



REQUEST FOR PROFESSIONAL JUDGEMENT - OTHER

Student Name: _____ ID: 770- _____

Permanent Street Address: _____

City/State/Zip: _____

Permanent Phone #: (____) _____ - _____

Academic Year: _____ - _____

Type of Professional Judgment:

_____ Other _____

- **Your Request will need to include the following:**
 - **Most recent pay stubs for student (spouse or parent(s) if applicable)**
 - **Copies of documentation to support your circumstance**
 - **Signed & dated DETAILED (dates and amounts – a financial timeline) statement explaining current situation and the reason for requesting a Professional Judgment**

I am requesting that the Financial Aid Director at Helena College University of Montana consider my circumstances to determine if I may be eligible for a professional judgment according to the Department of Education Federal Regulations. This determination may allow my financial aid eligibility to change at the Helena College University of Montana only. I agree to provide any documentation requested by the Financial Aid Director if it can be obtained. I understand that this decision is made by the Financial Aid Director based upon documentation I supply and that any professional judgment decisions are final.

Student Signature _____ Date _____

This form and any required/requested documentation must be given to the Helena College Financial Aid Office prior to any professional judgment being granted.

**FOR QUESTIONS CALL: FINANCIAL AID OFFICE, Helena College, 1115 N. Roberts Street, Helena, MT 59601
406-447-6916, www.helenacollege.edu**

RETURN DOCUMENTATION TO: FINANCIAL AID OFFICE, Helena College, 1115 N. Roberts Street, Helena, MT 59601, or fax to: 406-447-6397.