

REQUEST FOR PROFESSIONAL JUDGMENT

Use this form to provide information regarding a negative change in your financial situation from 2009 to 2010. Dependent students should provide information for their parents and themselves; independent students should provide information for their spouse and themselves.

Name _____ Student ID Number _____

Home Phone _____ Work Phone _____

I am applying for professional judgment because of:

- A change in my parent's circumstances
- A change in my spouse's circumstances
- A change in my circumstances

Due to:

- A loss of a job or benefits
- Separation or divorce
- Death
- Other

Have you requested a Professional Judgment with McMurry in prior semesters?

(Y/N) _____ If yes, when? _____

Check the circumstance that best describes the change:

Loss of a job or benefits in 2009. Indicate the last date of employment _____

Total loss of unemployment compensation or other untaxed income received in 2009.
Type untaxed income _____ Weeks in 2009 _____ Beginning Date _____

Separation or divorce subsequent to Federal Aid application.
Date of separation or divorce _____

Death subsequent to Federal Aid application.
Date of death _____

Please explain special circumstances:

**COMPLETE THE INFORMATION ON THE BACK OF THIS FORM
2009 Income Estimate**

Parent(s)

Estimated 2009 Adjusted Gross Income _____
(Include wages, interest, business or farm income)
2009 Father's income from work _____
2009 Mother's income from work _____
2009 Unemployment benefits _____
2009 Social Security benefits _____
2009 AFDC or ADC _____
2009 Untaxed military benefits _____
(Include housing, BAS and BAQ)
2009 Earned income credit _____
2009 Other untaxed income and _____
benefits (including child support received)

Student and Spouse

Estimate 2009 Adjusted Gross _____
Income
2009 Student's income from work _____
2009 Spouse's income from work _____
2009 Unemployment benefits _____
2009 Social Security benefits _____
2009 AFDC or ADC _____
2009 Untaxed military benefits _____
2009 Earned income credit _____
2009 Other untaxed income and _____
benefits

Certification

All information contained on this form is true and correct to the best of my knowledge.

Student's signature _____ Date _____
Spouse's signature _____ Date _____
Father's signature _____ Date _____
Mother's signature _____ Date _____

*Request not considered until all documentation has been received.

Office Use Only

Action _____ Date _____

Comments:

