RRAAREQ: PJS25
SCAN: Professional Judgment - PJ

FRIENDS UNIVERSITY
Office of Financial Aid

Financial Aid Professional Judgment for Special Circumstances Request 2025-2026

Friends University Office of Financial Aid recognizes the formula used to calculate your Student Aid Index (SAI) may not accurately reflect special circumstances for individual students and/or families. The Financial Aid Director and Assistant Director have the authority to take into consideration unique family circumstances not reflected on the Free Application for Federal Student Aid (FAFSA). If you feel you have **special circumstances** (see list on the following page) that affect the income or data reported on your FAFSA, please submit a Professional Judgment Request and include proper documentation of your circumstance as listed. A review of your situation does not guarantee an adjustment in your financial aid eligibility. Failure to submit appropriate documents in a timely manner will delay the processing of your financial aid. Include your Student ID on all documents. *Please check your student email for correspondence from our office.*

STUDENT INFORMATION:

Student ID: N00_____ Date of Birth: _____

First Name: _____ Middle: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone #: ( ) _____ Email: _____@student.friends.edu

(Friends Financial Aid will only respond to your student email)

The following documents must be submitted with each Professional Judgment Request. **You must submit ALL documentation listed for the specific circumstance you are requesting.** Additional documentation not listed may also be required. Please complete Steps 1, 2 & 3 on this form before submitting this form for review.

Verification Documents	
Dependent Student	**Independent Student**
1. 2025-2026 Verification Worksheet	1. 2025-2026 Verification Worksheet
2. Student 2023 & 2024 IRS Tax Return Transcript Signed/Dated	2. Student 2023 & 2024 IRS Tax Return Transcript Signed/Dated (and spouse's if applicable)
3. Parent 2023 & 2024 IRS Tax Return Transcript Signed/Dated	3. Student 2023 & 2024 W-2 Forms (and spouse if married)
4. Parent 2023 & 2024 W-2 Forms	

Step 1: Please identify the special circumstance(s) from the list below and check the applicable box(es) for the person(s) affected. * **Additional documents may be requested.***

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Special Circumstances	Explanation	Person(s) Affected	Required Documentation
Employment Change	Student/spouse and/or your parent(s) had a significant loss of income in 2023, 2024 and/or 2025 due to a period of unemployment, a change of job or going from full-time to part-time employment. Loss of employment or substantial reduction in income from work must have lasted at least 6 weeks.	☐ Student ☐ Spouse ☐ Parent	• 2025-26 Verification Worksheet • 2023 and 2024 IRS Tax Return Transcripts, W-2s and/or 1099 statements • Unemployment payment record • Letter from employer(s) on letterhead, certifying the last date of employment or reduction of work hours or pay rate • Most recent paystubs • Personal letter of explanation
Income Loss	Student/spouse and/or your parent(s) earned income in 2022 but have not been able to earn income in 2023, 2024, 2025 because of a disability or natural disaster that occurred in 2023 or 2024.	☐ Student ☐ Spouse ☐ Parent	• 2025-26 Verification Worksheet • 2023 and 2024 IRS Tax Return Transcripts, W-2s and/or 1099 statements • Statement from agency with effective dates of benefits • Most recent paystubs • Personal letter of explanation
Benefit Loss	Student/spouse and/or parent(s) received unemployment compensation and/or untaxed benefit in 2023 or 2024, but have completely lost the benefit in 2023, 2024 and/or 2025. The untaxed income or benefit must be from a public or private agency, from a company or from an authorized individual due to a court order.	☐ Student ☐ Spouse ☐ Parent	• 2025-26 Verification Worksheet • 2023 and 2024 IRS Tax Return Transcripts, W-2s and/or 1099 statements • Statement from agency with effective dates(s) of loss/cancellation of benefits • Personal letter of explanation
Divorce/ Separation	Student or parent separated or divorced after filing a FAFSA	☐ Student ☐ Spouse ☐ Parent	• 2025-26 Verification Worksheet • 2023 and 2024 IRS Tax Return Transcripts, W-2s and/or 1099 statements • Copy of divorce decree. If not legally separated, proof of different addresses (utility bill, lease indicating period of separation). • Lease with dates that include the period of separation • Child support received or paid • Personal letter of explanation
Death	Death of spouse or parent after filling a FAFSA	☐ Student ☐ Spouse ☐ Parent	• 2025-26 Verification Worksheet • 2023 and 2024 IRS Tax Return Transcripts, W-2s and/or 1099 statements • Copy of death certificate • Social Security Benefits (if applicable) • Most recent paystubs • Personal letter of explanation
Exceptional Medical/Dental Expenses	An unusually high amount of medical/dental expenses paid out of pocket during 2023 (does not include payments made by insurance)	☐ Student ☐ Spouse ☐ Parent	• 2025-26 Verification Worksheet • 2023 and 2024 IRS Tax Return Transcripts, W-2s and/or 1099 statements • Medical/dental expenses should be claimed on a federal tax return as medical deductions • Personal letter of explanation

Step 2: For the person(s) affected by the special circumstances, please provide a detailed personal letter of explanation of the changes that occurred. The statement must include:

RRAAREQ: PJS25
SCAN: Professional Judgment - PJ

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- ***Employment change*** → Statement should explain the dates of employment, time periods in which reduction or loss of wages occurred
- ***Income/Benefits Loss*** → Statement should explain the dates income/benefits began and when it ended
- ***Divorce/Separation*** → Statement should include the date of the divorce or separation. It should also include amounts and dates on which any additional income is to be received. This may include alimony, child support, etc.
- ***Exceptional Medical/Dental expenses*** → Statement should include amounts paid for medical/dental expenses that were NOT covered by medical insurance

PLEASE PRINT your statement on the space provided below legibly and clearly or TYPE your statement and attach it to this form. Your signature/date will be required on all typed statements.

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SCAN: Professional Judgment - PJ

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Step 3: Certification

All of the information provided in this appeal is true and complete to the best of my knowledge. If asked by an authorized official, I agree to provide additional documentation for the information given on this form or any documentation submitted for the Professional Judgment (PJ). I understand that the PJ form submitted without required supporting documentation and letter of explanation will not be reviewed. I also understand that submission of a PJ form does not guarantee that my financial aid will be adjusted and that I am responsible for any outstanding balance owed to the university.

Student's Signature: _____ Date: _____

Parent's Signature (If Applicable): _____ Date: _____

Typed signatures cannot be accepted.

If you have any questions, please call (316) 295-5100. You may submit this form in person, fax (316) 295-5703 or mail. Please be sure and encrypt any email that contains personal identifiable information (PII). We are unable to accept PII that has not been encrypted.

If you purposely give false or misleading information, you may be fined $20,000, sentenced to jail or both.

FOR OFFICE USE ONLY:

Date PJ Received: _____ **Date PJ Reviewed:** _____

Reason for PJ: Employment Change _____ Income Loss _____ Benefit Loss _____

Divorce/Separation _____ Exceptional Dental/Medical Expense _____

Death of Parent/Spouse _____ Other _____

PJ Special Circumstance Results:

Approved _____ Denied _____

_____ _____

Reviewed by: Print Name and Title of Financial Aid Staff Date