

## 2011-12 PROFESSIONAL JUDGMENT APPEAL FOR SPECIAL CIRCUMSTANCES

Name: \_\_\_\_\_ WSU One Card ID#: \_\_\_\_\_ Year in School: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The Office of Student Financial Aid (OSFA) recognizes that students and their families may have extenuating family or financial circumstances that the standard Need Analysis Form (Free Application for Federal Student Aid - FAFSA) does not consider. We will evaluate appeals on a case-by-case basis when there are special circumstances that the 2010 base year income or standard family questions do not accurately reflect. Submission of this appeal does not guarantee a favorable change in your financial aid eligibility or award(s). Decisions of OSFA are final.

**VERIFICATION INSTRUCTIONS:** Students who wish to submit this appeal form are also required to complete the **Verification** process. If you have already submitted regular Verification documents to our office please write “previously submitted” next to the document listed. If you have not previously done so, submit the following documents with this Form.

- ✓ 2011-12 Verification Worksheet, **Signed**
- ✓ **Signed** copy of your 2010 Federal Tax Return, with any schedules filed, and copy of your 2010 W2(s)
- ✓ **Signed** copy of your parent’s 2010 Federal Tax Return, with any schedules filed, and copies of their W2(s). (Ignore this item if your appeal is for Parental Estrangement or Unavailability of Parent Data.)

Additional information or documentation may be required after an initial review of your appeal. Please submit all documentation requested by our office with your appeal; at the same time. Students applying for **Federal Loans Only** need to submit documents for themselves (and spouse if married). **Campus-Based** aid applicants need to submit documents for their parent(s) in addition to themselves (and spouse if married).

**APPEAL INSTRUCTIONS:** Place a check next to each of the following Special Circumstances that pertains to your situation. In addition to the Verification documents, you need to provide the information relevant to your circumstance(s), as indicated.

- Death of Spouse or Parent after FAFSA has been filed**
  - ✓ Submit a copy of the Death Certificate, or obituary notice.
  - ✓ Only the income of the surviving spouse or parent will be used. We need 2010 W2(s) of surviving spouse, or parent.
  
- Divorce or Separation of Student or Parent after FAFSA has been filed**
  - ✓ For Divorce: A copy of the divorce decree, and (if applicable) documentation of child support to be received for minor children. Projected total amount of alimony to be received in 2011 (if applicable). Also, we need 2010 W2(s) to estimate separate AGI on 2010 joint Tax Return.
  - ✓ For Separation: Separate Maintenance Agreement or attorney’s letter. If these are not available you may submit a signed **notarized** statement. Also, provide proof of separate residences.
  
- Separation from Work due to Layoff or Termination**  
(The Office of Student Financial Aid will not consider this circumstance until separation has actually occurred.)
  - ✓ Provide letter from the company documenting employment separation, and last date of work. Also, if applicable, confirmation of pension benefits.

- ✓ Unemployment Benefits determination document.
- ✓ Complete estimated income section(s) on pages 3 and/or 4.
- ✓ Submit **Year-to-Date** documentation of 2011 income (last pay stub, Family Independence Agency, Social Security, pension distribution, etc).
- ✓ Submit documentation of severance pay, if received.
  
- Change in Job Status** (Reduction in wages, or mandatory reduction in hours worked.)
  - ✓ Submit a letter of separation, or job status change from employer on company letter head.
  - ✓ Complete estimated income section(s) on pages 3 and/or 4.
  - ✓ Submit **Year-to-Date** documentation of 2011 income (most recent pay stubs from all employers).  
(No adjustments for loss of overtime will be considered before 2011 W-2 forms are issued; unless the employer issues a written statement that there will be no overtime paid for the year 2011.)
  
- Loss of Benefits or Non-Recurring Income** (Benefits received in 2010 are being reduced or lost in 2011.)
  - ✓ Submit letter of reduction or termination indicating date of loss or reduction.
  - ✓ Submit documentation of expected 2011 benefits.
  - ✓ Documentation of loss of Social Security benefits due to child turning 18.
  - ✓ For non-recurring or one time income from 2010 submit documentation indicating type and amount of income (IRA distribution, pension distribution, inheritance, moving expense allowance, etc).
  - ✓ Document how funds were spent or invested.
  
