Confirmation of Dislocated Worker Status

Student Name ___________________________ Student ID Number ___________________________

On your FAFSA form you indicated that either you or your parent is a dislocated worker. In general, a person may be considered a dislocated worker if he or she is: (1) receiving unemployment benefits due to being laid off or losing a job and is unlikely to return to a previous occupation (2) has been laid off or received a lay-off notice from a job (3) was self-employed but is now unemployed due to economic conditions or natural disaster (4) is a displaced homemaker. A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home mom or dad), is no longer supported by the husband or wife, is unemployed or underemployed, and is having trouble finding or upgrading employment.

1. Which of the following best reflects your situation:
   - Parent is a dislocated worker
   - Parent is a displaced homemaker
   - Student or spouse is a dislocated worker
   - Student or spouse is a displaced homemaker
   - Neither the student nor student's spouse is a dislocated worker
   - Neither the mother/stepmother nor father/stepfather is a displaced homemaker

2. Who is the dislocated worker/displaced homemaker?
   - Student
   - Spouse
   - Mother/Stepmother
   - Father/Stepfather

3. Explain the reason for designation as dislocated worker/displaced homemaker (please attach copies of appropriate documentation to support this status, i.e. unemployment statement, letter of termination, etc.)

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
___________________________________________________________________________________________________________________________________________

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

__________________________________________  ____________________________
Student's Signature                                      Date

__________________________________________  ____________________________
Parent's Signature                                       Date

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Updated 9/8/17