MIDDLESEX COUNTY COLLEGE
FINANCIAL AID

For Office Use Only
FAC18NJA

New Jersey Alternative Financial Aid Affidavit

A. Student Information

Last Name	First Name	M.I.	MCC ID #	Cell Phone #

B. Requirements: You must initial to confirm each statement:

I have attended a New Jersey high school for at least three years _____

I have or will receive a high school diploma for a New Jersey high school or have attained its equivalent such as a New Jersey GED certificate _____

Males only- I am registered with selective service and have attached a copy of my registration _____

I am NOT a non-immigrant alien holding a currently valid visa. (Federal law defines a non-immigrant as a person admitted temporarily to the United States with any of the following visas: A, B, C, D, E, F, G, H, I, J, K, L, N, O, P, Q, R, S, T, TN, TD, V, TROV, NATO, or other non-immigrant visas) _____

I understand I must meet all other financial aid requirements including but not limited to being enrolled in a degree or certificate program, meeting Satisfactory Academic Progress guidelines, and reapplying annually _____

C. Affidavit

By signing this document below, I hereby state that if I am a non-citizen without lawful immigration status, I have filed an application to legalize my immigration status or will file an application as soon as I am eligible to do so.

D. Declaration of True and Accurate Information

I, the undersigned, declare that the information I have provided on this form is true and accurate. I understand that this information will be used to determine my eligibility for state financial aid assistance. I further understand that if any of the above information is found to be false, I will be liable for repayment of all assistance received and may be subject to disciplinary action by the University.

_____

Student Signature Date