

P.O. Box 271 Montgomery, Alabama 36101 Office: 334.229.4862

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Professional Judgement Request Form

Academic Year:					
SECTION A: STUDENT INFORMATION					
Name:	ID Number:				
verification process. Students should continue to attend ASU, and should not wait on the outcompleting these items. Not registering and/or loss of housing preference, loss of schedule, et	due to unique and unusual circumstances. A h Alabama State University. If a FAFSA has for verification, the student must still complete the the enrollment process of registration if they plan come of a professional judgment before ir not completing payment options may result in a tc. Students should continually check HornetsWeb ests. Please have the student's name and ASU ID s. The table below lists the basic verification				
Dependent Students ☐ 2024-2025 Verification form, completed and signed by at least one parent ☐ Copy of yours and your parent's 2022 IRS Tax Return Transcript or IRS	Independent Students □ 2024–2025 Verification form, completed and signed □ Copy of yours and your spouse's (if applicable) 2022 IRS Tax Return Transcript or IRS Tax Return				

Return this completed form with any required documentation to finaid@alasu.edu

Name:	Student ID Number:

SECTION C. PROFESSIONAL JUDGMENT REQUEST (Check all that apply)

□ LOSS OF EMPLOYMENT We review loss of employment that took place for at least 12 consecutive weeks after Jan. 1, 2022 and before Dec. 31, 2023. Documentation Needed:
☐ Official documentation verifying the date of job loss (e.g. severance letter, unemployment
decision, etc.) ☐ Final paycheck stub(s) received
\square Unemployment history summary reporting benefits received to date and balance
remaining in 2021 or 2022 \square Copy of 2021 and 2022 IRS Tax Return Transcript or IRS Tax Return:
\square Dependent students should submit their parent's IRS Tax Return Transcript(s) or
IRS Tax Return(s) \square Independent students should submit their (and their spouses, if applicable) IRS Tax Return Transcript or IRS Tax Return
\square Copy of all W2s reported on the 2021 and 2022 IRS Tax Return Transcript(s) or IRS Tax Return(s)
$\hfill\square$ If employed after job loss, please include most recent paycheck stubs of any and all employment
□ LOSS/REDUCTION OF SELF-EMPLOYMENT INCOME We review loss or reduction of gross income (before expenses) that took place for at least 12 consecutive weeks after Jan. 1, 2021 and before Dec. 31, 2023.
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We review loss or reduction of gross income (before expenses) that took place for at least 12 consecutive weeks after Jan. 1, 2021 and before Dec. 31, 2023. **Documentation Needed:** Statement indicating date of self-employment loss or Reduction Copy of 2020 IRS Tax Return Transcript or IRS Tax Return: Dependent students should submit their parent's IRS Tax Return Transcript(s) or IRS Tax Return(s)
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We review loss or reduction of gross income (before expenses) that took place for at least 12 consecutive weeks after Jan. 1, 2021 and before Dec. 31, 2023. **Documentation Needed:** Statement indicating date of self-employment loss or Reduction Copy of 2020 IRS Tax Return Transcript or IRS Tax Return: Dependent students should submit their parent's IRS Tax Return Transcript(s) or IRS Tax Return(s) Independent students should submit their (and their spouses, if applicable) IRS Tax Return Transcript or IRS Tax Return For loss of self-employment income: Income Statement showing net earned income for the

□ REDUCTION OF INCOME (Check all that apply) Current employer has reduced wages and/or hours for at least 12 consecutive weeks within the last three years for you, your spouse, or your parent (if dependent).
Documentation Needed:
☐ Employer documentation verifying change in employment status (e.g. furlough)
☐ Copy of paycheck stub(s) received before reduction and copy of most recent paycheck stub(s) since reduction
☐ Copy of 2021 IRS Tax Return Transcript or IRS Tax Return:
☐ Dependent students should submit their parent's IRS Tax Return Transcript or IRS Tax
Return
$\hfill\Box$ Independent students should submit their (and their spouses, if applicable) IRS Tax Return Transcript or IRS Tax Return
□ REDUCTION IN INCOME/BENEFITS:
You, your spouse, or your parent(s), if dependent, lost income or benefits outside of employment (i.e. child support, unemployment, etc.).
Documentation Needed:
\square Third-party official documentation reporting date income or benefit was
terminated/exhausted
☐ Copy of 2021 and 2022 IRS Tax Return Transcript or
IRS Tax Return:
\square Dependent students should submit their parent's IRS Tax Return Transcript(s) or IRS Tax Return(s)
☐ Independent students should submit their (and their spouses, if applicable) IRS Tax Return
Transcript or IRS Tax Return
☐ DUE TO MEDICAL LEAVE:
You, your spouse, or your parent(s), if dependent, lost income due to medical leave related to the
illness or injury of an immediate family member of the student (or spouse, if applicable).
Documentation Needed:
☐ Doctor's note indicating illness/injury related to loss of income and dates surrounding
medical leave
☐ Disability, worker's compensation or other applicable documentation showing any income
generated while on medical leave as a result of medical leave
\square Last full paycheck stub before medical leave of employee who lost income

