

2025-2026 Special Circumstances Appeal Form

Purpose: The Financial Aid Office recognizes that you may have extenuating circumstances that affect your financial state. In some cases, the 2023 financial situation reported on the FAFSA does not accurately reflect your current financial situation or there are eligible expenses that can be considered which exceed what is already accounted for in FAFSA's calculations. If this is the case, the student can request a review of the SAI and financial aid eligibility through a process called Special Circumstances Appeal.

Please note: Appeal approval is not guaranteed. Not all financial changes or expenses qualify and those that do are not guaranteed to result in an increase in the financial aid awarded. Requests, if approved, are granted on a one-time, case-by-case basis. All review decisions are final.

Requirements:

- You must have the 2025-26 FAFSA completed. This can be done online at www.studentaid.gov.
- This form, plus all requested documentation, must be submitted to the financial aid office. All required documentation must be submitted no later than 30 days prior to the end of the enrollment period. Please note that we cannot account for circumstances that happen beyond the 2025 calendar year.
- If you did not utilize the IRS Data Transfer Exchange when completing the FAFSA, we may require a copy of 2023 Tax Return Transcript (or signed copy of the 2023 Tax Return) and W2's for the applicable party.
- If the FAFSA application was flagged to provide additional documentation for verification, then the verification must be completed before the appeal review can proceed.

Upon receipt of all required documentation, appeals will be reviewed by the Financial Aid Office to determine if the circumstances comply with the Department of Education's regulations governing special circumstances appeals. While your appeal review may be processed quicker, please allow 4 – 6 weeks for processing. The results of this appeal will be sent to the student via their Chaminade student email address.

Request Statement:

Please explain below your situation and the special circumstances that you are requesting for review. Be specific, including dates and amounts if applicable. If additional space is needed, please attach a separate sheet to this form and include the student's name and Chaminade ID number at the top.

STUDENT NAME: _____ STUDENT CUH ID# _____

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Please complete the section of the form that applies to your situation below. Failure to submit the necessary documentation could result in a delay in processing or appeal denial. Each section below details the documentation that will be required in addition to what is listed at the top of this form.

Reason For Request: *Check the reason that you are applying for the request*

- ☐ 1. Change in marital status- including divorce/separation and death of parent/spouse

Required Documentation: Copy of separation order or divorce decree (if no legal document is available, provide proof of separate residence such as lease(s), mortgage(s), utility bill(s), etc.); copy of death certificate for loss of parent/spouse.

Please check one of the following:

☐ Separated ☐ Divorced ☐ Widowed Date marital status changed: _____
MM/DD/YY

- ☐
- 2. Significant change in income between 2023 taxes and 2024 taxes**

Required Documentation: Signed & dated copies of 2024 1040 tax return and W-2(s) Check
the box in front of the party for which income changed between 2023 and 2024 taxes

Independent students: ☐ Student ☐ Spouse
Dependent students: ☐ Student ☐ Parent(s)

STUDENT NAME: _____ STUDENT CUH ID# _____

☐ **3. Significant change in income between 2023 taxes and 2025 projected year income**

Required Documentation: Signed & dated copies of 2024 1040 tax return and W-2(s), and a copy of the most recent pay stub/statement for all jobs worked in 2025, proof of unemployment compensation, etc. (Note that we will not review projected 2025 income requests until July 2025.)

Check the box in front of the party for which income changed between 2023 and 2025.

Independent students: ☐ Student ☐ Spouse

Dependent students: ☐ Student ☐ Parent(s)

Please complete the following Anticipated Income Table

Anticipated Income 2025 Calendar Year	Parent 1	Parent 2	Student	Spouse <i>(if married)</i>
Wages/salaries, (including severance pay, disability payments and any other income from work)				
Other taxable income (unemployment compensation, interest/dividend income, etc.) List type(s) of income on attached statement				
Child support received				
Other untaxed income (payments to tax deferred pension/savings plans, workers compensation, etc.). List type(s) of income on attached statement.				
TOTAL Anticipated Income for 2025				

☐ **4. Loss of child support**

Required Documentation: Documentation that details the change in child support payments from the state Child Support Agency.

☐ **5. High out-of-pocket medical or dental expenses**

Required Documentation: Schedule A or itemized spreadsheet that totals expenses, along with documentation supporting listed expenses not covered or reimbursed by insurance or HRA/HAS/FSA plans (health reimbursement, savings, or flexible spending account, etc.) *As a general rule, these expenses normally need to exceed \$3,500 before they may have an impact on financial aid eligibility.*

☐ **6. Private elementary/secondary school tuition**

Required Documentation: Proof of payments, such as a detailed statement of account.

☐ **7. College tuition paid for siblings**

Required Documentation: Tuition statement OR financial aid letter from the college/university indicating tuition, fees, housing, and food charges minus financial aid and/or discounts received.

☐ **8. Other-**

Required Documentation: Please explain in the Request Statement above the circumstances that are leading to this request and submit any documentation supporting those circumstances. *Examples of eligible expenses: dependent care, nursing home, disability, etc.* **Consumer debt is not eligible for consideration under special circumstances.**

STUDENT NAME: _____ STUDENT CUH ID# _____

By signing this form,

- I give permission to the Financial Aid Office to verify any information that I provide on this form. I understand that this verification may include the request for tax or financial documents.
- I certify that any, and all, the information provided on this form is correct to the best of my knowledge.
- In accordance with federal regulations, I understand that if I purposely give false or misleading information on this form, the FAFSA, or Verification, I am liable for cancellation or repayment of all or part of my financial aid and may be fined, sentenced to jail or both.
- I understand that reporting a Special Circumstance does not guarantee a recalculation of my Student Aid Index (SAI) and/or an increase in financial aid funding.

Student's handwritten signature

Date

Parent's handwritten signature
(required if appeal is based on parental financial circumstances)

Date