



# 2007-2008 Request for Professional Judgment Florida International University

If you have extenuating circumstances which you believe warrant a re-evaluation of your eligibility for financial aid, you must complete this form. **INCOMPLETE REQUESTS WILL BE RETURNED. ADDITIONAL DOCUMENTATION MAY BE REQUIRED; IF ADDITIONAL DOCUMENTATION IS REQUESTED: YOU HAVE 30 DAYS TO SUBMIT THE DOCUMENTATION BEFORE THE PROFESSIONAL JUDGMENT REQUEST WILL BE CONSIDERED INACTIVE.**

## A. STUDENT INFORMATION

Name (Print) \_\_\_\_\_ Panther ID \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

## B. CHECK ALL THAT APPLY

**NOTE:** If you are a dependent student, provide documentation for both yourself and your parent(s). If you are married, provide documentation for both yourself and your spouse.

All forms are available online at: <http://www.fiu.edu/orgs/finaid/required.htm>

### IMPORTANT NOTICE

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**Professional Judgment for the Loss of Employment category will be accepted for processing 6 (six) months AFTER the initial day of loss of employment. Loss of employment documents received before the specific time will be returned unprocessed.**

\_\_\_\_ A. **Involuntary loss of employment:** (e.g. termination, lay off)  
(Check box that applies)  
{ } Student { } Spouse { } Mother/Step-mother { } Father/Step-father

**Required documentation:**

- \_\_\_ Employment Verification form (<http://www.fiu.edu/orgs/finaid/required.htm>) for all jobs held in 2007 for student and/or parents.
- \_\_\_ Unemployment compensation statement showing amount of benefits received/to be received in 2007.
- \_\_\_ 2006 SIGNED student taxes and W-2's (If married, provide spouse's taxes and W-2's)
- \_\_\_ 2006 SIGNED parent taxes and W-2's

\_\_\_\_ B. **Reduction or loss of untaxed income or benefits:** (e.g. unemployment compensation, social security, AFDC, etc.)  
(Check box that applies):  
{ } Student { } Spouse { } Mother/Step-mother { } Father/Step-father

**Required documentation:**

- \_\_\_ Statement from agency (SSI, unemployment, etc) reflecting reduction/cancellation and benefits paid to date.
- \_\_\_ 2006 SIGNED student taxes and W-2's (If married, provide spouse's taxes and W-2's)
- \_\_\_ 2006 SIGNED parent taxes and W-2's

\_\_\_ C. **Divorce/Separation:**  
(Check all that apply)  
 Divorce  Separation of:  Student  Parents

**Required documentation:**

- \_\_\_ Divorce decree or completed Statement of Separation form  
(<http://www.fiu.edu/orgs/finaid/required.htm>)
- \_\_\_ 2006 SIGNED student taxes and W-2's (If married, provide spouse's taxes and W-2's)
- \_\_\_ 2006 SIGNED parent taxes and W-2's

\_\_\_ D. **Death of:**  
(Check box that applies)  
 Spouse  Mother/Step-mother  Father/Step-father

**Required documentation:**

- \_\_\_ Copy of death certificate
- \_\_\_ 2006 SIGNED student taxes and W-2's (If married, provide spouse's taxes and W-2's)
- \_\_\_ 2006 SIGNED parent taxes and W-2's

\_\_\_ E. **Extraordinary medical expenses NOT COVERED BY INSURANCE:** (Extraordinary medical expenses must be in excess of 7.5% of adjusted gross income and not claimed as a deduction on income taxes)

(check box that applies):

Student  Spouse   Mother/Step-mother  Father/Step-father

**Required documentation:**

- \_\_\_ 2006 SIGNED student taxes and W-2's (If married, provide spouse's taxes and W-2's)
- \_\_\_ 2006 SIGNED parent taxes and W-2's
- \_\_\_ Schedule A
- \_\_\_ Medical/dental receipts of payment, cancelled checks or payroll check stubs of health insurance premiums paid in 2005.

\_\_\_ F. **Dependency Override:** (e.g. due to unusual circumstances, such as an abusive family environment, parental neglect or parental abandonment)

**Consult a Financial Aid advisor for specific required documentation.**

\_\_\_ G. **Other**

If none of the above-listed conditions provided apply to your situation, please provide a written, signed statement explaining your extenuating circumstances for 2007 . You must submit supporting documentation to verify the condition and verification of all income for the 2006 and 2007 calendar year.

**C. SIGNATURES**

All of the information on this form is true to the best of my knowledge and I have attached the appropriate supporting documentation.

Student \_\_\_\_\_ Panther ID \_\_\_\_\_ Date \_\_\_\_\_

Spouse \_\_\_\_\_ S.S.# \_\_\_\_\_ Date \_\_\_\_\_

Mother/Step-mother \_\_\_\_\_ S.S.# \_\_\_\_\_ Date \_\_\_\_\_

Father/Step-father \_\_\_\_\_ S.S.# \_\_\_\_\_ Date \_\_\_\_\_

**FOR FINANCIAL AID USE ONLY**

Approved  Denied

Financial Aid Signature \_\_\_\_\_ Date \_\_\_\_\_