



OFFICE OF FINANCIAL AID
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 Room 3220 www.essex.edu/fa

MISSING INFORMATION ON FAFSA®

2019-2020

Please type or clearly print.

Student's Last Name	First Name
ECC ID#	Phone

SECTION 1: STUDENT INFORMATION

What is your marital status as of today?

Single Married/Remarried Separated Divorced or Widowed

Month and year you were married, remarried, separated, divorced or widowed: Month: _____ Year: _____

Will you have your first bachelor's degree before you begin the 2019-2020 school year? Yes No

SECTION 2: PARENT INFORMATION

What is your parent's marital status as of today?

Single Married/Remarried Separated Unmarried and both legal parents living together Divorced or Widowed

Month & year your parents' were married, remarried, separated, divorced or widowed: Month _____ Year _____

	PARENT 1	PARENT 2
SSN		
NAME (Last, First)		
Date of Birth MM/DD/YYYY)		

What is your parents' state of legal residence: NEW JERSEY OTHER: _____

Did your parents become legal residents of the state before January 1, 2015? Yes No

If "No", give the month and year legal residency for the parent who has lived in New Jersey the longest: Month _____ Year _____

CERTIFICATION: By signing below, both student and parent(s) acknowledge and confirm that the above is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both. If your legal parents (s) income is included on this form, the student and at least one legal parent must sign. Note: If your spouse is a non-tax filer, they must sign this verification worksheet. Full, complete signatures only.

Student _____ Date _____

Parent _____ Date _____

Parent Printed Name: _____ Date: _____

Submit this completed signed form along with copies of all required supporting document(s) to the Essex County College, Office of Financial Aid in person.
 Make and retain a copy of this form and all supporting documentation for your records.