



**CHESTNUT  
HILL  
COLLEGE**

9601 Germantown Avenue  
Philadelphia, PA 19118

### 2025-2026 Special Circumstance Request Form

Financial Aid eligibility for the 2025-2026 academic year is based on 2023 family income. Chestnut Hill College understands that families experience changes in income or other circumstances not reflected in the information provided on the Free Application for Federal Student Aid (FAFSA). Therefore, it is possible for students and parents to appeal their financial aid eligibility if they have a special circumstance that is beyond their control.

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

- Significant Loss of income
- High or Unreimbursed medical and/or dental expenses
- Death of immediate family member whose information is on the FAFSA
- Divorce or separation after filing the 2025-2026 FAFSA
- High education or family expenses
- One-Time Payment Received

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 be modified. Submitting a request for special circumstances does not guarantee any adjustments will be made.

**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). 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 Document Upload.**

**You may also drop-off in person to the Financial Aid Office, St Joseph Hall, First Floor, Room 147**

**DO NOT EMAIL.**

**Your documentation must contain an original signature. We cannot accept forms containing typed signatures.**

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





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#### 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 2024?  
\_\_\_\_\_ YES \_\_\_\_\_ NO
2. Did you/your family experience a financial hardship or unusual circumstance in 2025?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

#### SECTION B: Special Circumstance Request

Please select one of the following options. Based on the option you choose, 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
<p>____ Significant loss of income due to termination or change in employment.</p> <p><b>If a loss occurred in 2025, you must submit this special circumstance form at least 8 weeks from the date of termination or change in employment.</b></p>	<ul style="list-style-type: none"><li>▪ Submit a signed statement explaining the circumstance including dates</li><li>▪ Submit statement documenting retirement benefits</li><li>▪ Submit a letter from employer documenting employment status (full/part time/hour or salary reduction, termination)</li><li>▪ Submit a copy of your unemployment benefits statement</li><li>▪ Submit a copy of the last pay stub after separation from job</li><li>▪ Submit copies of documentation regarding severance pay</li><li>▪ Submit documentation of any other income received in the household</li><li>▪ Submit a signed copy of your 2023 Federal Tax Return and W-2's</li><li>▪ Submit a signed copy of your 2024 Federal Tax Return and W-2's</li><li>▪ Submit any other supporting documentation (Worker's Compensation, Disability, Disaster caused unemployment documentation)</li></ul>
<p>____ High or unreimbursed medical and/or dental expenses paid. <b>Elective cosmetic or dentistry expenses will not be considered.</b></p>	<ul style="list-style-type: none"><li>▪ Submit a signed statement explaining the circumstances</li><li>▪ 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)</li><li>▪ Submit copies of Cobra payments made</li><li>▪ Submit any other supporting documentation</li></ul>
<p>____ Death of immediate family member whose information is on the FAFSA.</p>	<ul style="list-style-type: none"><li>▪ Submit a signed statement explaining the circumstances</li><li>▪ Submit a clear copy of death certificate</li><li>▪ Submit a signed copy of your 2023 Federal Tax Return</li><li>▪ Submit a signed copy of your 2024 Federal Tax Return</li><li>▪ Submit any other supporting documentation (ie: Obituaries)</li></ul>





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STUDENT NAME: \_\_\_\_\_ CHC ID #: \_\_\_\_\_

Please select your circumstance	Required documentation
____ Divorce or separation <b>after</b> filing the 2025-2026 FAFSA	<ul style="list-style-type: none"><li>▪ Submit a signed statement explaining the circumstance</li><li>▪ Submit a copy of a divorce decree or separation agreement. If no documentation exists, provided a signed statement indicating the date of separation/divorce</li><li>▪ 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</li><li>▪ Submit agreement of financial support payments, such as: alimony, child support, spousal support, dependent care</li><li>▪ 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 2025-2026 academic year</li><li>▪ Submit a signed copy of your 2023 Federal Tax Return</li><li>▪ Submit a signed copy of your 2024 Federal Tax Return</li><li>▪ Submit any other support documentation</li></ul>
____ Other circumstances <b>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.</b>	<ul style="list-style-type: none"><li>▪ Submit a signed statement explaining the circumstances</li><li>▪ One Time Lump Sum: Provide detailed explanation and support documentation.</li><li>▪ Withdrawal of IRA/Pension in 2023, 2024, or 2025: provide detailed explanation of reason and support documentation such as copy of 1099R or statement from IRA/Pension company</li><li>▪ Submit any other supporting documentation</li></ul>

Please answer the following question:

1. If you are claiming a significant loss of income due to termination or change in employment, have you/your parent returned to work in 2025?

\_\_\_\_ YES \_\_\_\_ NO \_\_\_\_ Not Applicable

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





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**SECTION C: Student/Parent Certification**

In order for us to process your request, you must read and sign your application. 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 the 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.
- 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 the outcome of the appeal decision.

**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 wet signature.**

Student Signature: \_\_\_\_\_ (required)

Student Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ (required)

Parent Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

