

| Session: 2131 | SOCIAL SECURITY NUMBER | | |
|----------------|-------------------------|--|--|
| Track Code: PJ | | | |
| | MPC STUDENT'S ID NUMBER | | |

2013—2014 Professional Judgment

The Professional Judgment is required if you need to request a change in income status, dependency status,

| Last Name | First Name | MI | Other Names Used at MPC (Last, First, MI) |
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APPLICATION FOR PROFESSIONAL JUDGMENT

The Higher Education Act of 1992 allows financial aid administrators to make professional judgment decisions for special or unusual family or student circumstances. These circumstances must be documented. Circumstances requiring professional judgment decisions must be analyzed on a case by case basis. The financial aid administrator may treat a student with special circumstances differently than the strict application of the methodology would otherwise permit.

SECTION A: REASON FOR APPLICATIONI am applying for Professional Judgment because...

| 1. My current year income is less than the previous year income2. I have high doctor bills that I have paid during the current year3. I would like to be considered as an independent applicant4. Selective Service5. Other (please state): | |
|---|----------|
| SECTION B: DESCRIPTION OF REQUEST | |
| Please provide a brief description of your request for a Professional Julease use Section G on page 4.) Please note that if no further document evaluation may take up to two weeks to process. | <u> </u> |
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SECTION C: DECREASED INCOME

| My current year income is less than the previous year's income. |
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| To apply for a Professional Judgment because your current year income is less than your application year income, you must provide Student Financial Service with the following documentation: |
| 1. Complete the Dependent or Independent Verification Worksheet. |
| 2. Signed copy of student's and/or parents' and/or spouse's 2012 tax returns or IRS tax transcripts, and |
| 3. Student's and/or parents' and/or spouse's 2012 W-2 tax transcript(s) or form(s) , and |
| 4. The last pay stubs from all of the companies for which you were employed during the year and/or, 5. Proof of all unemployment compensation received during the fiscal year. Including the start date/dates when the unemployment began and/or, |
| 6. Proof of how much disability compensation you may be receiving during the year and/or , |
| 7. Signed Passport to Services if you have Department of Social Services income. |
| 8. All of the above for other members in the family who's income is included in your application. (Example: spouse, children, parents etc.) |
| SECTION D: HIGH MEDICAL BILLS PAID |
| I have high medical/doctor bills that I have paid during the current year. |
| To be considered for Professional Judgment based on high medical expenses <u>paid</u> , you must have <u>paid</u> more than \$4,000 out of pocket in the current fiscal year. The key here is that the medical expenses must have been paid, not just accumulated. Payments made by insurance companies do not count. |
| 1. Bring copies of all medical payments made in an orderly way so it is clear who the payment was made to, how much was paid and when. (A statement showing payments for the current fiscal year is sufficient). |
| 2. A cover sheet summary of the documentation that is being submitted |
| SECTION E: FINANCIAL INDEPENDENCE |
| I would like to be considered as an independent student. |
| To be considered an independent student a student cannot have had contact with both parents for the last two years or the student has been removed from the family. The following are examples that would qualify for independent student consideration: a. There is abuse in the family and the student has been removed or has a restraining |
| order against their parents. b. The student's parents are both dead. |
| c. The student's parents are incarcerated. |
| d. The student has had not contact with the parents for two years. e. The student's parents reside in a foreign country and there is no dependence upon the parents. |
| 1. The student will need to bring a copy of the restraining order or court order removing the student from the family and for |
| from the family and /or, 2. A letter from an attorney, minister, or public official stating the student has no contact with the family for the last two years and/or, 3. Proof that the parent/s are incarcerated and/or, |

SECTION F: STATEMENT OF EXPENSES AND RESOURCES

Please itemize both your monthly and yearly expenses and list all sources of income from January 1, 2013 to

| EXPENSES | Per Month | Per Year |
|---|-----------|----------|
| Rent or Mortgage Payment | | |
| Utilities | | |
| Insurance (include home, apartment, auto) | | |
| Food | | |
| Transportation (car payments, gas, repairs) | | |
| Medical/Dental | | |
| Clothing | | |
| Recreation | | |
| Total Expenses | \$ | \$ |

| RESOURCES | Per Month | Per Year |
|-------------------------------------|-----------|----------|
| Income from employment | | |
| Income from Work-Study employment | | |
| Interest and dividend income | | |
| Social Security benefits | | |
| AFDC | | |
| Unemployment benefits | | |
| Food stamps | | |
| Disability benefits | | |
| Child support | | |
| Other income (specify source below) | | |
| 1. | | |
| 2. | | |
| Total Resources | \$ | \$ |

SECTION G: ADDITIONAL INFORMATION

| Please use this section to present additional in | nformation relevant to ye | our professional judgment application. |
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| By signing below, I am certifying that all information knowledge. If you purposely give false or mis or both. | | |
| Student's Signature: | | Date: |
| SECTION H: FOR STUDENT FINANC | CIAL SERVICES USE | ONLY |
| Comments: | | |
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| Professional Judgment Approved | Professional Judg | gment Denied |
| Staff Signature | Name | Date |