

OFFICE OF FINANCIAL AID

303 University Avenue, Newark, NJ 07102-1798 P: (973) 877-3200 f: (973) 877-3586 Room 3220 <u>www.essex.edu/fa</u>

INDEPENDENT STATUS APPEAL FORM

ACADEMIC YEAR: _

Please print clearly.

Student Last Name	First Name	ECC ID#	Home Phone	Cell Phone

Financial aid regulations state that dependent students are required by law to provide parental income information and signatures to be considered for financial aid. You may request to waive the federal regulation requirements, if you can document that you are separated from your parents due to some extraordinary circumstances. Your parent's unwillingness to provide their information, your ability to support yourself, or not living with your parents does not constitute extraordinary circumstances.

Have you filed an Independent Status Appeal at our school before? 🗌 Yes - Year: ______ 🗌 No

Check the unusual circumstances that makes you an independent student. You are required to provide documentation to support your reason. Document your reason from the court, social service agency or other similar sources:

Abusive family environment

Parents are incarcerated and I live with a friend or relative who contributes to my support

Separated due to abandonment and I am unable to contact them or one of parents are deceased and I do not know the whereabouts of my other parent. Note: If applicable, provide a death certificate for a deceased parent.

Other specify:

2.	If both parents are not deceased, where is your living parent? Where are both of your parents located? When and where was the last time you had contact with each of your parents:				
			, .		
4.		Where?	Date of last contact:		
	Father When?	Where?	Date of last contact:		
5.	What was the nature of the co	ntact?			
6.	When did you start meeting your expenses without parental support?				

How have you supported yourself? Indicate how you supported yourself in 2019. Check all that apply, enter the amount received and submit the required documentation:

Source of Income	Amount	Required Documentation
	Received	
Unemployment Benefits	\$	Printout from the Unemployment Office
Social Security Benefits	\$	Letter from Social Security
Disability	\$	Letter from the agency
Welfare	\$	Letter from the agency
Child Support	\$	Letter from courts
Worked and filed taxes (full or part-time)	\$	IRS Tax Transcript, if filed taxes or W2 Form, last paystub(s) or letter from all employers if no taxes were filed.
Support from family, friend etc.	\$	Download and complete Statement of Support form
Other:	\$	Provide appropriate documentation

CERTIFICATION: I certify that the statements, information and documents for this appeal are true and correct.

Student Signature (Full signature; No initials)	Date