

Bishop State Community College
Professional Judgment Request Form

A student requesting professional judgment for either Dependency override or Loss of income **must do so in writing and be specific** as to what the student/parent is requesting the financial aid administrator to do. Each professional judgment request must be supported with adequate documentation.

Name of Student: _____ Student I.D. Number: _____

(Check one) Request is for: Dependency Override: _____ Loss of Income: _____

For dependency override the student must supply the following documentation:

1. Copy of death certificates of parent(s), if parent(s) is dead.
2. Notarized statements from at least 2 of the following who know the circumstances of the student. A high school counselor, a Pastor or social worker. Statements must be on agency letter head.
3. Statement of who provides financial support for the student and how much was provided for the student in 2009.

For loss of income of student or parent, the following supporting documentation is required:

1. Termination notice of student and/or parent.
2. Last pay stub of the student and/or parent.
3. Verification of unemployment benefit received.

Request for Professional judgment is: Approved: _____ Denied: _____

Reason for approval or denial: _____

Signature of Financial Aid Administrator: _____ Date signed: _____