



Office of Financial Aid
Hepburn Hall, Room 215
2039 Kennedy Boulevard
Jersey City, New Jersey 07305

Phone: (201)200-3173
E-Mail: financialaid@njcu.edu

2018-2019 Request for Consideration of Special Circumstances

The deadline for **submission** of these Requests is **September 1, 2018** if you attend the **Fall-2018** semester, and **February 1, 2019** if you attend NJCU starting in the **Spring-2019** semester. The review of your request will not begin until all documentation is submitted and it may take approximately four weeks to be processed.

Student Name: _____ Student ID# _____

All requests for consideration of special circumstances must include:

- Copy of the 2016 Complete IRS tax transcript and W-2s for the student and parent (if applicable)
- Completed 2018-2019 Verification Worksheet
- Letter explaining in detail the circumstances and the reason for your appeal.

Check the reason (s) that best describes your situation and provide all requested documentation

Unemployment: Person's Name: _____

Relationship to Student _____

- Please write a statement explaining beginning and end date of all employment. Also indicate beginning and ending date of any unemployment compensation as well as any other sources of income for 2017.
- Copy of the 2017 Complete IRS Tax Return Transcript and W-2s for the student and parent(if applicable)
- Copy of the letter of termination/change in status from the employer stating status date and any benefits received for each employment listed in above statement.
- Copy of official statement of unemployment eligibility, if receiving unemployment.

Disability/Death: Name of disabled or deceased person: _____

Relationship to Student _____

- Please write a statement explaining the circumstances.
- Copy of the letter from the employer stating any benefits received.
- Copy of the 2017 Complete IRS Tax Return Transcript and W-2s.
- In the case of disability: copy of official statement of disability benefits, eligibility for workers compensation, or eligibility for social security benefits
- In the case of death: copy of the death certificate or obituary

Divorce/Separation: Date of separation or divorce: _____

Relationship to Student _____

- Please write a statement explaining the situation including the date of separation as well as beginning and end date of all employment. Also indicate beginning and ending date of any unemployment compensation as well as any other sources of income for 2017.
- Copy of the 2017 Complete IRS Tax Return Transcript and W-2s for the student and parent(if applicable)
- In the case of divorce: copy of official divorce decree
- In the case of separation, proof of separate addresses, (i.e. Gas/electric bill), and please address custody, child support, and alimony in a written statement.

Other: _____

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

(Parent Signature required for all Dependent Students)