

OFFICIAL USE ONLY:

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DENIED

Financial Aid

303 University Avenue, Newark, NJ 07102-1798 p: 973-877-3200 | f: 973-877-3586 Room 3220 | www.essex.edu/fa

INDEPENDENT STATUS APPEAL FORM

ACADEMIC	YEAR:	

Please print clearly.

Student Last Name Fir	st 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 t	hat makes yo	ou an ind	lepende	ent student. You are require	d to provide documentation		
to support your reason. Document	t your reason	from the	court,	social service agency or oth	er similar sources:		
Abusive family environment	•			,			
Parents are incarcerated and I	live with a fr	iend or re	elative v	who contributes to my supp	ort		
Separated due to abandonmen							
know the whereabouts of my othe							
Other specify:	-				Total a accounce paronii		
1. If both parents are not decease	d where is v	our living	narenta	•			
 Where are both of your parent 		_	-				
	ast time you had contact with each of your parents:						
		Vhere? Date of last contact:					
	Where? Date of last contact:						
5. What was the nature of the contact?							
When did you start meeting you	ur expenses w	ithout pa	rental s	nbboutś			
How have you supported yourself		-		ed yourself in 2021. Check	all that apply, enter		
the amount received and submit the	ne required d	ocument	ation:				
Source of Income		Amou	-	Required Do	cumentation		
		Receiv					
Unemployment Benefits		\$		Printout from the Unemploy	ment 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 o	r part-time)	\$		IRS Tax Transcript, if filed to	exes or W2 Form, last		
				paystub(s) or letter from all	employers if no taxes		
Support from family, friend et	•	\$		were filed. Download and complete St	stament of Support form		
Other:	C.	\$		Provide appropriate docum			
		₽		i lovide appropriate accom	emanon		
CERTIFICATION: I certify that the statements, information and documents for this appeal are true and correct.							
CERTIFICATION. I Certify that the statements, information and accoments for this appear are true and correct.							
Children Characters /Fall alare	Nia imielala			<u> </u>			
Student Signature (Full signature; No initials)		Da	Date				

FAO SIGNATURE: _