Name: _____

Student ID Number: _____

T EVCEDTIONAL MEDICAL/DENTAL EVDENICES					
☐ EXCEPTIONAL MEDICAL/DENTAL EXPENSES Medical and/or dental expenses for 2020, 2021, or 2022 that were paid out-of-pocket (i.e. not what insurance covered) for you, your spouse (if applicable) and/or your parent(s)/sibling(s), if dependent.					
					Documentation Needed:
					□ A copy of Schedule A form, your 2021, 2022, and/or 2023 IRS Tax Return (itemized deductions schedule) □ Copies of canceled checks for out-of-pocket payments and/or receipts of payments □ A copy of your FSA or HSA account showing payments AND/OR a copy of your medical account listing payments and dates
□ DIVORCE/SEPARATION					
You/your parents divorced or separated after the FAFSA was completed.					
Documentation Needed:					
☐ For separation: Signed statement indicating date of separation AND two official					
documents (e.g. copy of lease, utility bill, driver's license, etc.) verifying the physical address					
of the absent spouse/parent (no P.O. boxes)					
☐ For divorce: A divorce decree					
☐ Copy of 2021 IRS Tax Return Transcript:					
☐ Dependent students should submit their parent's IRS Tax Return Transcript(s) or					
IRS Tax Return(s)					
☐ Independent students should submit their (and their spouses, if					
applicable) IRS Tax Return Transcript or IRS Tax Return					
☐ Copy of all W2s reported on the 2021 IRS Tax Return Transcript(s) or IRS Tax Return(s)					
□ DEATH OF DADENT OR CROUCE					
☐ DEATH OF PARENT OR SPOUSE Your spouse/parent passed away after the FAFSA was complete.					
Your spouse/parent passed away after the FAFSA was complete.					
Documentation Needed:					
\square Copy of the death certificate or a published newspaper obituary with					
date of death					
☐ Copy of 2021 IRS Tax Return Transcript or IRS Tax					
Return:					
\square Dependent students should submit their parent's IRS Tax Return Transcript(s) or					
IRS Tax Return(s)					
☐ Independent students should submit their (and their spouses, if					
applicable) IRS Tax Return Transcript or IRS Tax Return					
☐ Copy of all W2s reported on the 2021 IRS Tax Return Transcript(s) or IRS Tax Return(s)					

Student ID Number: _____

Name:					
☐ PRIVATE SCHOOL TUITION Only elementary/secondary to	uition expenses p	aid for within the last three years are cons	idered		
Please submit documentation	on letterhead or	a bill reporting the amount of tuition paid books, supplies, etc. cannot be included in	and		
Dependent students: Tuition	paid for siblings	only			
•Independent students: Tuition paid for dependent children only					
☐ COLLEGE TUITION COST FOI	R PARENTS				
	•	r semester/quarter, in regionally accredite			
institution, and working towar credential.	d a degree, certif	ficate, or program leading to a recognized	education		
Please submit documentation	on letterhead or	a bill from the college reporting tuition ex	penses,		
number of credit hours, and de	egree program fo	or the current academic year.			
SECTION D. CERTIFICATION AN	D AUTHORIZATIO	DN			
If circumstances change, I/we ad	ccept the respons	sibility for contacting the Financial Aid Offi	ce		
		understand that submitting this form late i	•		
	-	ocessing time, awarding, and disbursemer			
·		omes part of the official record and therefo			
cannot be returned. Documents privacy under federal law.	that become pai	rt of the Education Record are protected fo	or		
I certify that all the information	contained on this	s form and in the supporting documentation	on is		
complete and correct. I understa	and that I must co	omplete all sections, sign and return this fo	orm		
for my appeal to be processed for	or financial aid co	onsideration. I understand that it may take	5 –		
7 business days for this request	to be processed.	Electronic signatures are not accepted.			
	·				
Student Signature	Date	Parent Signature	Date		