



Office of Financial Aid

Non-Resident Authorization and Certification Affidavit

APPLICANT INFORMATION:

 Last Name (PLEASE PRINT) First Name M.I. College Student ID #

 Mailing Address

 Cellular Telephone Number Home Telephone Number E-mail Address

How to Apply:

1. Complete the New Jersey Alternative Financial Aid Application at WWW.NJGRANTS.ORG
2. Create an NJFAMS account at WWW.NJFAMS.HESAA.ORG
3. Submit a New Jersey high school transcript proving 3 years of attendance.
4. Submit proof of graduation from a NJ High School or received the equivalent of a high school diploma.
5. Male students must register with Selective Service at WWW.SSS.GOV

I understand that:

- Whether or not I receive state financial aid, I understand that **I AM PERSONALLY RESPONSIBLE** for all charges that I incur at Camden County College. The College may permit me to register before a determination is made regarding my eligibility for financial aid. If, however, I am or become ineligible for financial aid for any reason, I agree to pay my account in full including any collection and/or attorney's fees that may be incurred by or on behalf of the College to satisfy my personal financial obligations.
- I understand that I must matriculate in a degree program and must maintain Satisfactory Academic Progress (SAP) in order to be eligible for financial aid. I understand that the SAP policy requires that I complete my program within 150% of the published length and maintain the required GPA average and 67% course completion rate. I can find full details about the SAP policy on the CCC website.
- I understand that the receipt of state financial aid funds is contingent upon class attendance. If I never attend, cease to attend, officially or unofficially withdraw, or receive negative grades (F,W,NA, XA ,RV or MP) I will jeopardize my eligibility for both current and future semesters. My financial aid may also be adjusted if I do not complete the semester with earned credits. If I do not earn credits or maintain satisfactory attendance for the semester I am enrolled in, my financial aid award may be adjusted based on the rules established in the State Return of Funds policy. Financial aid funds cannot be awarded or disbursed for any course with an XA grade.

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.

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 the tuition exemption. I further understand that if any of the above information is found to be false, I will be liable for payment of all nonresident charges from which I was exempted and may be subject to disciplinary action by Camden County College.

Print Name _____

SIGNATURE _____ Date _____