Student Name: ________________________________ EOU SID: _______________-

EOU email: ____________________________@eou.edu Phone: ____________________________

When your financial aid was determined for the 2021-2022 award year, it was based on the 2019 information you provided on the Free Application for Federal Student Aid (FAFSA). Unfortunately, a family sometimes experiences extenuating circumstances that affect its ability to contribute financially towards a student’s education. This form is to address those situations.

A financial aid administrator may use professional judgment (PJ), as long as it is within the intent of the law, to adjust certain data elements on your FAFSA and recalculate your expected family contribution (EFC). Your request will be given careful consideration and will extend the processing time. A financial aid administrator is NOT required to adjust awards. Making a request for a review of special circumstances does not guarantee an increase in funding.

THIS APPEAL WILL NOT BE CONSIDERED WITHOUT DOCUMENTATION ATTACHED. Documentation should verify (prove) what you state as your reasons for the appeal. Failure to provide adequate documentation will result in your appeal being denied. Additional documentation may be required. Check your EOU email regularly. A professional judgment can take up to 30 business days to complete. All PJ decisions are final, the notification of which will be sent only to your EOU email address.

Checklist of what you need to submit:

1. DETAILED letter explaining your circumstances (i.e. what has changed), signed and dated by the author. □
2. DOCUMENTATION supporting the change you are requesting. Please see examples on the following pages. □

Each person signing this PJ request certifies that all of the information you will submit for professional judgment is complete and correct. Because this information may affect federal aid eligibility, purposely giving false or misleading information may cause you to be fined, sent to prison, or both.

Parent’s Signature (for dependent students) ____________________________ Date ________________

Student’s Signature ____________________________ Date ________________

Review the situations on the following pages. Check the situations that apply and include those additional, needed documents with your signed professional judgment request.

Institutional Use Only

□ Approved TRN ___ EFC __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ __________ ____________
Please put the student’s name and ID number on all attached documents to prevent processing delays.

## SUBSTITUTE BASE FAFSA YEAR

*If your family’s income has changed AND if your family’s anticipated income during the 2021-22 AY is accurately reflected by the current year’s tax return, please include the following documents for the individual(s) with the change:*

<table>
<thead>
<tr>
<th>Documentation Needed:</th>
<th>Parent(s), if applicable</th>
<th>Student (and Spouse)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020 (through 4/15/2022) or 2021 (after 2/1/2022) Tax Return Transcript</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>2020 (through 4/15/2022) or 2021 (after 2/1/2022) Wage &amp; Income Transcript</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

## LOSS OF EMPLOYMENT

*That took place for at least 13 consecutive weeks after January 1, 2020.*

**Documentation Needed:**
- Official documentation verifying date of job loss (e.g. severance letter, unemployment decision, etc.).
- Final paycheck stub(s) from lost job (or a letter from your last employer stating the date your employment ended and year-to-date earnings) and most recent paycheck stub(s) of any and all employment.
- Unemployment history summary reporting benefits received to date and balance remaining or a signed statement that you did not or will not receive unemployment benefits.
- If you filed jointly in 2019, your and/or your spouse’s 2019 W-2(s), Schedule C, Schedule F, and/or Schedule K-1.
- If employed after job loss, please include a letter from current employer with your start date, hours, and salary.
- Copy of DD214 if your request is due to discharge from active military duty.

## LOSS/REDUCTION OF SELF-EMPLOYMENT INCOME

*The loss or reduction of gross income that took place for at least 13 consecutive weeks after January 1, 2020.*

**Documentation Needed:**
- Statement indicating date of self-employment loss or reduction.
- For loss of self-employment income: Income Statement showing net earned income for the 2020/2021 tax year(s).
- For reduction of self-employment income: Pro Forma Income Statement projecting income for the 2020/2021 tax year(s).
- If employed after loss of self-employment income, please include most recent paycheck stubs of any and all employment.

## REDUCTION OF INCOME

Check all that apply:

- **REDUCTION IN WAGES/HOURS**
  *
  *Current employer has reduced wages and/or hours for at least 13 consecutive weeks.*
  **Documentation Needed:**
  - Documentation from employer verifying change in employment status (e.g. furloughed, new average hours/new rate of pay) and listing the effective date of change.
  - Copies of paycheck stub(s) received before reduction and three most recent paycheck stubs since reduction.

