



Financial Aid Office

9601 Germantown Ave, Philadelphia, PA 19118

Phone: (215) 248-7182 / Fax: (215) 242-7705

finaid@chc.edu

2020-2021 Special Circumstance Request Form

Financial Aid eligibility for the 2020-2021 academic year is based on 2018 family income. Under certain circumstances, it may be possible for the Financial Aid Office to base your eligibility for aid on your current or expected family income or to adjust 2018 income.

Chestnut Hill College and the Financial Aid Office recognize that families experience changes in income or other circumstances that are not accurately reflected in the information provided on the Free Application for Federal Student Aid (FAFSA). There, it is possible for students and parents to appeal their financial aid eligibility if they have a special circumstance beyond their control.

Examples of Special Circumstances includes, but are not limited to:

- Significant Loss of income
- High or Unreimbursed medical and/or dental expenses paid
- Death of immediate family member whose information is on the FAFSA
- Divorce or separation after filing the 2020-2021 FAFSA
- High education or family expenses
- One-Time Payment Received
- Other circumstance beyond your control

Please complete and return this application, along with the required documentation, to the Office of Financial Aid. All submitted documentation will be reviewed by a Financial Aid Administrator to determine if the student will be granted a Special Circumstance Appeal. Please include as much documentation as possible.

After reviewing your special circumstances documentation, your award package may remain the same or be increased based on the financial information that has been submitted. Submitting a request for special circumstances does not guarantee an adjustment will be made to your award package.

Due to recent guidance issued by the Department of Education, we can no longer accept documentation with any Personally Identifiable Information (PII) via unsecured methods (ie: email). PII is any data that could potentially identify a specific individual or any information used to distinguish one person from another. This includes documentation containing social security numbers, date of birth, etc. We are unable to accept documentation by email.

**To expedite processing, please submit all documentation via MyCHC Doc Uploader.
You may also mail, fax, or drop-off in person. PLEASE DO NOT EMAIL.**

Your documentation must contain an original signature. We cannot accept forms containing e-signatures, typed signatures, or e-pen.

Doc Uploader: my.chc.edu

Mail to: Financial Aid Office, Chestnut Hill College, 9601 Germantown Ave, Philadelphia, PA 19118

In-Person: Financial Aid Office, St Joseph Hall, First Floor, North Wing

Fax: (215) 242-7705

If you have any further questions, please contact our office and we will be happy to assist you further



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2020-2021 Special Circumstance Appeal Form

SECTION A: STUDENT INFORMATION

STUDENT NAME: _____ CHC ID #: _____

ADDRESS: _____
(Street / Apartment) City/State/Zip

PHONE: _____ EMAIL: _____

Please answer the following questions?

1. Did you/your family experience a financial hardship or unusual circumstance in 2019? _____ YES / _____ NO
2. Did you/your family experience a financial hardship or unusual circumstance in 2020? _____ YES / _____ NO

SECTION B: Special Circumstance Request

Please read this section carefully and select one of the following options. Based on the option you chose, please follow the instructions under the “REQUIRED DOCUMENTATION” column. You must submit a complete application, with original signatures and required documentation, otherwise your application will be considered incomplete and your appeal request will be denied.

Please select your circumstance	Required documentation
___ Significant loss of income due to termination or change in employment If loss occurred in 2019, you must submit this special circumstance form at least 8 weeks from the date of termination or change in employment	<ul style="list-style-type: none"> ▪ Submit a signed statement explaining the circumstance including dates ▪ Submit statement documenting retirement benefits ▪ Submit a letter from employer documenting employment status (full/part time/hour or salary reduction, termination) ▪ Submit a copy of your unemployment benefits statement ▪ Submit a copy of the last pay stub after separation from job ▪ Submit copies of documentation regarding severance pay ▪ Submit documentation of any other income received in the household ▪ Submit a signed copy of your 2018 Federal Tax Return and W-2's ▪ Submit a signed copy of your 2019 Federal Tax Return and W-2's ▪ Submit any other supporting documentation (Worker's Compensation, Disability, Disaster caused unemployment documentation)
___ High or unreimbursed medical and/or dental expenses paid Elective cosmetic or dentistry expenses will not be considered	<ul style="list-style-type: none"> ▪ Submit a signed statement explaining the circumstances ▪ Submit a summary of PAID unreimbursed medical expenses (deductible, co-pays, after tax insurance, prescription medications, expenses for durable medical equipment, and other amounts not covered by insurance) ▪ Submit copies of Cobra payments made ▪ Submit any other supporting documentation
___ Death of immediate family member who information is on the FAFSA	<ul style="list-style-type: none"> ▪ Submit a signed statement explaining the circumstances ▪ Submit a clear copy of death certificate ▪ Submit a signed copy of your 2018 Federal Tax Return ▪ Submit a signed copy of your 2019 Federal Tax Return ▪ Submit any other supporting documentation (ie: Obituaries)
___ Death of immediate family member who information is on the FAFSA	<ul style="list-style-type: none"> ▪ Submit a signed statement explaining the circumstances ▪ Submit a clear copy of death certificate ▪ Submit a signed copy of your 2018 Federal Tax Return ▪ Submit a signed copy of your 2019 Federal Tax Return ▪ Submit any other supporting documentation (ie: Obituaries)

