

**Upload Completed Form/Supporting documents:** 

https://www.njit.edu/financialaid/DFupload

Mail or Fax:

Student Financial Aid Services NJIT - Student Mall, University Heights Newark, NJ 07102 Fax: 973-596-2460

## Appeal for Income Reduction 2023–2024

Student's Name:N	VJIT ID:	NJIT E-mail:	
New Jersey Institute of Technology recognizes that special circumstances request form is designed to help you document this information so th accurately reflect your current financial situation. The financial aid office administrator's decision is final and cannot be appealed. <b>Fall Deadline to</b>	at the Student Financial A reserves the right to reques	d Services can adjust your FAFSA which will help	
	facilitate the processing of	r. If your circumstance is not on this form, please this request. Student/Spouse (Independent Student)	
[ ] A. UNEMPLOYMENT		[ ] B. DISABILITY	
1. Name of unemployed person	1. Name of disabled	person	
2. Relationship to student	2. Relationship to st	udent	
3. Date of unemployment	-		
4. Earnings in 2022 or 2023 prior to unemployment \$	4. Earnings in 2022	or 2023 prior to disability	
5. Date unemployment benefits began	5. Date worker's con		
6. Date unemployment benefits ended	disability benefits	s began	
7. Weekly gross & net unemployment benefits \$	<del>-</del> -	f worker's compensation or other	
8. Is the person receiving severance pay? [ ] Yes [ ] No	disability benefits	\$	
9. Total severance amount \$	7. These amounts are	etaxableuntaxed	
10. Date severance pay began	8. Is the disability po	ermanent? [ ] Yes [ ] No	
11. Date severance pay will terminate	*If yes, indicate the	ne monthly gross amount	
12. Has the person returned to work? [ ] Yes [ ] No	of your family's	Social Security benefits \$	
If yes, enter date		rity benefits began	
13. If re-employed, enter gross weekly salary	_	e anticipated date of return to work	
	Estimated week	ly gross salary to be earned	
[ ] C. RETIREMENT	[ ] D	. DEATH OF PARENT OR SPOUSE	
1. Name of retired person	1. Name of deceased	l person	
2. Relationship to student	_ 2. Relationship to st	2. Relationship to student	
3. Date of retirement	_ 3. Date of death	3. Date of death	
4. Earnings in 2022 or 2023 prior to retirement \$	4. Earnings in 2022	or 2023 prior to death \$	
5. Date pension began		5. Life insurance received or to be received \$	
6. Monthly amount of pension \$	6. Date Social Secur	rity benefits began	
This pension istaxableuntaxed		(Or will begin)	
7. Date social security benefits began	7. Monthly amount	· -	
(Or will begin)	Social Security b	enefits \$	
8. Monthly amount of family's gross			
Social Security benefits \$			

Student Name:		NJIT ID:		
[ ] E. DIVORO	CE/SEPARATION	[ ] F. LOSS OF UNTAXED INCOME OR UNEMPLOYMENT BENEFITS		
Adjustments may be made if the appli divorced or separated after filing the 2 Federal Student Aid (FAFSA).	•			
1. Student [ ] Parent [ ]		1. Student [ ] Spouse [ ] Parent [ ]		
2. Date of Separation	or Divorce	2. Name of person who lost benefits		
3. Date alimony payments began	<u></u>	3. Type of benefit lost		
4. Weekly amount of alimony	\$	4. Effective date		
5. Date child support began				
6. Weekly amount of child support re	eceived	6. Total amount received in 2022 \$		
for <b>all</b> children	\$	7. Total amount to be received in 2023 \$		
[ ] G. LOSS OF F	TULL-TIME WORK	[ ] H. UNREIMBURSED & PAID MEDICAL/DENTAL EXPENSES		
The student/spouse or parent worked working full time.	full time in 2021, but is no long	Unreimbursed and Paid Medical/Dental Expenses which occurred in 2021 or 2022 and were claimed on Schedule A of the 2021 or 2022 tax return.		
1. Student [ ] Spouse [ ]	Parent [ ]	1. Person(s) incurring the medical/dental bills		
Currently (check one) Working Par		2 Palationship to Student		
		3. Expenses incurred for (patient name)		
2. Date of change in employment state		4. Relationship to Student		
3. Reason of change in employment sta		5 When did the medical/dental amount of 12021   12022		
4. If working part-time now, how man	y nours/week and you work be	6. Were these expenses claimed on Schedule A of 2021 or 2022 Tax		
5. Family's monthly gross income Bef	ore: Now:	Return? [ ] Yes [ ] No 7. Has insurance company paid these expenses? [ ] Yes [ ] No		
		8. Has insurance company denied these expenses? [ ] Yes [ ] No		
6. Answer all questions in section "A"	'about the student/parent.			
(received and expected) for 2023. We reviewed if we need you to submit this  Statement Student/Spouse (Independent Student) and detail. Please address when the circumst the circumstance please address that as	may also request supporting do statement.  I Parent (of a Dependent Studer tance arose, who was impacted well. For example, an individua	st you to provide a signed and dated statement, listing taxed and untaxed income ecumentation to confirm the 2023 income. We will notify you once your appeal is not) must submit a signed and dated statement explaining the extenuating circumstance is by this and the relationship of this person with the student. If there has been an update all was unemployed and has now returned to work. Kindly note that an incomplete ppeal. <i>You must include information on the stimulus checks received from the</i>		
Verification If the student's FAFSA is selected for federmy.njit.edu regularly and submit the reque	· •	t be completed before this appeal can be considered. Please check your emails and pipeline		
Processing Time Please allow 4-6 weeks for processing after package to avoid late fees.	r all the documents have been rec	ceived. We recommend that you make payment arrangements based on your original award		
documentation requested by NJIT for Jersey and Federal financial aid record spouse of a student is appealing an e	the review of this request. I (was. If the student is a dependent attenuating circumstance then	ported on this worksheet is true, complete and correct. I (we) agree to provide any otherwork authorize NJIT to release the reported/revised information to update State of Nent, at least one parent whose information is reported on the FAFSA must sign. If the/she must sign along with the student. Warning: If you purposely give false annual reported signatures are not acceptable.		
Student Signature	Date	Parent #1 Signature (Required for Dependent Student)  Date		
Spouse Signature	Date	Parent # 2 Signature (Required for Dependent Student)  Date		

