

S _____

2025-2026 Professional Judgment (PJ) Request

Student Name: _____ Phone #: _____

Student email: _____@student.cccs.edu

Student Signature: _____ Date: _____

Red Rocks Community College understands that circumstances can occur that may affect your ability to pay for college. A request for Professional Judgment (PJ) is appropriate when you, your spouse, or a dependent student's parent(s) experience a change in the income that was originally reported on the FAFSA, or when there are additional costs beyond those represented in RRCC's annual cost of attendance.

Please note: Review of this request does not guarantee that you will receive additional financial aid. Further, you are responsible for paying your tuition balance by the deadline and we recommend making payment arrangements while your request is being considered.

Your financial aid application must be received by June 30, 2026 and this request must be submitted while you are currently enrolled in order for it to be considered.

All Petitioners Must Complete:

A brief, typed statement that explains the reason(s) for the request, and

Supporting documentation as proof of the change in income or additional costs, including documentation of any unemployment or other benefits received, and

This completed form.

The above listed items must be submitted with this form in order for your request to be considered. We recommend meeting with a Financial Aid Advisor to ensure your request is complete. Once reviewed, additional documentation may be required.

Please allow up to 4-8 weeks for your request to be reviewed.

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Reason for the request (please mark all that apply):

☐ **Death of parent or spouse.** Provide the following:

- Name of deceased individual: _____
 - Relationship to student: _____
- Copy of death certificate
- Most recent W-2s for student or parent whose income information is to remain included on the FAFSA

☐ **Other:**

- Paid medical bills in excess of 11% of your (and/or your parent(s)) 2023 adjusted gross income
 - Provide IRS Schedule A
- Additional costs associated with having a disability, etc.
 - Provide IRS Schedule A
- Adjustment to household size originally reported on the FAFSA (explain and document reason for request)

☐ **Reduction in income or earnings.** The following documents are required of anyone asking to have their income re-evaluated (for example: loss of employment, lump sum distribution from retirement, etc). Please explain if you are unable to provide any required documents:

- Signed, dated statement from previous employer(s), on employer letterhead, indicating the date the loss of income occurred
- If requesting your FAFSA to be updated from 2023 tax information to 2024 or 2025 tax information, provide a copy of the most recent tax return to be considered
- If currently employed: 3 most recent paystubs from all current employers. If you are submitting this request after January 1, 2026 provide the 2025 signed 1040, federal tax return transcripts, or W-2s from all jobs held in 2025.
- If reporting a loss of military income, submit final leave and earnings statement
- Documentation of unemployment and any other benefits received
- Please note - if self-employed, you may be required to file taxes before this request can be considered.

I would like the following individual's income reviewed (select all that apply):

☐ Student ☐ Student's Spouse ☐ Both Parents (dependent student's only)

☐ Only one Parent - Name of Parent: _____

(Please note, W-2s from the other parent may be requested if they filed a joint return)

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Timeline of employment: Provide the dates of all employment for the entire years of 2023, 2024, 2025, & 2026 jobs, for each individual requesting a review. Attach an additional sheet of paper if necessary.

Name: _____
Dates of Employment: _____

Employer: _____

Name: _____
Dates of Employment: _____

Employer: _____

Name: _____
Dates of Employment: _____

Employer: _____

Estimation of Income: If currently employed, use the 3 most recent paystubs from current employer(s) to determine current year-to-date gross income (before taxes). For jobs that have ended in 2025 or 2026, use the final paystub.

Name: _____
Pay Period Date/s: _____ - _____

Employer: _____
Gross Income each pay stub: \$ _____

Name: _____
Pay Period Date/s: _____ - _____

Employer: _____
Gross Income each pay stub: \$ _____

Name: _____
Pay Period Date/s: _____ - _____

Employer: _____
Gross Income each pay stub: \$ _____

Total year-to-date earnings for 2025 as of today's date: \$ _____
If submitting after January 1, 2026: include year-to-date earnings for 2026: \$ _____

Did the individual(s) being reviewed receive a payment from a retirement account during 2023? ☐ Yes ☐ No

- If yes, was this a one-time payout? ☐ Yes ☐ No
- Are there funds remaining in the retirement account? ☐ Yes ☐ No
- If yes, explain and provide the total amount being accessed during 2025 and/or 2026:

Please note that if you are self-employed, IRS forms 1099 are required in lieu of W-2s.
If your current earnings are inconsistent or consist of contract work, you may be required to file taxes for the current or most recent tax year before a determination can be made.