

**For Office Use Only:**

Original SAI \_\_\_\_\_

Revised EFC: \_\_\_\_\_

Difference in Eligibility: Y/N

Appeal Granted: Y/N

Date transmitted: \_\_\_\_\_

Date reviewed: \_\_\_\_\_

FA Signature: \_\_\_\_\_

**PROFESSIONAL JUDGEMENT APPEAL**

**EMMANUEL UNIVERSITY**

**Office of Financial Aid**

**Student Name:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Please identify the reason for your appeal:**

- ☐ You or your parents are/will be experiencing significant and/or unusual expenses during the school year that are not reflected by the information disclosed on your FAFSA.
- ☐ One or both parent(s), you, or spouse, that reported income on the current year tax returns is no longer employed. This may include, but is not limited to: layoffs, retirement, or disability.
- ☐ Death of a parent, spouse, or legal guardian after the date the FAFSA was filed.
- ☐ Separation/Divorce of a personal or parent since the date the FAFSA was filed.

***Purpose:***

This form is to be filed if you wish for special consideration to be made with regard to your financial aid.

***Instructions:***

- ☐ Complete this application
- ☐ Attach all documentation requested

***Forms without documentation will be returned and will not be considered.***

***Timeline:***

Professional judgment documentation requires a reprocessing of the FAFSA, therefore a turnaround time of 3-5 business days is expected before your appeal can be reviewed. Appeals are reviewed the second and forth Friday of each month. You will be contacted as soon as information is available.

**CONDITION A: EXTENUATING CIRCUMSTANCES**

You have a special circumstance which will cause your family's 2025 income to be significantly less than that of 2023 or 2024. You may attach a separate sheet with an explanation of these circumstances if necessary. Include any documentation you feel will help us understand the situation.

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**CONDITION B: UNEMPLOYMENT**

A student, spouse, or parent who earned money in 2023 or 2024 has lost his/her job for at least 10 weeks in 2025, due to retirement, layoff, or job termination. Voluntary reduction of hours or leaving employment for the purpose of returning to school does NOT meet this condition.

The individual who lost his/her job: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

How many weeks has he/she been unemployed since January 1, 2025? \_\_\_\_\_

**Documentation Needed:** *Verification of loss of employment from employer or human resources. Verification should include date of last employment.*

**CONDITION C: DEATH**

A spouse or parent who earned income in 2023 or 2024 has died since the 2025-2026 Free Application for Federal Student Aid (FAFSA) was completed.

Full Name of Deceased individual: \_\_\_\_\_

Relationship to the Applicant: \_\_\_\_\_

**Documentation Needed:** *A photocopy of the death certificate (this will not be returned).*

**CONDITION D: SEPERATION OR DIVORCE**

After filing for Federal Student Aid, you or your parents have separated or divorced.

1. Who has separated or divorced? ☐ Parents ☐ Student
2. Date of separation or divorce? \_\_\_\_/\_\_\_\_/\_\_\_\_
3. Which condition applies? ☐ Separation ☐ Divorce

**Documents Needed:** *A photocopy of either the Separation Maintenance Order or a photocopy of the Divorce Decree. This will not be returned.*

**For all applicants:**

Submit the following documentation with this form:

1. A signed copy of your 2024 Federal Income Tax return for student and parents and W-2s.
2. Copy of last paycheck stub(s).
3. Copy of any applicable benefit statements, ie. Social security, unemployment compensation, TANF...
4. All documentation listed under the specific condition for which you have submitted appeal.

All of the information on this form is true and complete to the best of my knowledge. I agree, if asked, to provide information that will verify the accuracy of the information reported on this form.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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