

For Office use only	<b>PROJ27</b>
___ Mail ___ Counter ___ Email ___ Fax ___ Other	
Received by: _____	Date Received: _____
Entered by: _____	Date Entered: _____
<input type="checkbox"/> Document Complete	File Location: _____

## 2026-2027 Projected Year Income Petition

*At Holyoke Community College, we want to make sure that everyone has an equal chance to go to college, no matter who they are. We know that getting money to pay for college is important, so we promise to be fair when we give out financial aid. We also want to make sure that trans and gender-expansive students don't face any barriers in accessing financial aid. If you have questions or concerns about this, you can talk to the financial aid office.*

Student's Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

You may request a review of your financial aid package at any time due to a change in your financial circumstances that affect the income or data reported on your 2026-2027 FAFSA or for unusual situation(s) that your family may be facing.

Please be aware that while we cannot make changes to the rules/regulations that govern state or federal financial aid funds, we can look at job loss, one-time financial events, divorce or separation after the FAFSA was filed, or unusual medical expenses. If you have some other situation, you would like us to review, please feel free to ask the staff in the Financial Aid office for help. A review of your situation does not mean a change in your financial aid eligibility or award.

If you would like to request a review, please submit this form and a signed account/written explanation of your request with details, dates, and supporting documentation. For example, if your income went down, explain why, when, and for how long, and what you expect your new income to be. If you have unusually high medical expenses, explain when they started and how much it was. It is best to provide as much detail as possible and a phone number where we can reach you.

On page 2, we have provided a list of the standard documentation items we might request for some of the usual financial appeals we encounter. The documentation provided should include your HCC ID#. If we need further documentation, we will request that after looking at your request. If we make changes to your financial aid package, you will receive a revised award letter/email. Please check your HCC email regularly. Response time will vary based on our volume of requests at the time we receive yours.

If you have questions, contact the Financial Aid Office at (413) 552-2150 or email [financialaid@hcc.edu](mailto:financialaid@hcc.edu).

### Section 1: Circumstances Supporting Documentation

**All appeals must include the following:**

- A signed letter that explains your special circumstance.
- All 2024 W2's and/or all 1099's (mask the first five numbers of all SSNs).
- Parent's and/or Student's signed 2024 Federal Tax Transcript/or 1040 tax return, if applicable (mask the first five numbers of all SSNs).

*Please review and indicate which option below applies to you and/or your parent(s). The required supporting documentation is listed below each option.*

- **Loss of Employment/Income (laid Off, reduction of hours) Income earned was/will be less than what was earned in 2024. We will either use 2025 actual income or 2026 projected income for 2026-2027 change in Projected Year Income Appeals however, we will not project out 2026 income until at least 6 months into the calendar year.**
  - Unemployment Award Letter
  - Termination notice from Employer
  - Copy of the signed 2025 IRS tax return for student and/or parent(s)
  - Copy of the last 2 latest paycheck stubs issued from employer (should income year to date gross amount) for student and/or parent(s) for projected 2026 income. We will not project out 2026 income until at least 6 months into the calendar year.
  
- Other Loss of Income (Alimony, Child Support, Retirement/Pension, Social Security (taxes), Workers' Compensation, Military Discharge, etc.) Benefits received in 2024 have ceased or been reduced.**
  - 2025 Benefits Statement listing total amount received.
  - Revised Benefits statement and/or court documents listing updated amount to receive and effective date.
  
- Legal Separation, Divorce, or Separation and the divorce occurred AFTER filing the FAFSA**
  - Alimony (Spousal Support) and/or Child Support Agreements, proof of when payments start/end, if applicable
  - Divorce decree or legal separation agreement and proof of separate residences, i.e., utility bills.
  
- Death of a Parent or Spouse, if applicable if death occurred AFTER filing the FAFSA.**
  - Death Certificate.
  
- One-time Non-Recurring lump sum payment received in 2024.**
  - Documents detailing one-time payment amount, source and reason.
  