- **NEW JOB WITH REDUCED WAGES**
  *
  *You, your spouse or your parents, if dependent, no longer work for the employer(s) worked for in 2019.*
  **Documentation Needed:**
  - Copy of employment termination letter and last pay stub or a letter from last employer stating the date employment ended and year-to-date earnings.
  - Copy of the three most recent pay stubs from the new employer.
  - Letter from new employer stating new rate of pay, average hours worked and date of hire.

- **DEPENDENT STUDENT’S PARENT HAS RETIRED**
  **Documentation Needed:**
  - Documentation of monthly income sources for all retirement income, including Social Security, if applicable.

Questions? Call 541-962-3550.
Please put the student’s name and ID number on all attached documents to prevent processing delays.

**REDUCTION IN SUPPORT/BENEFITS**

You, your spouse or your parent(s), if dependent, lost support or benefits outside of employment (i.e. child support, alimony, unemployment, workers’ compensation, Social Security benefits, etc.).

**Documentation Needed:**

- [ ] Third-party, official documentation reporting monthly benefit amount and the date income or benefit was terminated/exhausted, or
- [ ] Third-party, official documentation reporting original amount, date of reduction and the new, reduced amount.

**DUE TO MEDICAL LEAVE**

You, your spouse or your parent(s), if dependent, lost income due to medical leave related to the illness or injury of an immediate family member of the student (or spouse, if applicable).

**Documentation Needed:**

- [ ] Doctor’s note indicating illness/injury related to loss of income and dates surrounding medical leave.
- [ ] Disability, workers’ compensation or other applicable documentation showing any income generated while on medical leave, as a result of medical leave.
- [ ] Last full paycheck stub before medical leave of employee who lost income.

**ONE-TIME, TAXABLE INCOME**

Check all that apply:

- [ ] WITHDRAWAL OF IRA/PENSION/ANNUITY
  
  You, your spouse or your parent(s), made a withdrawal/took a distribution of a pension due to hardship (e.g. loss of employment, medical expenses).

  **Documentation Needed:**
  
  - [ ] Copy of confirmation of distribution from IRA, pension or annuity account (i.e. receipt).
  - [ ] Proof of payment and an itemized statement showing how the funds were spent.

- [ ] TRADITIONAL IRA CONVERTED TO ROTH IRA IN 2019
  
  **Documentation Needed:**
  
  - [ ] Copy of 1099R or other financial document showing the amount of the conversion.

- [ ] SETTLEMENT OR BACK-YEAR SOCIAL SECURITY PAYMENTS
  
  If you received a one-time, taxable, lump sum payment, please include with your explanation the following.

  **Documentation Needed:**
  
  - [ ] Documentation to identify the source of the income.
  - [ ] Proof of payment and an itemized statement showing how the funds were spent.

- [ ] DIVORCE/SEPARATION
  
  You or your parents divorced or separated after the FAFSA was completed.

  **Documentation Needed:**
  
  - [ ] For separation: A signed statement indicating the date of separation AND two official documents (e.g. copy of lease, utility bill, driver’s license, etc.) verifying the physical address of the absent spouse/parent (no P.O. boxes).
  - [ ] For divorce or legal separation: a copy of the divorce decree or legal separation papers, or a letter from an attorney stating marital status of parties involved.

- [ ] DEATH OF PARENT OR SPOUSE
  
  Your spouse/parent passed away after the FAFSA was completed.

  **Documentation Needed:**
  
  - [ ] Copy of the death certificate or a published newspaper obituary with date of death.
Please put the student’s name and ID number on all attached documents to prevent processing delays.

### DISABILITY OF THE STUDENT/SPOUSE/PARENT(S)

*If you, your spouse or parent(s), if dependent, became disabled since 2019.*

**Documentation Needed:**
- Medical documentation of disability and any benefits received as a result of the disability.
- Workers’ compensation or long-term disability documentation with amounts and duration of payments.
- Income from all sources earned and untaxed for the current calendar year.
- Statement from employer showing earnings for the current year until student/spouse/parent(s) became disabled.

