## PITTSBURG STATE UNIVERSITY Petition to Apply for Professional Judgment 2023-2024

23-24 PJ

Date

NAME	Please complete in pen and
PSU STUDENT ID	return to: Pittsburg State University Office of Student Financial Assistance
ADDRESS	1701 S. Broadway, Pittsburg, KS 66762 (620) 235-4240 or (800) 854-7488
CELL PHONE NO	FAX: (620) 235-4078 Email: finaid@pittstate.edu
	g with the following documentation to the Office of Student Financial Assistance, as well as any additional information feneral Basis of Appeal pertaining to your petition:
Complete Documenta	<b>Explanation</b> of the special circumstances that affect your financial situation <b>tion</b> supporting your explanation of the circumstances <b>Tax Return Transcript and all schedules</b> filed for Student (and Parent/Spouse if applicable) <b>cion Form</b>
	reporting changes in your financial circumstances. Review of your situation does not guarantee an adjustment to be reviewed to more accurately portray your financial situation.
Please write the student's na will be notified with the res	ame on all attached documentation. Submit all information together to satisfy all requirements listed above. You alts of your appeal.  GENERAL BASIS OF APPEAL
Loss of Income/I	
■ Co ■ Fo	py of your/your parent's 2021 <u>and</u> 2022 federal tax return transcripts and schedules filed. r Social Security Benefits or Child Support Payments decreased or ceased, provide an official letter/court document scribing the termination of benefits and the amount received during 2021.
	e—Parent must be seeking a degree/certificate at a college/university and enrolled at least half-time.  mplete Parent Enrollment Certification Form (found at <a href="http://www.pittstate.edu/financial-aid/forms.tml">http://www.pittstate.edu/financial-aid/forms.tml</a> )
	on of Parents (or Student from Spouse) py of court order – final divorce decree, legal separation agreement
Death of Parent Co	(or Spouse) py of death certificate
<ul><li>Ca</li></ul>	al Costs Paid in 2021 that was not covered by insurance.  nceled checks verifying payment made in 2021  ntout from pharmacy/doctor/dentist detailing expenses paid by student/parent
Secondary/Elem	entary Tuition Expenses (Paid in 2021) nceled checks verifying payment made in 2021 ling statement from the school
	ne ring 2021, statement detailing amount, type and date of receipt tement indicating how funds were invested/spent – include paid receipts
■ Sta the	ent Must Be Enrolled Full-Time (12 hours for undergraduates and 9 hours for graduate students per semester) attement listing number of dependents for which you, the student, will pay child care during 2023-2024 academic year, total amount of child care expenses, and name and complete dress of child care provider (REQUIRED)
Excessive Mileag	e tement of where you commute from and how many days a week you attend PSU.
Other:	

Date

Spouse/Parent Signature

Student Signature