2017 Wintersession Expense Professional Judgment

This form is used to request special consideration for student financial aid because of additional expenses incurred while attending Wintersession. Please be aware that Wintersession is considered part of the Spring term for financial aid purposes. This form is to be used for the additional charges incurred while attending Wintersession, limited to tuition and textbook charges. Please be aware that completion of this form does not guarantee additional aid.

PLEASE NOTE: If a Wintersession course is dropped within the refund period, this increase will be removed and financial aid paybacks may be incurred.

To be completed by student (please print):

STUDENT LAST NAME ___________________________ STUDENT FIRST NAME ___________________________ STUDENT MIDDLE NAME ___________________________

OLE MISS STUDENT NUMBER ___________________________ LOCAL TELEPHONE NUMBER ___________________________ OLE MISS EMAIL ADDRESS ___________________________@go.olemiss.edu

Please check the appropriate box indicating your student status:

_____ Undergraduate/Pharmacy (EE1-3/PY1)  _____ Graduate/ Law/ Pharmacy (PY2-PY4)

Please complete this form ONLY if you expect to receive additional financial aid and when you are actually registered for your Wintersession courses. Then, please provide the following information:

Course(s) enrolled: ___________________________

Total number of hours enrolled during Wintersession: ________

If this is a STUDY ABROAD or a STUDY USA offering, please indicate the location: ___________________________

If approved, increased eligibility will be funded up to the maximum Federal Direct Loan eligibility. If you intend on using a Direct PLUS Loan (parent loan) or a private loan for these additional expenses, please check here. □

If your scholarships have been reduced, you must indicate so by checking here. □

If you anticipate receiving the following aid, please check:

_____ Child of Faculty/Staff
_____ Prepaid Tuition Plan (such as MPACT)
_____ National Guard Non-Resident
_____ Academic Common Market
_____ Other (please specify): ___________________________

I certify that the information and documentation provided are complete and true to the best of my knowledge. I also understand that any undocumented expenses will not be included.

Student Signature __________________________________________  Date __________________

THIS IS NOT AN APPLICATION FOR A LOAN