### UNUSUAL, NECESSARY MEDICAL/DENTAL EXPENSES

*Medical and/or dental expenses that were paid out-of-pocket in 2020, 2021 or 2022 (i.e. not what insurance covered or reimbursed) for you, your spouse (if applicable) and/or your parent(s)/sibling(s), if dependent. Only amounts greater than 11% of your IPA for your family size and number in college (Table 4 or 5 in the EFC Formula) will be considered.*

**Documentation Needed:**
- A copy of Schedule A from your 2020, 2021, and/or 2022 income tax return (itemized deductions schedule).
- Copies of canceled checks for out-of-pocket payments and/or receipts of payments.
- A copy of your FSA or HAS account showing payments AND/OR a copy of your medical account listing payments and dates.

### PRIVATE SCHOOL TUITION

*Only elementary/secondary tuition expenses paid for in 2020, 2021, or 2022 will be considered, not college tuition.*

**Documentation Needed:**
- Documentation of tuition paid on letterhead or a bill with the names of the children who attended (fees, books, supplies, etc. cannot be included in this amount). Bills not yet paid will not be considered.
  - Dependent students: tuition paid for siblings only.
  - Independent students: tuition paid for dependent children only.

### 12-MONTH, YET TO COME ESTIMATED INCOME

*If you need to estimate your income for the next 12 months, instead of basing it upon year-to-date, please complete this section with projected amounts and relevant time frames. All numbers must match documentation that you submit. All line items must have supporting documentation as to how you came to that number.*

Some sources of income that you might be expecting to receive could be:
- wages, salaries & tips
- severance pay
- interest and dividend income
- alimony
- business or farm income
- partnership and/or S-corporation income
- capital gains
- pensions & annuities
- Social Security benefits
- retirement
- disability
- rents and royalties
- workers’ compensation
- unemployment
- veteran’s non-education benefits
- deductible IRA/Keogh payments
- public assistance (e.g. SNAP, TANF, Medicaid or SSI, etc.)
- child support
- living and housing allowance for military or clergy
- money received or paid on your behalf by someone else, and
- more.

Please complete all relevant columns (i.e. the individual(s) with the income change) with amounts for the date range given.

<table>
<thead>
<tr>
<th>Income Source</th>
<th>Date Range</th>
<th>Student</th>
<th>Spouse</th>
<th>Parent One</th>
<th>Parent Two</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

TOTAL $  $  $  $
**PARENT IN COLLEGE**

*Parent(s) must be enrolled at least half-time in a degree, certificate, or other program leading to a recognized educational credential at an institution with a PPA under section 487 of the Higher Education Act of 1965, as amended (HEA).*

**Documentation Needed:**

- Verification of enrollment from the Registrar’s Office of the university or college that the parent attends.

---

**ANOTHER SITUATION NOT COVERED ABOVE**

*If your special circumstance is not covered above, please document it as well as you can and forward everything to the Financial Aid Office for further review. Some things we will not consider are things like the loss of windfall income (e.g. lottery, gambling or bonus income), reductions in overtime pay, and expenses related to personal living (e.g. wedding expenses, credit card bills, home mortgage, loan payments, legal expenses, and other discretionary expenses).*

**Documentation Needed:**

- 
- 
- 

---

Professional judgment (PJ) is a process in which financial aid administrators evaluate a student’s situation on a case-by-case basis due to unusual circumstances unique to the student’s family. The evaluation process compares your current situation to the FAFSA year of record. Adjustments to your FAFSA could result in an increase or decrease in EFC and corresponding aid eligibility, but will more accurately reflect your family’s ability to pay in the current academic year (AY). The Financial Aid Office (FAO) is accountable to the U.S. Department of Education (ED) for all adjustments made, and the reason for any adjustment must be relevant to your special circumstance, and be well documented. Students should continue the enrollment process of registration and completing financial aid requirements, and should not wait on the outcome of a PJ before completing these items. Not registering and/or not adhering to payment schedules may result in late fees, loss of housing preference, loss of schedule, etc. Students should regularly check their Webster and EOU email for updates or additional documentation requests.

All submitted documentation becomes part of your official record and therefore cannot be returned. Documents that become part of your Educational Record are protected for privacy under federal law (FERPA).

---

**FAA References:**

- Please refer to the guidance in Dear Colleague Letter GEN-21-02 (GEN-09-05 no longer applies) concerning the use of professional judgment (PJ) for persons who are receiving unemployment benefits in a period of economic hardship.
- FSA Partners Library – Professional Judgment
- NASFAA AskRegs and Reference Desk