Duke University School of Medicine of Financial Aid may consider a student’s special circumstances to adjust his or her expected family contribution for educational expenses, standard cost of attendance (COA) budget, and/or financial aid dependency status, as determined by federal guidelines. Adjustments submitted for consideration must be documented and reasonable as it pertains to the cost of attendance and are on a case by case basis.

Indicated below are the guidelines for professional judgments for Duke University School of Medicine. Students requesting consideration for any of these categories should review the guidelines prior to submitting a request. Requested expenses are only for the current academic year expenses (based on your program start and end date for 2024/2025).

Students should allow 10 days to receive an email with our office’s decision on the professional judgment request. (Note: our office will only consider a request for Professional Judgment if the student has accepted all awards offered. Students who have declined loans would not be eligible to apply). Please note: Any approved expense increase will be offered as a federal direct loan if a student has completed the FAFSA. Any approved professional judgement expense will not be awarded in grants and/or scholarships.

In accordance with federal regulations, the Duke University School of Medicine Financial Aid Office, establishes a standard student budget for all aid recipients based on expected tuition and other campus fees, average housing costs, average book and supply expenses, and average transportation costs for commuting students within the tri-county area (Durham, Wake, and Orange) however, adjustments may be made for the following documented circumstances:

**Child Care for Dependent Children** costs that may be considered include child or day care expenses for children younger than school-aged or requiring special needs as documented by a medical provider. Increases are not permitted for the costs of food and shelter for dependents. The maximum allowance is based on the following; Daycare full day $1,100/month, Daycare half day $458/month for one qualifying individual. Students who have an employed partner contributing to the household income will be eligible to receive the maximum allowance of 50% of the monthly amount per dependent child.

Submitted request must include: Statement must include student’s name and the name of each child. The amount of payment, per week or month for each child. Through federal student loan programs, we cannot consider the cost of childcare for a married student whose spouse is an at-home parent. In-home care by a nanny or service is not eligible.

**Housing Expenses** includes rent or mortgage plus utilities for a student’s portion only. If a student shares the housing/utilities with a roommate, partner, or spouse, the request of the housing will be divided in half. The allowable housing increase request cannot exceed 125% of the approved housing allowance listed in the Cost of Attendance. Maximum amount requested includes utilities. Our office will not consider request above this amount.

Submitted request must include: Student name listed on lease (start and end dates) or mortgage statement and 3 months of utility bills (average will be determined).

**Transportation Expenses** include major car repairs (beyond regular maintenance and normal wear and tear).

Submitted request must include: Student name listed on dated and paid receipt(s) and a description of the work completed.

**Documented special needs or disability expenses** that may be considered include special services, personal assistance, transportation, equipment, and supplies that are reasonably incurred and not provided by other agencies. Proof of specific disability from agency or provider and documentation of expenses, such as receipts or statement of services is required.

**Medical and/or dental expenses** not covered by insurance - Documentation of significant out-of-pocket medical and/or dental expenses is required.
expenses not covered by insurance during the current year and paid by the student may be submitted for consideration. Students must provide documentation that details (our office does not need to know what the services are for).

Submitted request must include:

- Original medical/dental expenses with the patient's name, date of service(s) and the medical/dental provider contact information
- Amount paid (or to be paid) by insurance and any other amount to be adjusted off the balance due
- Amount actually paid (or to be paid) on this service by the student

Special Circumstances that have not been addressed above that you would like our office to consider:

- Attach a summary of the circumstance(s)
- Attach documentation that pertains to request

Conditions that do NOT merit COA adjustments include (but are not limited to):

- Household expenses
- Consumer indebtedness (including but not limited to, auto loans, credit card payments, student loan payments, income taxes, legal expenses)
- Financial support of a spouse or dependents
- Additional food purchases beyond budget

Request for consideration of increasing the Cost of Attendance budget can be emailed to: Finaid-som@dm.duke.edu with all documentation. Once received our office will submit the information to the financial aid committee for review and advise of their decision via a student Duke email account. If the request is approved, a student will receive information on the steps to accept the additional federal aid along with the breakdown of the expenses. If the request is denied, information will be sent in an email. Please allow up to 10 days to receive notification of the decision.