



SAMFORD UNIVERSITY

2009-2010 Professional Judgment Request

Student's Name _____ SSN _____ or Samford ID # _____

Every Samford student is assigned a cost of attendance budget, which is the maximum allowable amount of aid that can be disbursed during a single academic year. In any given year, a student's costs for Transportation, Books & Supplies, and Personal/Miscellaneous Expenses may exceed the allotment established for his/her cost of attendance budget. On a **limited, case by case basis** the Office of Financial Aid will consider special conditions that merit an increase in a student's cost of attendance budget.

	Costs Already Considered	Allowable Costs	Disallowed Costs
Transportation	Normal gasoline usage; periodic oil changes; up to two flights home (48 contiguous states)	Gasoline expenses above normal allotment; Major vehicle maintenance;	Purchase of automobile; insurance premiums; traffic fines
Books & Supplies	Average amount spent on books for your period of enrollment	Books and supplies costs above the normal allotment; One time (per degree) computer allowance	Software and peripheral devices such as printers, pdas, Blackberrys, & etc...
Personal/Miscellaneous	Normal living expenses for typical college student	Out of pocket medical costs not covered by insurance above the normal allotment; child care expenses	Elective surgery; child support or day care expenses for non-custodial child

The above is not an exhaustive list of all costs. The University reserves the right to approve or disapprove any costs. **Any requests without corresponding receipts showing that the items for consideration have been paid for will not be considered.**

Please review each category below, list your monthly expenses and attach the required documentation appropriate for your request. **You do NOT need to include information that is not pertinent to your request. For example, you do not need to include car repair information if you are requesting additional funds based on the purchase of a computer.**

Category	Monthly Expense	# of Months	Required Documentation
Major car maintenance			Car repair receipts
Daily mileage (to and from school only)			City or county of residence: _____
Books and Supplies (can include purchase of computer - hardware only)			Receipts or proof of purchase for all books and education related materials
Medical or dental expenses paid out of pocket			1. Copies of noninsured medical bills 2. Copies of Explanation of Benefit (EOB) statements
Child care expenses			Copy of receipts from child care provider
Other			Submit <u>signed & dated</u> , detailed explanation - additional documentation may be required

Certification: I certify that the information provided on this form is true and complete to the best of my knowledge. I understand that approval of this request is contingent upon review of accuracy of information and is only made on a case by case basis and is applicable only at Samford University. The action of the Office of Financial Aid is final.

Student's Signature _____ Date _____

Office of Financial Aid Use Only: *****

Approved per professional judgment _____ Denied _____ Approved by _____ Date _____