

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 typed form 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 certificate of parent, if parent(s) deceased.
2. Notarized statements from at least 2 of the following who knows about the student's circumstances.
A High School counselor, Pastor or Social Worker. Statements must be on agency letterhead.
3. A statement of who provided living expenses during the whole "Year" of 2017.

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.
4. Income for 2018.

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

Reason for approval or denial:
