

Professional Judgments are handled on a case-by-case basis to consider the adjustment of one or more of the data elements used to calculate the Expected Family Contribution (EFC). If, due to special circumstances, you believe that the EFC calculated on your 2019-2020 Student Aid Report does not accurately represent your financial situation, you may request that Student Financial Services review your file and exercise professional judgment to adjust your data element(s) accordingly. Professional Judgments are processed under Section 479(A) of the HEA provisions of the federal Title IV programs.

Student's Last Name

Student's First Name

Student's M.I.

Student ID Number

A. Explanation of Circumstances

Provide a detailed explanation of the circumstances that have resulted in a request for special consideration of your financial situation.

B. Estimated Income: Actual Income Year-to-Date and Anticipated

Please provide income information based on the current calendar year (January 1-December 31). Supporting documents must be attached (see Section C).

Source of Income	Student/Spouse Actual Income Year- to-Date	Student/Spouse Anticipated Income Until end of year	Parents/Stepparents Actual Income Year-to-Date	Parents/Stepparents Anticipated Income Until end of year
Wages, Salary, Severance Pay, Disability, etc.				
Untaxed Social Security Benefits				
Child Support Received				
Untaxed Income (gifts, housing allowance, etc.)				
Total				

Student's Name: _____ SSN: _____

C. Verification and Documentation

1. A process called verification must be completed as part of the professional judgment review. If you have not already been through the verification process, you are required to complete and return the verification forms with the necessary tax information when you submit this form. Verification forms can be found on the student's Financial Aid Online record under the Forms tab.
2. Provide documentation from appropriate sources verifying loss of income. This can include termination letter, final pay stub, government notification of loss of benefits, etc.
3. Provide any available documentation to support the income information listed in section B (current pay stubs if applicable).

D. Certification and Signatures

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

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

For dependent students, the student and one parent must sign and date.

Student's Signature

Date

Student's Phone Number

Spouse's Signature (if student is married)

Date

Parent's Signature (if student is dependent)

Date

Parent's Phone Number (if student is dependent)

Submit completed form and any additional documents to:

Columbia International University
Financial Aid Office
PO Box 3122
Columbia, SC 29230-3122
(803) 807-5036
(803) 223-2505 (fax)
finaid@ciu.edu