- Out-of-pocket Medical or Extraordinary Expenses were paid**
  - Documents detailing out-of-pocket expense amount(s) not covered by insurance, source(s) and reason(s)

**Certification (parent signature required if student is dependent)**

To the best of my knowledge, the information in this request is true.

---

Student Signature

---

Date

---

Parent Signature (Dependent Students)

---

Date

**Step 2:** Please identify the special circumstance(s) from the list below and check the applicable box(es) for the person(s) affected. **Note:** All special circumstances for which you wish for us to consider you must provide a signed personal statement detailing the special circumstance. You must also provide all supporting documentation from the list below as applicable. **\* Additional documentation beyond the list below may be requested.**

Special Circumstance(s)	Explanation	Person(s) Affected	Supporting Documentation, if applicable
Employment Change	Student/spouse and/or your parent(s) had a significant loss of income in 2025 and/or 2026 due to a period of employment, a change of job, or going from full-time to part-time employment. Loss of employment or substantial reduction in income from work must have lasted at least 6 weeks.	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>•2024 IRS Tax Return (signed if not provided with verification or on FAFSA with IRS data retrieval), 2024 W2's and/or 1099 statements</li> <li>•2025 IRS Tax Return (signed), 2025 W2's and/or 1099 statements</li> <li>•Unemployment payment record</li> <li>•Letter from employer(s) on letterhead, certifying the last date of employment or reduction of work hours or pay rate</li> <li>•Most recent paystubs</li> <li>•Personal letter of explanation</li> </ul>
Income Loss	Student/spouse and/or your parent(s) earned income in 2023 but were unable to earn income in 2025 or 2026 and/or because of a disability or natural disaster that occurred in 2025 or 2026.	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>•2024 IRS Tax Return (signed if not provided with verification or on FAFSA with IRS data retrieval), 2024 W2's and/or 1099 statements</li> <li>•2025 Tax Return (signed), 2025 W-2's and/or 1099 statements</li> <li>•Statement from the agency with effective dates of benefits</li> <li>•Most recent paystubs</li> <li>•Personal letter of explanation</li> </ul>
Benefit Loss	Student/spouse and/or parent(s) received unemployment compensation and/or untaxed benefits in 2024 or 2025 but have completely lost the benefit in 2025 and/or 2026. The untaxed income or benefit must be from a public or private agency, from a company, or from an authorized individual due to a court order.	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>•2024 IRS Tax Return (signed if not provided with verification or on FAFSA with IRS data retrieval), 2024 W2's and/or 1099 statements</li> <li>•2025 IRS Tax Return (signed), 2025 W2's and/or 1099 statements</li> <li>•Statement from agency with effective date(s) of loss/cancellation of benefits</li> <li>•Personal letter of explanation</li> </ul>
Divorce/Separation	Student or parent separated or divorced after filing a FAFSA and are living apart.	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>•2024 IRS Tax Return (signed if not provided with verification or on FAFSA with IRS data retrieval), 2024 W2's and/or 1099 statements</li> <li>•2025 IRS Tax Return (signed), 2025 W-2s and/or 1099 statements (of the custodial parent if the student is dependent)</li> <li>•Copy of divorce decree if not legally separated and proof of different addresses (utility bill, lease indicating period of separation)</li> <li>•Child support received or paid</li> <li>•Personal letter of explanation</li> </ul>
Death	Death of spouse or parent after filing a FAFSA.	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>•2024 IRS Tax Return (signed if not provided with verification or on FAFSA with IRS data retrieval), 2024 W2's and/or 1099 statements</li> <li>•2025 IRS Tax Return (signed), 2025 W-2s and/or 1099 statements</li> <li>•Copy of death certificate</li> <li>•Social Security Benefits (if applicable)</li> <li>•Most recent paystubs</li> <li>•Personal letter of explanation</li> </ul>
Other	Miscellaneous	<input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<ul style="list-style-type: none"> <li>•Personal letter of explanation</li> <li>•TBD</li> </ul>