

310 College Street
Barbourville, KY 40906
Phone (606) 546-1220
E-mail: financialaid@unionky.edu

2026-2027 Professional Judgement Form

Occasionally, unusual circumstances exist that may warrant reconsideration of financial aid eligibility. These special circumstances may be either changes that have occurred in your family circumstances since you filed the Free Application for Federal Student Aid (FAFSA) or unusual family circumstances not accounted for on the FAFSA. On the following pages we have listed the circumstances that most commonly qualify a student to file a Special Circumstances request. Select as many circumstances that fit your current situation.

_____	_____	_____		
STUDENT LAST NAME	STUDENT FIRST NAME	STUDENT ID		
_____	_____	_____		
ADDRESS	CITY	STATE	ZIP	PHONE NUMBER

Please check the box that indicates the reason you are requesting a special circumstances appeal, and attach the requested documentation.

Loss of income from work due to layoff, termination, or reduction in employment hours.

Who has been out of work? Student? Spouse? Parent? _____

Date of layoff or termination: _____

Is parent/student/spouse receiving unemployment benefits? _____

Did the parent/student/spouse receive a severance package? _____

Documentation Required:

- A signed letter describing the situation.
- Completed Special Circumstance Appeal Form.
- Copies of all 2025 W-2 Forms and 2025 Signed Tax Return.
- Letter from employer verifying loss of employment including the effective date.
- Proof of unemployment benefits.
- Documentation of severance pay received.

Divorce or separation has occurred since filing the Free Application for Federal Student Aid (FAFSA).

Please note that your parents must reside in separate households and provide documentation of separate residences.

Date of separation/divorce: _____

Documentation Required:

- A signed letter describing the situation.
- Completed Special Circumstance Appeal Form.
- Copies of all 2025 W-2 Forms and 2025 Signed Tax Return.
- Copy of legal separation/divorce paperwork.
- Documentation of spousal support or child support.

Death of a spouse or parent(s) has occurred since filing the Free Application for Federal Student Aid (FAFSA).

Name of individual who passed away: _____

Relationship to individual: _____

Date of death: _____

Documentation Required:

- A signed letter describing the situation.
- Completed Special Circumstance Appeal Form.
- Copy of death certificate.
- Proof of survivor's benefits, if applicable.
- Copies of all 2025 W-2 Forms and 2025 Signed Tax Return.

A one-time nonrecurring income was receiving during 2024 (i.e. inheritance, bonus pay, IRA or pensions distribution).

Consideration for a one-time income occurrence may be reviewed only **once** during a student's enrollment at Alma College.

Documentation Required:

- A signed letter describing the situation.
- Completed Special Circumstance Appeal Form.
- Copies of all 2024 W-2 Forms, 2024 1099s, and 2024 Signed Tax Return.
- Written explanation explaining the reason for early withdrawal.

Medical or Dental Expenses paid by your family.

Documentation Required:

- A signed letter describing the situation.
- Completed Special Circumstance Appeal Form.
- Copies of all 2025 W-2 Forms and 2025 Signed Tax Return.
- Copy of Schedule A – Itemized Deductions from your federal tax return.
- Copies of supporting documentation showing proof of out of pocket payments.

Additional Information:

- Do not include payments covered by insurance or other resources.
- We cannot take into consideration payments made by insurance, unpaid invoices, explanation of benefits, or account statements.



Elementary/Secondary Private School Tuition paid in 2025

Documentation Required:

- A signed letter describing the situation.
- Completed Special Circumstance Appeal Form.
- Copies of all 2025 W-2 Forms and 2025 Signed Tax Return.
- Copies of your bills or letters from the school documenting the cost and any assistance received. This must be for the 2024-2025 academic year.

CERTIFICATION

By signing this worksheet, we certify that all of the information reported on this worksheet is complete and correct.

Student's Signature

Date

Parent's Signature

Date

PLEASE SUBMIT THIS FORM TO THE UNION COMMONWEALTH FINANCIAL AID OFFICE

310 College Street Barbourville, KY 40906 Telephone (606) 546-1220

financialaid@unionky.edu