

■ FINANCIAL AID, SCHOLARSHIPS, & VETERANS SERVICES

## 2019-2020 Professional Judgment Consideration Form

Campus Box 4038, 1 Kellogg Circle, Emporia, KS 66801-5415 Phone: (620) 341-5457 or 1-800-896-0567 Fax: (620) 341-6088 finaid@emporia.edu

If a change in your financial circumstances has occurred since you completed the Free Application for Federal Student Aid (FAFSA), you may be eligible for a FAFSA review (Professional Judgment). Not every family situation qualifies for a review, so submission of this form does not guarantee a review. In addition, a review is not a guarantee that there will be any change in your award offer. Please complete this form and return it to the Office of Financial Aid, Scholarships, & Veterans Services.

## IMPORTANT INFORMATION

- Consumer indebtedness (mortgages, credit card debt, automobile loans, home equity loans, payday loans, and other consumer loans) is not considered grounds for consideration as they are considered "personal choices" of student/family.
- You must be able to provide supporting documentation.
- Professional Judgment decisions (may) change your Expected Family Contribution (EFC). This number determines a student's need. The higher the number is, the less the student's need will be. If your current EFC is 0, there is no need to complete this application as this is the lowest the EFC can be. Please review your Student Aid Report (SAR), or contact us if you are unsure what your EFC is.

| Student Name                           |         | Student IE               | ) Number                  |                  |
|--|---------|--------------------------|---------------------------|------------------|
| Address                                |         | Email Add                | ress                      |                  |
| City, St, Zip                          |         | Parent Na                | me (if dependent student) |                  |
| Phone Number                           |         |                          |                           |                  |
| Please check which situation(s) apply: |         | Father                   | Mother                    | Student's Spouse |
|  | Student | (if a dependent student) | (if a dependent student)  | (if applicable)  |
| Loss of employment                     |         |                          |                           |                  |
| Loss or reduction of income            |         |                          |                           |                  |
| Separation or divorce                  |         |                          |                           |                  |
| Death                                  |         |                          |                           |                  |
| Liquidation/foreclosure                |         |                          |                           |                  |
| Please explain reason for request:     |         |                          |                           |                  |
|  |         |                          |                           |                  |
|  |         |                          |                           |                  |
|  |         |                          |                           |                  |
|  |         |                          |                           | ·                |
| Student Signature                      |         | <br>Date                 |                           |                  |