2013-2014 Professional Judgment for Special Circumstance Form

Student Name: ________________________________________ ID__________________

Phone: (   ) __________________ Email: ______________________________________

On your 2013-2014 FAFSA, you told us that you think you have a special circumstance and are unable to provide parental information. At this time, your FAFSA is currently considered incomplete. Please review the following information:

1. Under Federal law, only your financial aid administrator has the authority to decide whether or not you must provide parental information on your FAFSA. The administrator’s decision is final and cannot be appealed to Federal Student Aid.

2. Students that do not have a special circumstance and are unable to provide parental information normally do not qualify for federal student aid.

SECTION A: Complete this section if your parents are NOT willing to provide their information (Please complete Section B).

By marking the box below, your parent(s) agree to the following:

☐ I am unwilling to provide parental information on FAFSA as required by the Department of Education and

☐ I do not and will not provide any financial support for my child.

**Please indicate the date that you have ended support for your child: ______/_______/_______.

SECTION B: Applying for an unsubsidized loan only.
There is an exception that allows a student to submit the FAFSA without parental information and receive an Unsubsidized Stafford Loan. The amount offered will be according to your grade level. If you wish to proceed with this option, please check the box below. Please note that you will not be eligible to receive Pell Grants.

☐ I am submitting my FAFSA to apply for an unsubsidized loan only.

SECTION C: Complete this section if you will be providing your parental information.

☐ I will provide parental information. (Please make sure you visit with a financial aid advisor to determine what additional documents you will be required to submit to complete your FAFSA).

Certifications and Signatures
By signing this form, we certify that all information reported on this worksheet is complete and correct to the best of our knowledge. We authorize the Office of Student Financial Assistance to make corrections necessary to resolve any discrepancies found. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student_________________________________      Parent__________________________      Date_____/_____/_______