Please select your circumstance	Required documentation
___ Divorce or separation after filing the 2020-2021 FAFSA	<ul style="list-style-type: none"> ▪ Submit a signed statement explaining the circumstance ▪ Submit a copy of a divorce decree or separation agreement. If no documentation exists, provided a signed statement indicating the date of separation/divorce ▪ Submit proof of separate address for both parents (i.e.: oil bill, cable bill, gas bill, water bill, electric bill, etc.). Credit card bills or medical bills are not valid proof ▪ Submit agreement of financial support payments, such as: alimony, child support, spousal support, dependent care ▪ Provide a list of family members, their age and relationship to the student, who currently live in the household, including if any of them will be attending college at least half time during the 2020-2021 academic year ▪ Submit a signed copy of your 2018 Federal Tax Return ▪ Submit a signed copy of your 2019 Federal Tax Return ▪ Submit any other support documentation
___ High education or family expenses	<ul style="list-style-type: none"> ▪ Submit a signed statement explaining the circumstances ▪ Documentation from private school showing enrollment status of students, expected graduation date, and cost of education. Do not include college education ▪ Submit a detail listing and documentation proving support to the student during the academic year ▪ Submit private elementary school billing statements and proof of payments such as cancelled checks, wire transfer records, etc. ▪ Secondary special education, please provide supporting documentation proving student is required to attend school and of all expenses in 2018 and 2019 ▪ Submit any other supporting documentation
___ Other circumstances We are unable to consider appeals based on circumstances that include but not limited to: high consumer debt, personal expenses (pets, cars, housekeepers, vacations, sports, etc.), fraternity or sorority expenses, roof replacement, car replacement, expenses that have not yet occurred, rent, mortgage, insurance, etc.	<ul style="list-style-type: none"> ▪ Submit a signed statement explaining the circumstances ▪ One Time Lump Sum: Provide detailed explanation and support documentation. ▪ Withdrawal of IRA/Pension in 2018, 2019 or 2020: provide detailed explanation of reason and support documentation such as copy of 1099R or statement from IRA/Pension company ▪ Submit any other supporting documentation

Please answer the following questions?

1. If you are claiming a significant loss of income due to termination or change in employment, has you/your parent returned to work in 2020? ___ YES ___ NO ___ Not Applicable

- a. Submit a letter from your current employer, on official letterhead with valid contact information, verifying your start date, hours, and salary
- b. Submit a copy of your most recent paystub(s).

SECTION C: Student/Parent Certification

Please read each statement carefully. In order for us to process your review request you must read and sign your application with an original signature. Original signatures are required by the student and at least one parent. We will not accept forms or documentation with electronic signatures. If you are deemed independent by Department of Education (ED) or Chestnut Hill College, only the student will need to sign.

- I/We agree that if any changes occur we will notify the Financial Aid Office immediately in writing
- I/We understand that the submission of an appeal does not release the student from the responsibility of staying current with their bill and understand that there is no guarantee that an appeal will be approved

STUDENT NAME: _____ CHC ID #: _____

- I/We understand that the appeal will be reviewed within 2 to 3 weeks from the time all documentation is received and that additional processing time may be necessary in the event more information is required. The Financial Aid office will notify the student via email that outcome of the appeal decision

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Please Read Carefully: *By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that if I purposely give false or misleading information on this worksheet it may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment, or both, under provisions of the United State Criminal Code and disciplinary actions by Chestnut Hill College. If I have any questions or concerns, I will contact Chestnut Hill College (CHC) Financial Aid Office immediately. Your documentation must contain an original signature. We cannot accept forms containing e-signatures, typed signatures, or e-pen.*

Student Signature: (original): _____ (required)

Student Name (print): _____

Date: _____

Parent Signature: (original): _____ (required)

Parent Name (print): _____

Date: _____