## **Required Documentation**

Please provide legible copies of all documents. NJIT reserves the right to request any additional documentation as necessary. Incomplete submissions will delay the processing.

## A. UNEMPLOYMENT **B. DISABILITY** Signed and dated statement explaining the circumstance and whether Signed and dated statement explaining the circumstance, type/date the unemployed person has returned to work. of disability and whether the disabled person has returned to work. 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). Last pay stub for 2022 or 2023 showing year to date earnings. Letter from the employer (on company letterhead) stating the last Most recent pay stub for current employer, if applicable. date of employment. Last pay stub for 2022 or 2023 showing year to date earnings. Unemployment benefits determination letter that shows weekly amount of gross and net unemployment benefits **OR** denial of Copy of disability/worker's compensation benefits documents unemployment benefits with explanation. showing date of claim and amount of benefits. Termination letter on company's letterhead. Social Security documentation indicating start date and monthly benefit amount. Documentation of severance pay. Documentation of any other received or expected taxed/untaxed Documentation of any other received or expected taxed/untaxed income for 2022 and/or 2023. income for 2022 and/or 2023. C. RETIREMENT D. DEATH OF PARENT OR SPOUSE Signed and dated statement explaining the circumstance. Signed and dated statement explaining the circumstance. 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). Last pay stub for 2022 or 2023 showing year to date earnings. Last pay stub for 2022 or 2023 showing year to date earnings. Pension documentation indicating start date and monthly benefit Death certificate. Social Security documentation indicating start date and monthly Social Security documentation indicating start date and monthly benefit amount. benefit amount. Documentation of any other received or expected taxed/untaxed Documentation of any other received or expected taxed/untaxed income for 2022 and/or 2023 (e.g. life insurance). income for 2022 and/or 2023. F. LOSS OF UNTAXED INCOME OR E. DIVORCE/SEPARATION **UNEMPLOYMENT BENEFITS** Signed and dated statement explaining the circumstance from both Signed and dated statement explaining the circumstance, reason and parties. Must also list the addresses where each resides. date of termination and amount received in 2022 and/or 2023. 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). If Divorced: Divorce decree Benefits cancellation letter from an agency or court indicating date of termination and reason. If Separated: Copy of separation agreement if available and Proof of separate residences (utility bill; gas, water, electric, driver's Documentation showing total amounts of benefits received for the license, official lease, mortgage statement etc.). Cell phone bills and current year bank statements are not acceptable. Documentation showing total amounts of benefits received in the prior year Proof of monthly amount of child support and alimony received. Documentation of any other received or expected taxed/untaxed Documentation of any other received or expected taxed/untaxed income for 2022 and/or 2023. income for 2022 and/or 2023. G. LOSS OF FULL-TIME WORK H. UNREIMBURSED & PAID MEDICAL/DENTAL EXPENSES Signed and dated statement explaining the circumstance and whether Signed and dated statement explaining the circumstance. This must the person has returned to full-time work. include a detailed breakdown of all unreimbursed & paid medical/dental expenses, date of occurrence and amounts covered by 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). insurance. Who incurred expenses and for whom? 2021 & 2022 Federal Tax Returns, all schedules, W-2s and 1099s Last two (2) pay stubs showing year to date earnings (and 2023 Federal Tax Returns, W-2s and 1099s after 02/15/24). Unemployment benefits determination letter that shows weekly Schedule A (from 2021 and/or 2022 Federal Tax Return). amount of gross and net unemployment benefits OR denial of unemployment benefits with explanation. Explanation of Benefits Statements from insurance for each expense. Supporting documentation of out-of-pocket medical expenses with Letter on company's letterhead indicating loss of full-time work. proofs of payments by the family. Documentation of any other received or expected taxed/untaxed income for 2022 and/or 2023.