

Please Read

Roberts Wesleyan College has an appeal process through which you may request reconsideration of your federal aid. If you are able to document a significant change in your family's financial circumstances, or believe there are special circumstances that were not considered initially, please complete this form. Federal regulations and institutional policies require that exceptions fall within certain parameters and are documented. This form is designed to assist you in providing information critical to the review of your appeal. A financial aid counselor will review your appeal. Their decision will be based on the individual circumstances outlined in the completion of this form. Students will be notified, in writing, of the appeal decision.

Federal regulations DO NOT require that a school review an appeal for additional financial aid; it is solely at the discretion of the college or university.

Please note, submission of an appeal does not guarantee an adjustment to a student's award.

Failure to document all circumstances and/or losses of income may result in a pending application for additional information and will cause a review delay.

You will be notified in writing regarding the outcome of your Financial Aid Appeal Form. In many instances, an adjustment to the student's record does not always qualify a student for additional financial aid.

Roberts Wesleyan College
Office of Financial Aid
2301 Westside Drive
Rochester NY 146241997

Tel: 585-594-6150 or;
1-800-777-4792 ext 6150
Fax: 585-594-6036
email: Finaid@roberts.edu

2014-2015 Financial Aid Professional Judgment Request

Dependent

Independent

Please Type or Print

Student Name _____

Student ID# _____

Date of Birth _____

Address _____

City _____

State _____

Zip Code _____

Phone Number (cell or home) _____

Parent's Name _____

Parent's E-mail: _____

Day Phone # _____

Only ONE parent or guardian needed for appeal

ALL PROFESSIONAL JUDGMENT CONSIDERATIONS MUST FIRST COMPLETE THE VERIFICATION PROCESS. THE FOLLOWING DOCUMENTATION MUST BE INCLUDED WITH THIS REQUEST FOR RECONSIDERATION OF FINANCIAL AID:

- Signed Letter explaining Circumstance
- All Supporting Documentation (see back)
- Verification Worksheet
- Copy of 2013 IRS Tax Return Transcript*
(may also need to provide pages 1 and 2 of 2013 federal tax return)

This request will not be processed until all documentation is received.

* Request your 2013 IRS Tax Return Transcript at www.irs.gov.

Under the Tools section, select "Get Transcript of Your Tax Records", then select "Get Transcript Online".

Set up an IRS User ID and PIN, then print a PDF copy of your tax return transcript.

(usually available within 2-3 weeks after electronically filing your return)

WARNING: If you purposely give false or misleading information on this request, you may be fined, sentenced to jail, or both.

CIRCUMSTANCES: *Check all that apply.*

- Parent(s) Attending College at Least Half-Time in a Degree-Granting Program:** Provide documentation from a federally- eligible college the parent is attending, listing credit hours enrolled and term.
- Private Elementary or Secondary School Tuition Paid for Siblings for calendar year 2013:** Provide evidence of *out-of-pocket tuition only* paid for calendar year 2013 (1/1/13-12/31/13) . Day care, preschool, and private college costs are not considered. CANNOT ACCEPT STATEMENTS BASED ON ACADEMIC YEAR.
- Loss of Benefits such as Child Support, Unemployment, or Social Security (if reported on the FAFSA):** Provide letter explaining type, monthly amount and when loss of income occurred, along with documentation such as court document, letter from Social Security, or copy of unemployment compensation termination letter with year to date information, as appropriate.
- Unusually High Medical Expenses Not covered by Insurance:** Your medical expenses must be **PAID by you** . Provide copy of your 2013 Schedule A, along with a summary of payments made for medical treatment. If you did not itemize on your tax returns, provide paid receipts or copies of checks for medical treatment in lieu of Schedule A, and evidence these were not covered by insurance. (We will consider costs over 7.5% of your AGI as unusually high) NOTE: We **cannot** consider insurance premiums or deductibles paid in this calculation.
- MARRIAGE of a Parent or Student:** Provide a copy of the marriage certificate and evidence that the name has been changed with the Social Security Administration. Must also provide 2013 tax transcript for the spouse and update FAFSA with spouse's information.
- Separation/Divorce:** Provide a copy of the divorce decree, legal separation papers, or a letter from the participating attorney stating marital status, or documentation confirming separate residences. Also provide 2013 tax transcript and W-2's from all employers.
- Death of a Parent or Spouse:** Provide a copy of the death certificate and 2013 W-2's from all employers..
- Lump Sum Distributions/ Inheritance :** This could be a capital gain, a one-time distribution from a retirement plan, or some other situation in which funds (other than income) were not received in the previous year and will not be received in the next year.. Provide evidence supporting source of these funds (such as an attorney letter for inheritance or tax document for distribution), 2013 tax transcript from the IRS, and a letter stating the amount of distribution, purpose for the distribution, and where this money is at the present time (eg. savings account, investments, used to pay off bills, etc)..
- Unusual Debt** (such as Chapter 13 Bankruptcy, Garnishment, Tax Liens) that were a result of unemployment, illness, or business failure and are being repaid. Provide court document or other legal documentation evidencing monthly payment, term, and balance owed.
- Other Extenuating Circumstances:** Provide a written explanation and supporting documentation addressing a significant change in your family's financial circumstances that were not previously considered. Note: excessive debt cannot be considered for Professional Judgment.
- Reduction of Income:** In cases where the parent(s) of a dependent student (or independent student and/or their spouse) experience a reduction of income, RWC may consider adjusting the FAFSA income figures. (Loss of bonus or overtime income, as well as an anticipated income or loss, can not be considered) Adjustments **will not** be made for a dependent student's change in income.

You must identify the reason for loss of income, and complete income calculations below:

_____ **Unemployed:** (Must be out of work for at least 8 weeks in 2014.) Provide a statement of benefits from an unemployment agency; letter from previous employer stating separation and last day worked; along with last paystub from former employer. Cannot request prior to MAY, 2014.

_____ **Job Change:** Provide a copy of your most recent paystub or letter from new employer confirming start date, rate of pay and hours scheduled to work per week

_____ **Other:** provide explanation and documentation of monthly benefits.

_____ **Disability:** Provide a letter from physician confirming disability and prognosis for returning to work. Include a letter from Social Security, insurance agency, or other service providing benefits, whether temporary or permanent, stating monthly amount and length of benefits.

2014 estimated income calculations:

Gross Income from Work (attach last paystub)	ACTUAL (1/1/14 - TODAY)	ESTIMATED (TODAY-12/31/14)	TOTAL 2014 INCOME
by parent/stepparent #1 in 2014	\$ _____	+ \$ _____	= \$ _____
by parent/stepparent#2 in 2014	\$ _____	+ \$ _____	= \$ _____
by student in 2014 (if independent)	\$ _____	+ \$ _____	= \$ _____
by student's spouse or other household member	\$ _____	+ \$ _____	= \$ _____
Unemployment benefits/ Workers Comp	\$ _____	+ \$ _____	= \$ _____
Social Security / Welfare / Child Support	\$ _____	+ \$ _____	= \$ _____
ALL OTHER INCOME FOR HOUSEHOLD MEMBERS	\$ _____	+ \$ _____	= \$ _____

CERTIFICATION: MUST BE SIGNED TO BE CONSIDERED *By signing below I affirm that the data contained on this form is true and complete to the best of my knowledge. I will provide documentation to substantiate the information provided.*

STUDENT

DATE

PARENT (if dependent)

DATE