

Loss of Income from Work. Complete sections A, B, C, and D on page 3. Period of unemployment: From _____ To _____	
	Layoff. Provide a letter from employer reflecting layoff date and anticipated return.
	Plant closing. Provide a letter from employer reflecting effective date of closing.
	Termination. Provide a letter from employer reflecting date of termination. If this is not available, provide documentation from local unemployment office.
	Disability. Date of disability (mm/dd/yy) _____ Attach medical documentation to substantiate the disability.
	Other. Please specify and provide appropriate documentation.
Loss of Taxable Income. Complete sections A, B, C, and D on page 3.	
	Alimony. Provide court document(s) reflecting date of divorce.
	Unemployment. Provide a letter from the unemployment office reflecting termination date.
	Other. Please specify and provide appropriate documentation.
Loss of Untaxed Income. Complete sections A, B, C, and D on page 3.	
	Social Security. Provide Social Security Administration Notification of Termination of Benefit
	Child Support. Provide a letter or court documentation reflecting termination date of benefits.
	Worker's Compensation. Provide a letter from Bureau of Worker's Compensation reflecting termination date.
	Other. Please specify and provide appropriate documentation.
Divorce or death of spouse. After submitting your FAFSA applying for financial aid, you have divorced or become widowed. Date occurred (mm/dd/yy) _____. Give only your information when completing sections A, B, C, and D on page 3. Attach a copy of the divorce decree or copy of spouse's death certificate and your W-2 forms.	
Separation. Since applying for financial aid, you have separated due to marital difficulty. Date of separation (mm/dd/yy) _____. Current address of spouse: _____ Furnish statement from your attorney reflecting the date you retained his/her services.	
One-time income (i.e. inheritance, moving expense allowance, back-year Social Security payments, or lump sum retirement or IRS distribution). You must attach documentation that identifies source and amount of income and how funds were spent or invested. Complete sections A, B, C, and D on page 3.	
Other Unusual Expenses Paid	
	Medical or dental expenses. Identify medical or dental expenses for the 2011 calendar year that are not covered by insurance and exceeded 10% of your total income. Provide a copy of Schedule A of 2011 IRS Tax Transcript or copies of canceled checks for 2011 and documentation of total amount paid by insurance in 2011.
	Elementary and secondary education paid. You paid for elementary, middle and/or high school tuition in the 2011 calendar year for dependents in your family. Provide a letter from the school stating amount you have paid for tuition. Identify the dependent(s) by name(s).

- A. Report all income you have actually received from January 1, 2012 through today. Then estimate all income you expect to receive through December 31, 2012.

YOU MUST ATTACH DOCUMENTATION OF ALL INCOME (FORM (A)). Documentation could include recent pay stubs with recent year-to-date earnings, W-2 forms, a letter from an employer stating your total earnings, an estimate of future income, etc. If submitting this after December 31, 2012, you must submit a copy of your completed 2012 IRS Tax Transcript. **You must also complete the following form:**

Professional Judgment: Student/Spouse Monthly Income Resource Statement 2012

- B. Current asset information:
- Current amount of cash, savings, and checking \$ _____
 (Not including any past financial aid)
- Current value of your real estate / investments \$ _____
 (DO NOT INCLUDE YOUR HOME)
- Current debt on your real estate / investments \$ _____
 (DO NOT INCLUDE YOUR HOME)
- Current value of your farm / business \$ _____
- Current debt on your farm / business \$ _____

Do you materially participate in the operation of the farm? (Circle one): YES NO

- C. Household information:
- | | <u>Name</u> | <u>Relationship to Student</u> | <u>Age</u> | <u>Name of College</u> |
|----|-------------|--------------------------------|------------|------------------------|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ |

D. **CERTIFICATION:** I am requesting that the Pensacola State College Financial Aid Administrator review my circumstances to determine if the reported income may be adjusted for aid awarding purposes due to the above documented circumstances. I am aware this request may take approximately four weeks to review. I understand that **if** a favorable decision is reached, the college Financial Aid office must then submit Electronic Corrections to the U.S. Department of Education Federal Central Processing Service, which will take an additional week. I also understand the decision of the Financial Aid Administrator is not appealable to the U.S. Department of Education (See Student Guide 2012-2013).

I certify that the information provided above is true and complete to the best of my knowledge. I agree to provide documentation to support the information that I have given on this form as required by the Financial Aid office. I also realize that if I do not provide documentation requested, I will not receive Professional Judgment consideration.

 Student's Signature

 Date

**PENSACOLA STATE
COLLEGE**

FINANCIAL AID/VETERAN SERVICES/SCHOLARSHIPS

**Student Estimated Year Income Statement
2012 - 2013**

Student Name	Date	SSN* / STUDENT ID <small>(see note below)</small>
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You have indicated a change in your income in 2011. Please provide the following information:

1. Date employment ceased (if applicable)		
2. Projected income earned by student from 01/01/12 to 12/31/12	\$	
3. Projected income earned by spouse 01/01/12 to 12/31/12	\$	
4. Student's projected taxable income (other than earned wages) expected from 01/01/12 to 12/31/12 (unemployment compensation, interest income, etc.)	\$	
5. Spouse's projected taxable income (other than earned wages) expected from 01/01/12 to 12/31/12 (unemployment compensation, interest income, etc.)	\$	
6. Projected non-taxable income from 01/01/12 to 12/31/12 from the following sources:		
A. Deductible IRA and/or Keogh payments	\$	
B. Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings). Include untaxed portions of 401(K) and 403 (B) plans.	\$	
C. Social Security Benefits	\$	
D. Child Support	\$	
E. TANF / Welfare Benefits	\$	
F. Untaxed portions of pensions (excluding "rollovers")	\$	
G. Other projected untaxed income and benefits (explain and provide expected amount(s) to be received in 2012 such as worker's compensation, foreign income exclusion, etc.)	\$	

Please provide copies of written documentation that support the information that you have provided.

CERTIFICATION

I (We) certify that information listed above is a complete and accurate breakdown of all expected income, taxed and untaxed, for the calendar year 2012. **I further certify that if any information of the above information changes, I will notify the Financial Aid office in writing of the changes.**

Student Signature _____ Date: _____

Spouse Signature _____ Date: _____