



**2008-2009
Gavilan College – Financial Aid Office
Student Request for Professional Judgment**

If your parent has had a change in income for 2008 which was not reflected on the 2008-09 FAFSA (such as loss or change of employment, divorce, etc.) and/or incurred major medical/dental expenses, please complete this form with your parent(s). Note that you will need to attach supporting documentation with this form. Supporting documentation may be, for example, a latest check stub or medical payment recipients. The Financial Aid Office will notify you if the income change was approved. If approved, we will make the necessary changes to your income information on the 2008-2009 FAFSA.

Student Information

Name _____ SS# _____ - _____ - _____

Change in income is for the following:

__ Student __ Student's Spouse (Name): _____

Income for 2008 is projected to be (Jan – Dec 2008)

Student's: Income from work _____ Untaxed income & benefits: _____

Source: _____

Spouse's: Income from work _____ Untaxed income & benefits: _____

Source: _____

Medical/Dental Expenses for 2008

List amount paid in 2008: Medical/Dental \$ _____ Attach copies of receipts.

Indicate as of when these changes have occurred and the reason for projected income change for 2008. (Example: unemployment, divorce, separation, death of spouse, disability, or loss of benefits). Attach documentation of these changes.

We, the undersigned certify that all information submitted on this form and attached documentation are true and correct. We understand that **the Secretary of Education has the authority to verify information reported on this form with the Internal Revenue Service and other federal agencies.** If you purposely give false or misleading information, you may be fined \$20,000, sent to prison or both.

Student's Signature _____ Date _____

Spouse's Signature _____ Date _____

For Financial Aid:

Previous Income: _____ Changed to: _____

Previous EFC: _____ Current EFC: _____

Comments: _____

Signature: _____ Date: _____