Professional Judgment Request Form, 2026-2027

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.

PERSONAL INFORMATION

Student Name | Student ID Number or SSN | Preferred contact email

INCOME INFORMATION

My projected 2025 income is _____ my 2024 income that I reported on the FAFSA.

	Student	Father	Mother
About the same as	☐	☐	☐
Significantly less than	☐	☐	☐
Significantly more than	☐	☐	☐

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 2025 income is: $_____
Explanation:

_____

_____

Circle one: Student / Father / Mother
My projected 2025 income is: $_____
Explanation:

_____

_____

MARK THE BOXES THAT APPLY AND SUBMIT CORRESPONDING DOCUMENTATION

☐ **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: $_____ 2025: $_ _____

Documentation required (<u>one</u> of the following):

- A copy of Schedule A if you included medical expenses in your itemized deductions on the 2024 or 2025 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 2024.

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☐ **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 2024: $_____ (Do not include other fees—only tuition)

Documentation required:

- Receipt (or letter) from the school showing amounts paid in 2024 (Jan – Dec). Please label unclear bills.

☐ **Parent enrolled in college at least half time in a degree-seeking program** – The parent must be enrolled in 2024 or 2025.

Name of parent enrolled_____
College/university name_____
Status of parent enrollment ☐ Full time ☐ Half time ☐ Other _____
Amount of tuition paid out-of-pocket 2024: $_____ 2025: $_____

Documentation required:

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

☐ **Other children enrolled in college at least half time in a degree-seeking program** – Other dependent students enrolled at the same time as child at Northwestern..

Name of student(s) enrolled_____
College/university name_____
Status of enrollment ☐ Full time ☐ Half time ☐ Other _____
Amount of tuition paid out-of-pocket not including loans: 2026-26: $ _____

Documentation required:

- Bills or other statements from school showing amount paid for tuition, room and board
- Please state in explanation at the bottom of the form why this creates a financial hardship for your family

☐ **Traditional IRA converted to Roth IRA in 2024** – Amount converted in 2024: $_____

Documentation required:

- Copy of 2024 Federal 1040 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 2024: $_____

Documentation required:

- A copy of Form 1099-R, if applicable
- A copy of the 2024 1040 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.

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☐ **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 this request is based on student's financial situation)

Parent Signature _____ Date _____
(Required if this request is based on parent's financial situation)

Office use only:

Original SAI $ _____ Adjusted SAI $ _____ PJ date _____

PJ completed by Eric Anderson _____ Method of communicating results _____

PJ notes _____

Reviewed by: _____ Date: _____

Mail to: Northwestern College
Financial Aid Office
101 7th St SW
Orange City, IA 51041

Email as attachment to finaid@nwciowa.edu
(Please do not send tax documents via email)

Fax to 712-707-7165

Explanation of situation: