



# Texas College

## 2024-2025 Professional Judgement Request Form

*The Higher Education Act allows financial aid offices to address unusual circumstances when a family's ability to pay for a college education is not accurately reflected on the FAFSA. Since each situation will be reviewed on a case-by-case basis, additional aid is not guaranteed.*

**ALL DOCUMENTATION MUST BE SUBMITTED OR THE REQUEST WILL BE DENIED**

### Personal Information

\_\_\_\_\_

Student Name

\_\_\_\_\_

Student ID#

### Income Information

My projected 2024 income is \_\_\_\_\_ now, which is a reduction to my 2023 income reported on the FAFSA.

	Student	Father	Mother
About same as	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Significantly less than	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Significantly more than	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Note: "About the same as" should be marked if the change is from a slight cost of living increase in your pay, or small differences in hours worked or bonuses received.*

*Note 2: If any of the above answers are "Significantly less than" or "Significantly more than", please complete the following:*

Circle one: Student/Father/Mother

My projected 2024 income will be (January-December): \$ \_\_\_\_\_

Explanation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Documentation required:

- Attach most current YTD pay stub for 2024 showing income made year to date, and/or unemployment compensation report, ad/or any income made for 2023.
- Attached copy of 2021 and 2022 tax returns (signed), all pages for review.

Circle one: Student/Father/Mother

My projected 2024 income will be (January-December): \$ \_\_\_\_\_

Explanation:

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Documentation Required:

- Attach most current YTD pay stub for 2024 showing income made year to date, and/or unemployment compensation report, ad/or any income made for 2024.
- Attached copy of 2021 and 2022 tax returns (signed), all pages for review

**Out-of-pocket medical expenses** – Uninsured medical, dental and vision expenses occurred in the family that will not be reimbursed by insurance or other funding. Total out-of-pocket expenses for 2024: \$\_\_\_\_\_

Documentation required (one of the following):

- A copy of Schedule A if you included medical expenses in your itemized deductions on the 2022 tax form
- A signed summary of all medical expenses, including name of medical provider, type of expense (surgery, doctor visit, pharmacy, etc.), amount not covered by insurance, and amount you paid in 2023.

**Private school tuition expense** – Private K-12 tuition expenses paid for any child in the family in the 2024 tax year.

Name of student(s): \_\_\_\_\_

Name of school(s): \_\_\_\_\_

Tuition paid in 2023: \$(Do not include other fees—only tuition): \_\_\_\_\_

Documentation required:

- Receipt (or letter) from the school showing amounts paid in 2022. Please label unclear bills.

**Parent enrolled in college at least half time in a degree-seeking program** – The parent must be enrolled in 2024.

Name of parent enrolled: \_\_\_\_\_

College/university name: \_\_\_\_\_

Status of parent enrollment  Full time  Half time  Other  
Amount of tuition paid out-of-pocket 2023: \_\_\_\_\_

Documentation required:

- Proof of registration from school
- Bills or other statements from school showing amount paid for tuition

**Traditional IRA converted to Roth IRA in 2021** – Amount converted in 2022:

\$\_\_\_\_\_ Documentation required:

- Copy of 2022 tax forms, pages 1-2
- Copy of 1099R or other financial document showing the amount of the conversion

**One-time income source that inflates income** – Includes funds that are not accessible, lump sum distributions from retirement plans that are not recurring, etc. Amount of inflated income in 2022: \$ \_\_\_\_\_

Documentation required:

- A copy of Form 1099-R, if applicable
- A copy of the 2022 IRS tax return, pages 1-2, and any other applicable schedules related to the request
- Explain the situation using space provided at bottom of this form. Include detail of how the non-recurring income was spent or why it is not available to pay college expenses.

**Child support or Social Security benefits that have decreased or ended**

Documentation required:

- Legal documentation or notarized statement indicating the amount and date of change
- Explain the situation using space provided at bottom of this form.

**Other extenuating circumstances**

Documentation required

- Explain the situation using space provided at bottom of this form.
- Any supporting documents that verify the financial ramifications mentioned in the letter

*My signature below confirms that all of the information submitted is true and complete to the best of my knowledge. If asked by an authorized official, I (we) agree to give proof of this information. I (we) also realize that if I (we) do not give proof when asked, the request may not be considered.*

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

(Required if student's income changed)

For office use only:

Original EFC \$ \_\_\_\_\_ Adjusted EFC \$ \_\_\_\_\_ PJ Date \_\_\_\_\_

PJ completed by \_\_\_\_\_ Method of communicating results \_\_\_\_\_

PJ Notes \_\_\_\_\_

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