2021-2022 DISLOCATED WORKER VERIFICATION

Student Name_____ **ID #**_____

You indicated on your FAFSA that you, your spouse, or a parent are a dislocated worker. **Please complete the following sections and attach supporting documentation (see column 2 below).**

Identify the dislocated worker at the time of FAFSA submission and for the 2019 tax year.

___Parent   ___Student   ___Spouse (if married Student)

Please review the five scenarios below and indicate the one that best describes the type of dislocation:

✓ ONE	IF YOU ARE:	REQUIRED DOCUMENTATION:
☐	Terminated or laid off based on closing or impending closing of facility, plant, or enterprise.	Documentation of unemployment benefits showing effective dates and a statement of current employment status.
☐	Self-employed but is now unemployed due to natural disaster or economic conditions in the community.	Detailed explanation of your current employment situation and a copy of a tax return transcript for each of the 2 years prior.
☐	Spouse of Active Duty member who is unemployment or underemployed due permanent change in duty station.	Documentation of Armed Forces relocation or documentation of active duty spouse and written explanation of your current employment situation
☐	Displaced Homemaker: Stay at home mom/dad, is no longer supported by any family member, or is unemployed or underemployed and is having trouble finding or upgrading employment	Divorce or legal separation papers or death certificate for spouse **_and_** a written detailed explanation of your current situation
☐	**Based on this information you are NOT considered a Dislocated Worker; please log into your FAFSA and correct the "dislocated worker question" by indicating "no" and submit.**	

I certify that the information provided is true, complete, and accurate to the best of my knowledge (electronic signatures not accepted).

_____/_____   _____/_____
Student's Signature   **Date**   **Parent/Spouse's Signature**   **Date**