



## 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)**
  - **Household Verification Form**
  - **2023 IRS Tax Transcripts if unable to have data automatically uploaded into FAFSA 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.**