



Student Financial Aid Services (SFAS)

Appeal for Dependency Status

Student's Name _____ **NJIT ID** _____
UCID E-mail _____

Federal regulations on the Free Application for Federal Student Assistance (FAFSA) indicate the criteria under which a student applies independently of parents for financial aid. Occasionally, however, extraordinary individual circumstances allow a student to file as independent without meeting the FAFSA criteria. If your situation is described in one of the following sets of circumstances, you may request the Financial Aid Appeals Committee to review your status.

Check the item below that applies, attach documentation as required, and return the signed form to *Student Financial Aid Services (SFAS), Student Mall, New Jersey Institute of Technology, University Heights, Newark, NJ, 07102-1982*. You will be contacted regarding a decision.

- ___ You have been separated from your parents because of an unsafe home environment, or your parent has been institutionalized or is in a correctional facility. Documentation from a court, social service agency, or other objective source acceptable to the Financial Aid Appeals Committee must be provided with this form.
- ___ You have been separated from your parents, come from a documented background of historical poverty, and are living with a relative or someone who is supporting you. Provide 3 sources of documentation from a social service agency and/or respected members of the student's community (e.g., guidance counselor, teacher, minister, medical professional) acceptable to the Financial Aid Appeals Committee.
- ___ Your economic and personal circumstances are of such a unique or unusual nature that review is warranted. You must submit a written explanation of your situation, accompanied by 3 sources of objective third-party documentation attesting to your circumstances. Only well-documented appeals with serious situations will be considered by the Financial Aid Appeals committee.

I declare that the information reported on this form is true, correct, and complete. I authorize this information to be used in conjunction with that reported on the FAFSA for the purpose of calculating eligibility for financial aid. I agree to provide any other official documentation necessary if requested. I also authorize the Financial Aid Appeals Committee to seek information from other NJIT offices when appropriate.

Student's Signature

Date