

Arapahoe Community College
2009-2010 Professional Judgment Worksheet

PROF

Social Security Number						Student ID Number													
			-																

Name _____

Address _____

Street
City
Zip
Telephone Number

2009-2010 financial aid eligibility is based upon the information you provided on the 2009-2010 Free Application for Federal Student Aid (FAFSA). A request for professional judgment is appropriate when you, your spouse or your parents experience a change in income that was reported on your original financial aid application. This request must include a written statement, attached to this document that discusses the reason for the requested change. This request form, along with SUPPORTING DOCUMENTATION, must be submitted to the Office of Financial Aid before the middle of the term in which you are requesting consideration. A request without documentation will not be considered.

Students will be notified in writing when a decision is made. This notification may be in the form of an award letter and/or corrected Student Aid Report. Each request will be reviewed on a case by case basis. Approval or denial of the appeal will be determined by a Financial Aid Officer and is final. Approval of this application does not guarantee that you will receive any additional financial aid.

_____ I, my spouse or one of my parents (if dependent) has experienced a change in income from work. Effective Date: _____. Who has experienced the change of income from work? _____. (You must document actual income, as well as projected income for the 2009 calendar year. Please include a statement of the reason for change in employment and include details of any severance benefits that may be applicable.)

_____ I, my spouse or one of my parents (if dependent) has had a change in income, other than from work since 2008 (loss of unemployment, TANF, child support, social security, one time income, etc.). Please provide documentation of the change. (i.e.: letter from the Social Security Administration, court order for child support, etc. If request is based upon the loss of "one-time" income, please attach a copy of the 2008 federal tax return showing the income and provide a letter explaining how the income was spent or why it is no longer available for your use to meet educational expenses)

_____ I, my spouse or one of my parents (if dependent) has high medical or dental expenses in excess of 11% of my/their 2008 Adjusted Gross Income which may affect my financial picture. (Please provide copies of all medical bills paid in the 2008 calendar year.)

_____ I, my spouse or one of my parents (if dependent) has other circumstances which should be taken into consideration. Please provide a detailed letter of explanation and full documentation of the circumstance. Do not include credit card debt, house payments, car payments, etc.

Student Signature: _____ Date: _____

Spouse/Parent Signature: _____ Date: _____

For Financial Aid Office Use Only:

Professional Judgment Request approved/denied by: _____ Date: _____

Secondary Review conducted by: _____ Date: _____

Comments: _____

**Anticipated Total Income, Earnings, and Benefits for Calendar Year 2009
(January 1 – December 31, 2009)**

SOURCES OF INCOME Do not leave any sections blank. Write "0" if income type does not apply	Parent(s)		Student (and Spouse)	
	Actual 2009 year-to-date income (not monthly)	Expected total 2009 income	Actual 2009 year-to-date income (not monthly)	Expected total 2009 income
2009 income earned from work (includes earnings from wages, salaries, tips, business, and farm income). Include work-study earnings.	\$ _____ Father/Stepfather \$ _____ Mother/Stepmother	\$ _____ Father/Stepfather \$ _____ Mother/Stepmother	\$ _____ Student \$ _____ Spouse	\$ _____ Student \$ _____ Spouse
Interest and dividend income	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment compensation	\$ _____	\$ _____	\$ _____	\$ _____
Net amount received of withdrawal from pensions or annuities (IRA, Keogh, etc.) – do not include rollovers	\$ _____	\$ _____	\$ _____	\$ _____
Capital gain and/or other gains	\$ _____	\$ _____	\$ _____	\$ _____
Cash received, or money paid on your behalf, not reported elsewhere on this form. Do not include cash received from a parent whose information is provided on this form			\$ _____	\$ _____
Alimony/maintenance	\$ _____	\$ _____	\$ _____	\$ _____
Other income, including rental income (list type): _____	\$ _____	\$ _____	\$ _____	\$ _____
Taxable social security benefits, including Supplemental Security Income. Include amounts received for yourself and your children	\$ _____	\$ _____	\$ _____	\$ _____
Combat pay – only the portion that will be taxed. Use the most current Leave Earnings Statement. Take total combat pay and subtract untaxed portion)	\$ _____	\$ _____	\$ _____	\$ _____
Veterans' non-education benefits *(see below)				
Child support RECEIVED for all children	\$ _____	\$ _____	\$ _____	\$ _____
Other untaxed income and benefits* (see below)	\$ _____	\$ _____	\$ _____	\$ _____
Child support you have to PAY in 2009	\$(-) _____	\$(-) _____	\$(-) _____	\$(-) _____
Earnings from federal or state work-study programs	\$(-) _____	\$(-) _____	\$(-) _____	\$(-) _____
TOTAL EXPECTED 2009 INCOME	////////////////////	\$ _____	////////////////////	\$ _____

* Include 2009 payments to tax-deferred pension and savings plans (paid directly or withheld from earnings). Include untaxed portions of 401(k) and 403(b) plans; deductible IRA and/or Keogh payments; tax exempt interest income; foreign income; housing, food, and living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits); workers' compensation; veterans non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC); any other untaxed income and benefits such as VA Educational Work-Study allowances, untaxed portions of Railroad Retirement Benefits, Black Lung Benefits, etc.

Do not include student aid; payments & services received for foster care or adoption assistance; per capita payments to Native Americans; heating/fuel assistance; flexible spending arrangements; welfare benefits; untaxed Social Security benefits; earned income credit; additional child tax credit; non-taxable combat pay; foreign income exclusion and credit for federal tax on special fuels; Workforce Investment Act educational benefits or in-kind support. Examples of in-kind income would be food stamp program; WIC; food distribution program; National school Lunch & school breakfast programs; commodity supplemental food program (CSFP); special milk program for children; daycare provided by Social Services Block Grant Programs; WIA (formally JTPA) educational benefits; and rollover pensions.

