



*STUDENT FINANCIAL ASSISTANCE & SCHOLARSHIP
2011 -2012*

FOR OFFICE USE:

DATE:

Dislocated Worker Verification Form

Student's Name: _____ Student ID #: _____
Student's Email: _____ Student's Phone #: _____

Dependent Students: According to our records, you answered YES to question 83 on the Free Application for Federal Student Aid (FAFSA) stating that your parent is a dislocated worker.

Independent Students: According to our records, you answered YES to question 101 on the Free Application for Federal Student Aid (FAFSA) stating that you or your spouse is a dislocated worker.

In general, a person may be considered a dislocated worker if he or she:

- is receiving unemployment benefits due to being laid off or losing a job and is unlikely to return to a previous occupation; or,
- has been laid off or received a lay-off notice from a job; or,
- was self-employed but is now unemployed due to the economic conditions or natural disaster; or,
- 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.

If a person quits work, generally he or she is not considered a dislocated worker, even if, for example, the person is receiving unemployment benefits.

DIRECTIONS:

Dependent Students: Answer question 1 below about your parents.

Independent Students: Answer question 2 below about yourself and your spouse, if married.

1. *As of today, is either parent a dislocated worker?*

_____ Yes, my parent is a dislocated worker. **Please attach supporting documentation, copies of: layoff notice, last pay stub, 2010 Federal Tax Return all schedules & W-2's, notice of unemployment insurance benefit letter, etc. (You must complete the entire backside of this appeal.)**

_____ No, I made a mistake on the FAFSA. I authorize corrections to be made to my Student Aid Report.

2. *As of today, are either you or your spouse, a dislocated worker?*

_____ Yes, I am, or my spouse is, is a dislocated worker. **Please attach supporting documentation, copies of: layoff notice, last pay stub, 2010 Federal Tax Return all schedules & W-2's, notice of unemployment insurance benefit letter, etc. (You must complete the entire backside of this appeal.)**

_____ No, I made a mistake on the FAFSA. I authorize corrections to be made to my Student Aid Report.

By signing this form, each person certifies that all of the information reported to qualify for federal student aid is complete and correct.

WARNING: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

Student's Signature: _____ Date: _____

Parent's / Spouse's Signature: _____ Date: _____

1. **INCOME REDUCTION:** [] Student/Spouse [] Parents of Dependent Student

- a) Dependent Student Income **WILL NOT** be considered for an appeal.
- b) A student or parent that terminates their employment willingly for purposes of attending college **WILL NOT** be given consideration.

Reason for Income Reduction:

- [] Unemployment: Date: _____
Please attach supporting documentation, copies of: layoff notice, last pay stub, 2010 Federal Tax Return all schedules & W-2's, notice of unemployment insurance benefit letter, etc.
- [] Change of Employment (reduction in hours or pay rate, etc.): Date: _____
- [] Disability: Date: _____
- [] Divorce or Separation: Date: _____
- [] Death: Date: _____ Relationship: _____
- [] One Time Income: (Examples: inheritance, back year pay, social security, IRA or pension distribution) Date: _____ Type: _____ Amount: _____ (supporting documentation must be submitted)

2. Complete all portions of the anticipated income chart below. **If the answer is zero, write "0" on the appropriate line.**

ANTICIPATED INCOME FOR 2011 <i>Please list YEARLY totals</i>	Father	Mother	Student	Spouse
Wages, salaries, tips	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment Insurance	_____	_____	_____	_____
Alimony/Spousal Support	_____	_____	_____	_____
Other Taxable Income	_____	_____	_____	_____
Social Security Benefits	_____	_____	_____	_____
Supplemental Security Income	_____	_____	_____	_____
AFDC/TANF	_____	_____	_____	_____
Child Support Received	_____	_____	_____	_____
Worker's Compensation	_____	_____	_____	_____
Housing, food and other living allowances	_____	_____	_____	_____
Money from Family and Friends	_____	_____	_____	_____
Money Paid on Your Behalf	_____	_____	_____	_____
Other Untaxed Income	_____	_____	_____	_____
Total Anticipated 2011 Income	_____	_____	_____	_____

3. **Please explain the change in income/circumstances you are reporting:**

The above information is true and correct to the best of my knowledge.

Student's Signature: _____ Date: _____

Parent's / Spouse's Signature: _____ Date: _____