

2019-2020 Professional Judgment Appeal Form

The federal formula that determines a student's financial aid eligibility is based on tax information from two-years prior. This is known in financial aid as the Base Year. For the 2019-2020 academic year, the base year is 2017. However, there are occasions when a family's financial situation changes during the school year from what it was during the Base Year. If changes have caused an unexpected or unplanned reduction in the family's finances, or are the result of circumstances beyond the family's control, the Financial Aid Office can, upon request, review documentation to determine if the Base Year is still an accurate reflection of the family's financial situation. Examples of changes that may warrant a professional judgement appeal include unemployment, loss of income, a change in marital status, or the death of a wage earner. Please attach any supporting documentation that may aid the Financial Aid Office in making a decision. The student's name and student ID# should be included on all documents submitted to insure proper identification. If you need assistance in completing this form, please contact us.

Note: Sections I, II, III, and IV must be completed. Enter NA if not applicable but do not leave any blanks.

Student Information

Student Name	Date of Birth	LMU Student ID	Student Phone	Parent Phone
Address		City	State	Zip

Section I – Household Certification

Dependent Students: List the people that your parent(s) will support between July 1, 2019 and June 30, 2020. (Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.) Include the following:

- Yourself and your parent(s), even if you do not live with your parents,
- Your parent(s) other children if (a) your parent(s) will provide more than half of their support from July 1, 2019 through June 30, 2020, or (b) the children would be required to give parental information when applying for federal student aid in 2019-2020.
- Other people if they now live with your parent(s), and your parent(s) have provided more than half of their support, and will continue to provide more than half of their support from July 1, 2019 through June 30, 2020.

Independent Students: List people that you (and your spouse) will support between July 1, 2019 and June 30, 2020. (Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs etc.) Include the following:

- Yourself (and your spouse, if you have one),
- Your children, if you will provide more than half of their support from July 1, 2019 through June 30, 2020.
- Other people if they now live with you, you have provided more than half of their support, and will continue to provide more than half of their support from July 1, 2019 through June 30, 2020.

Student's Name	Age	Relationship to Student	College and Grade Level for 2019-2020
		Self	Lincoln Memorial University
Family Members	Age	Relationship to Student	College and Grade Level for 2019-2020

Section II – Reasons For The Appeal

Change of income or assets

(Provide letter from employer, an accounting of unemployment benefits, copy of last check stub, and/or statement from appropriate agency.)

Source of loss: _____

Effective date: _____

Voluntary Involuntary

Unusual medical or dental expenses not covered by insurance

(Provide receipts of medical and dental payments.)

Amount paid in 2018: _____ Amount paid 2019: _____

Will you itemize these expenses on your federal tax return? Yes No

Divorce/separation of a parent or from a spouse in 2019

(Provide copies of legal documents for separation or divorce.)

Effective Date of separation/divorce: _____

Name of custodial parent (dependent students): _____

Death of parent or spouse in 2018

(Provide a copy of death certificate.)

Date of death: _____

Other unusual expenses

(Contributions to unemployed adult children, elder care, legal fees, funeral expenses, involuntary and temporary maintenance of two households, child care, educational expenses of parents who are enrolled in college, etc. Please provide documentation of these expenses.)

Please list an explanation for any of the above appeals. List the student's relationship to the affected family member. Please attach additional pages if needed.

Section III – Family Financial Information

Estimated 2019 Income

Provide your best estimate of the amounts you will receive from all sources of income (include taxable and non-taxable income) from January 1, 2019 to December 31, 2019 and attach supporting documentation (examples are: current paystubs, unemployment benefit statement, social security benefit statement or pay documentation, etc).

Student/Spouse Information (All students)	
Student's anticipated earned income	\$
Spouse's anticipated earned income	\$
Student/Spouse anticipated other taxable income	\$
Total taxable income	\$
Student/Spouse non-taxable income*	\$

Parent(s) Information (Dependent students only)	
Father's anticipated earned income	\$
Mother's anticipated earned income	\$
Family's anticipated other taxable income	\$
Total taxable income	\$
Family's non-taxable income*	\$

***Non-taxable income includes:**

Payments to tax-deferred pensions and savings plans, deductible IRA and/or Keogh payments, child support received, tax-exempt interest income, untaxed portions of pensions, living allowances for military and/or clergy, workers compensation, and disability benefits.

Current Asset Information

Student/Spouse Assets (All students)	
Total current balance of cash, savings, and checking accounts	\$
Current net worth of investments (Investment value <u>minus</u> investment debt)	\$
Current net worth of business (Business value <u>minus</u> business debt. Do <u>not</u> include if employees less than 100 people.)	\$
Current net worth of investment farm (Investment farm value <u>minus</u> investment farm debt. Do <u>not</u> include a farm that you live on and operate.)	\$

Parent(s) Assets (Dependent students only)	
Total current balance of cash, savings, and checking accounts	\$
Current net worth of investments (Investment value <u>minus</u> investment debt)	\$
Current net worth of business (Business value <u>minus</u> business debt. Do <u>not</u> include if employees less than 100 people.)	\$
Current net worth of investment farm (Investment farm value <u>minus</u> investment farm debt. Do <u>not</u> include a farm that you live on and operate.)	\$

Section IV – Signature(s)

I hereby affirm that all information reported on this form and any attachments hereto is true, complete, and accurate to the best of my (our) knowledge. I understand that if I (we) receive federal student aid based on incorrect information, I (we) will have to pay it back; I (we) may also have to pay fines and fees.

Student: _____ Date: _____

Parent: _____ Date: _____
Dependent Students only

Spouse: _____ Date: _____

Parent: _____ Date: _____
Dependent Students only