parent)
 - A copy of student's Marriage Certificate (if reporting death of spouse)
 - 2018 and 2019 Tax Transcript including W2s or Wage & Income Transcript

- Divorce or Separation (Student or Parent)**
 - Typed statement explaining circumstances
 - Divorce decree or Separation agreement (must have separate living accommodations)
 - 2018 and 2019/or Tax Transcript including W2s or Wage & Income Transcript

- Other Special Circumstances (one-time income from IRA distribution, inheritance, capital gain, etc.)**
 - Typed statement explaining circumstances
 - Supporting documentation
 - 2018 and/or 2019 Tax Transcript including W2s or Wage & Income Transcript

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison or both.



2020-2021 Professional Judgment Request Form

(July 1, 2020 – June 30, 2021-Tax Year: 2018)

SECTION II: Projected Income for 2020 Calendar Year – Please provide estimates of income for the following individual (if applicable). If an item does not apply, write “N/A”.

Please do not leave any blanks or the form will not be processed.

<u>Income Source</u>	<u>Student</u>	<u>Spouse, if married</u>	<u>Parent(s), if dependent</u>
Wages & Salaries	\$	\$	\$
Unemployment	\$	\$	\$
Disability benefits	\$	\$	\$
Social Security benefits	\$	\$	\$
Child support received	\$	\$	\$
Alimony received	\$	\$	\$
Other Untaxed Income	\$	\$	\$
Other Income:	\$	\$	\$
Total Estimated Income	\$	\$	\$

SECTION III: Household Members - List the people in your household, including:

- **INDEPENDENT**: You (*and your spouse, if applicable*); **DEPENDENT**: You (*and your parents*)
- Your children (*independent*) OR your parent’s children (*dependent*), if you will provide more than half of their support from July 1, 2020 through June 30, 2021, even if they do not live with you; and
- Other people if they now live with you and you will continue to provide more than half of their support from July 1, 2020 through June 30, 2021.

<u>Full Name</u>	<u>Age</u>	<u>Relationship</u> (Self, Spouse, Parent, Sibling)	<u>College/University</u>
		Self	RCC

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison or both.



OFFICE OF STUDENT FINANCIAL AID

ROBESON COMMUNITY COLLEGE

Student Center Building 13

PO Box 1420

Lumberton, NC 28359

T 910.272.3352

Email: finaid@robeson.edu

F 910.272.3314

Website: <https://www.robeson.edu/fa/>

2020-2021 Professional Judgment Request Form

(July 1, 2020 – June 30, 2021-Tax Year: 2018)

SECTION IV: Student Certification

✓ Check the box and complete section below

I hereby certify that all information reported on this form and any attachments hereto are true, complete and accurate. False statements or misrepresentation will be cause for denial, reduction, withdrawal and/or repayment of financial aid.

Warning: According to the U.S. Department of Education, if you purposely give false or misleading information on form, you may be subject to a fine of up to \$20,000 or imprisonment for up to 5 years, or both.

Student Signature

Date

Spouse Signature (optional)

Date

Parent Signature (if dependent)

Date

FINANCIAL AID OFFICE USE SECTION:

Comments:

Financial Aid Representative

Date

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison or both.