- High Medical or Dental Expenses Not Covered by Insurance**  
(Expenses must be a least 7.5% of Adjusted Gross Income (AGI) to meet the minimum threshold for consideration. Eligible expenses also include non-reimbursed Dental and Health Care premiums.)
  - ✓ Submit 2010 Federal 1040 Schedule A showing that the taxpayer met the IRS threshold to deduct these expenses.
  - ✓ If the taxpayer did not file a Schedule A, submit a listing of paid and non-reimbursed expenses with supporting documentation.
  
- Private School Tuition**  
(Expenses are restricted to tuition (no books, uniforms, or fees. Expenses taken as a childcare tax credit are ineligible.)
  - ✓ Submit a letter from child's school indicating tuition, minus any scholarships or discounts.
  - ✓ Submit receipts showing amounts and dates paid.
  - ✓ All documents should identify the student by name, and the name of the school.
  
- Parental Estrangement Only: Submit pages 1 – 2, and page 5 (Addendum 1). Skip pages 3, 4, and 6.**
  - *NOTE: Parental Estrangement does not apply in the following situations...*
    - You do not reside with your parents.
    - Your parents do not contribute to pay for your education, or are not financially able to pay for your education.
    - Your parents do not claim you on their tax return.
    - You do not want your parent's assistance to pay for college.
  
- Unavailability of Parental Data Only: Submit pages 1 – 2, and page 6 (Addendum 2). Skip pages 3, 4, and 5.**
  
- Other**
  - *NOTE: If you do not see your circumstances listed on the form you may write a statement, and provide supporting documentation. Please consult with someone at the School of Medicine's financial aid office if you are not sure what to include.*

**NOTE: Please submit all forms and documentation together to complete the appeal process. Incomplete appeals will be returned without review.**

# Statement of Estimated Income for the year 2011 – Student and Spouse

(Ignore pages 5 and 6.)

Name: \_\_\_\_\_ WSU ID #: \_\_\_\_\_

**\*Report annual amounts, not monthly.**

<b>I. Projected Taxable Income for 2011</b>	<b>Amounts</b>
Student's Wages:	\$ _____
Spouse's Wages:	\$ _____
<b>II. Other Taxable Income for 2011</b>	
Source: _____	\$ _____
Source: _____	\$ _____
Source: _____	\$ _____
<b>III. Projected Untaxed Income and Benefits for 2011</b>	
Source: _____	\$ _____
Source: _____	\$ _____
<b>Total Projected Untaxed Income and Benefits =</b>	\$ _____

I, being the undersigned acknowledge my responsibility to immediately notify the Office of Student Financial Aid if the above projections become inaccurate. I have attached a signed copy of my 2010 Federal Tax Return, and 2010 W2(s). I agree (if later asked) to provide a signed copy of my 2011 Federal Tax Return, and 2011 W-2(s). Also, if requested, I agree to provide documentation of untaxed income to verify the information above. I realize that I will be required to repay all, or part of any financial aid received based on inaccurately projected income.

\_\_\_\_\_  
Student's Signature Date

\_\_\_\_\_  
Spouse's Signature Date

**Statement of Estimated Income for the year 2011**  
**Parent(s) and/or applicable Stepparent(s)**  
*(Ignore pages 5 and 6.)*

Print Name of Parent or Stepparent with special circumstance: \_\_\_\_\_

Print Spouse's Name: \_\_\_\_\_

**Report annual amounts, not monthly.**

<b>IV. Projected Taxable Income for 2011</b>	<b>Amounts</b>
Parent's Wages:	\$ _____
Spouse's Wages:	\$ _____
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<b>V. Other Taxable Income for 2011</b>	
Source: _____	\$ _____
Source: _____	\$ _____
Source: _____	\$ _____
<hr/>	
<b>VI. Projected Untaxed Income and Benefits for 2011</b>	
Source: _____	\$ _____
Source: _____	\$ _____
<b>Total Projected Untaxed Income and Benefits =</b>	\$ _____

I, being the undersigned acknowledge my responsibility to immediately notify the Office of Student Financial Aid if the above projections become inaccurate. I have attached a signed copy of my 2010 Federal Tax Return, and 2010 W2(s). I agree (if later asked) to provide a signed copy of my 2011 Federal Tax Return, and 2011 W-2(s). Also, if requested, I agree to provide documentation of untaxed income to verify the information above. I realize that I will be required to repay all, or part of any financial aid received based on inaccurately projected income.

