

Mid-America Christian University Professional Judgment



2026-2027

Name: _____

SSN: _____

Phone: _____

Email: _____

The Federal Government requires that you and, if applicable, your parents or spouse complete the 2026-2027 Free Application for Federal Student Aid using income information from the 2024 tax year. However, a school has been given the discretion by the government to review a student’s situation, as needed, and exercise professional judgment when special circumstances arise that affect that information. If selected, Verification must be completed before a Professional Judgment can be considered.

At MACU, we will only consider this option if the anticipated household income for 2026 is going to be at least a 15% decrease from the 2024 income and is due to one of the conditions below.

The following steps must be completed in order for consideration:

- Write a detailed letter of appeal explaining your special circumstance and submit it with this form.
- Place a check mark beside any situation that may apply as listed below.
- Submit supporting documentation for each item you checked.

CONDITION A

A student, student’s spouse, or a dependent student’s parent (*circle one*) whose 2024 income from work was reported but has been unable to pursue the normal income producing activities for at least ten weeks in 2026 because of the following:

_____ Job loss/reduction of employment or self-employment (voluntary change in employment will not be considered unless medically necessary)

_____ Death of a spouse or parent

_____ Other (Please describe): _____

Note: Additional documentation may be requested upon review of your professional judgment appeal form.

CONDITION B

A student, spouse, or parent benefited from a one-time income distribution in 2024 such as an inheritance, moving expense allowance, etc...

Source of income: _____ Amount received in 2024: \$ _____

Note: Additional documentation may be requested upon review of your professional judgment appeal form.

CONDITION C

Due to divorce of spouse or parent (*circle one*), the student's household income for 2026 will be less than 2024. Date of status change: _____

Please provide the following:

- A copy of you or your parent's 2024 federal income taxes (IRS Tax Transcript)
- A copy of you or your parent's 2024 W2(s) so we can separate income if applicable
- A copy of you or your parent's divorce decree

READ AND SIGN:

Certification: All of the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form.

Applicant must **always** sign. A parent must sign if information has been given about parents.

Applicant Signature: _____ Date: _____

Parent Signature: _____ Date: _____

RETURN THIS FORM TO THE FINANCIAL AID OFFICE AT MACU

Email: financialaid@macu.edu

Fax: 405-692-3204

FOR OFFICE USE ONLY:

_____ **Approved** _____ **Denied**

Reviewed By: _____

_____ **Old EFC** _____ **New EFC**

Date: _____

Rationale: