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Student Financial Aid Services NJIT - Student Mall, University Heights Newark, NJ 07102 Fax: 973-596-6471

Dependency Status Verification 2016–2017

2016–2017								
STUDENT INFORMATION								
	First Name	M.I.	NJIT ID					
Student's Street Address (include apt. no.) N			NJIT Email					
City	State	Zip Code	Phone Number					
regarding your dependen	e Application for Federal Studen dency status. Please review each ation before we can determine yo	h question carefully and c	heck the box for "Yes" or "No"	-	rovide			
	DEPENDENCY	STATUS QUESTIONS	5	YES	NO			
Were you born before	re January 1, 1993?							
As of today, are you	married? (Also answer "Yes" if	f you are separated but no	t divorced.)					

DEPENDENCY STATUS QUESTIONS	YES	NO	
Were you born before January 1, 1993?			
As of today, are you married? (Also answer "Yes" if you are separated but not divorced.)			
At the beginning of the 2016-2017 school year, will you be working on a master's or doctorate program (such as an MA, MBA, MD, JD, PhD, Ed.D, graduate certificate, etc.)?			
Are you currently serving on active duty in the U.S. Armed Forces for purposes other than training?			
Are you a veteran of the U.S. Armed Forces?			
Do you now have or will you have children who will receive more than half of their support from you between July 1, 2016 and June 30, 2017?			
Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through June 30, 2017?			
At any time since you turned age 13, were both your parents deceased, were you in foster care or were you a dependent or ward of the court?			
As determined by a court in your state of legal residence, are you or were you an emancipated minor? Note: The State of New Jersey does not recognize the status of Emancipated Minor.			
As determined by a court in your state of legal residence, are you or were you in legal guardianship? Note: Answer "No" if you live with your legal parents (biological/adoptive)			
At any time on or after July 1, 2015, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?			
At any time on or after July 1, 2015, did the director of an emergency shelter or transitional housing program			
funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied			
youth who was homeless or were self-supporting and at risk of being homeless?			
At any time on or after July 1, 2015, did the director of a runaway or homeless youth basic center or transitional			
living program determine that you were an unaccompanied youth who was homeless or were self-supporting and			
at risk of being homeless?			

REQUIRED DOCUMENTS (AS APPLICABLE)

Please check the box for the documents you are attaching with	h this form.					
☐ Marriage Certificate						
☐ Proof of Active Duty						
☐ DD214 for Veterans						
☐ Proof that you provide more than half support to child	lren/dependents					
☐ Death Certificate for both parent(s)						
☐ Agency/Court documents to prove you are/were in fo	ster care or ward of the court					
☐ Court documents indicating you are an Emancipated Minor (NJ does not recognize emancipated minor status)						
☐ Court document showing you are/were in Legal Guar	dianship					
☐ Documentation from School district homeless liaison for homeless determination						
☐ Documentation from the director of emergency shelter or transitional housing program for homeless determination						
☐ Documentation from the director of a runaway or homeless youth basic center or transitional living program for homeless determination						
Note: If you do not meet any of the criteria listed on page 1, then you are a dependent student and must correct the answers to the dependency questions on the FAFSA (www.fafsa.gov) and also provide parental information. Your parent must also sign the FAFSA electronically. Please inform our office once the FAFSA corrections have been submitted. If you believe that you have extenuating circumstances that should be considered in making the dependency determination, please contact our office.						
CERTIFICATIO	ON AND SIGNATURES					
	nation reported on this worksheet is complete and correct. If the ag: If you purposely give false or misleading information on this a Computer generated signatures are not acceptable.					
Student Signature	Date					
Parent Signature (Required for Dependent Students)	Date					