\_\_\_\_\_  
 Parent's Signature Date

\_\_\_\_\_  
 Spouse's Signature Date

# ADDENDUM 1 – Only for Documenting Parental Estrangement

(Ignore pages 3, 4 and 6 of this form.)

This Addendum is for cases of Parental Estrangement only. Students who are estranged from their parent(s) due to **extenuating, or unusual circumstances** (i.e. abuse, alcoholism, drug abuse, extended separation, etc.) which can be documented by an objective third party (i.e. college counselor, social service agency official, mental health professional, clergy member, law enforcement officer, etc.) may qualify. Students who have one deceased parent must explain their relationship with their living parent.

If your only rationale for completing this appeal is that you are completely financially independent of you parents, then that is not the issue. As a Medical School student you are already considered to be an ‘Independent Student’. The only purpose of documenting Parental Estrangement is to be able to apply for Campus Based aid, without having to include parental data. Please speak with OSFA at the School of Medicine for further explanation if the information below is insufficient.

## Requirements and Instructions:

1. **Submit a personal statement with this appeal, explaining the circumstances of your current family situation. Your personal statement must include the following information:**
  - a. A detailed explanation of your current relationship with each of your parents.
  - b. When was the last time you spoke with your parent(s)?
  - c. Do you receive any financial support from your parent(s)?
  
2. **Submit supporting documentation to substantiate the reasons for this appeal. This documentation may include, but is not limited to:**
  - a. Documentation to confirm that a parent is deceased; institutionalized; incarcerated; incapacitated due to disability; unreachable due to living in remote or war-torn area of a foreign country.
  - b. Documentation confirming that there is a protection/restraining order that prohibits you from having contact with your parents.
  - c. **Signed** objective **Third Party** letter verifying the reasons for this appeal. They must be familiar with your family’s circumstances as described in your personal statement. This letter may come from a college counselor, social service agency official, clergy member, mental health professional, law enforcement officer, teacher, etc. Letters from agencies/institutions should be on official letterhead. If the letter is from a friend or relative then please ask them then to have the letter **notarized**.
  
3. **Sign the certification at the bottom of this page.**
  
4. **If your parent’s data is unavailable for some other reason, see page 6.**

I, being the undersigned, acknowledge my responsibility to immediately notify the Office of Student Financial Aid if my family situation/circumstances changes. I have attached a signed copy of my 2010 Federal Tax Return, and 2010 W2(s). I agree (if later asked) to provide a signed copy of my 2011 Federal Tax Return, and 2011 W-2(s). Also, I agree to provide further information, as requested. I realize that I will be required to repay all or part of any financial aid received based on inaccurately reported information.

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Student’s Signature

Date

## ADDENDUM 2 – Only for Documenting Unavailability of Parental Data

(Ignore pages 3, 4, and 5.)

Please check the box that applies to you:

- Parents are Deceased:** Please attach a copy of the death certificate for each of your parents.
- Ward of the Court:** If you were a Ward of the Court at any time since you turned age 13, the State was your legal guardian, and you were placed under the care of the Family Independence Agency (FIA) in Michigan, or social services agency of your state, attach a copy of the court documentation from your state.
- Foster Care:** If you were in Foster Care at any time since you turned age 13, attach a copy of the court document from the Department of Human Services Verification of Court/State Ward Status.
- Emancipated Minor:** You may use this claim only if you can provide a copy of the court's decision of your status as having been an Emancipated Minor immediately before you reached the age of being an adult in your state of legal residence. (Note: The court must be located in your state of legal residence at the time court's decision was issued.)
- Legal Guardianship:** You may use this claim only if you can provide a copy of the court's decision that you were in legal guardianship immediately before you reached the age of being an adult in your state. (Note: The court must be located in your state of legal residence at the time. Documentation: Attach a copy of the court's Order of Discharge from Guardianship.)
- Dependency Override:** If you had a Dependency Override approved as an Undergraduate while attending WSU, or at another school, please notify OSFA – School of Medicine office.

I, being the undersigned, acknowledge my responsibility to immediately notify the Office of Student Financial Aid if my family situation/circumstances change. I have attached a signed copy of my 2010 Federal Tax Return, and 2010 W2(s). I agree (if later asked) to provide a signed copy of my 2011 Federal Tax Return, and 2011 W-2(s).

Also, I agree to provide further information, as requested. I realize that I will be required to repay all or part of any financial aid received based on inaccurately reported information.

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Student's Signature

Date

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Revised by CLC, 02/07/2011