



Charlotte School of Law Professional Judgment Request

Student Name _____ SSN _____

Mailing Address _____

Telephone (Home) _____ (Cell) _____ (Work) _____

If your family financial situation has changed significantly since completing the 2010-2011 Free Application for Federal Student Aid, you may request these changes be taken into consideration by providing additional information to the Financial Aid Office. The Financial Aid Administrator will use this form, the student file, and supporting documentation to determine if eligibility for financial aid can be recalculated. You may be asked to provide additional documentation to support your claim. Complete this form entirely and return it to the Financial Aid Office with all requested documentation.

Check the appropriate condition for which you are requesting a re-evaluation of financial aid eligibility for the 2010-11 academic year.

- A. _____ **Student/Spouse Loss of Employment:** Student or spouse earned money in 2009 but lost his or her job in 2010. Required documentation includes last date of employment; final pay stub; severance received; unemployment benefits; and start date of new employment including salary (if applicable).
- B. _____ **Student Reduction in Income:** Student's or spouse's income were significantly less in 2010 than in 2009 due to a change in job, reduction in hours worked, retirement, layoffs, continuing education, loss of benefits, etc. Required documentation includes current pay stubs, letter from employer, proof of acceptance to postsecondary school.
- C. _____ **Student/Spouse Separation, Divorce or Death:** Required documentation includes legal separation agreement, divorce decree, signed statement from the student (if no formal agreement is available, or a copy of the death certificate in the case of death).
- D. _____ **Significant Change in Financial Situation due to Illness or Natural Disaster:** Provide copies of **PAID** (out of pocket) medical expenses to date; physician records; documentation of **PAID** expenses if a natural disaster occurred.
- E. _____ **Other Significant Changes you wish to have considered:** Please contact the Office of Financial Aid for questions regarding eligibility and proof required for your claim.

Provide a **complete and comprehensive** explanation of the situation you identified above. Include income, relevant dates, employer names and addresses along with the required documentation listed above.