DISLOCATED WORKER
Verification Form

On the 2015-16 Free Application for Federal Student Aid (FAFSA), you indicated that you, your spouse, or a parent are a dislocated worker. Information provided on this form as well as additional supporting documentation is needed to determine whether the dislocated worker status applies. **NOTE: A person who voluntarily quits his/her job or who is terminated for cause is not considered to be a dislocated worker even if the person is receiving unemployment benefits.**

Name of Dislocated Worker

Relationship to Student

A dislocated worker is defined in the [Workforce Investment Act of 1998 (29 USC 2801)](https://www.law.cornell.edu/uscode/text/29/part-25) as a person who falls into one of the following categories. Check the box that applies to your circumstances and provide the requested documentation to the Financial Aid Office.

- Someone who is eligible for or receiving unemployment benefits (or who has exhausted eligibility for unemployment benefits or was ineligible because of insufficient earnings or because the type of services performed weren't covered by the state's unemployment compensation law) because he/she was laid off or lost a job (or has received a layoff or termination notice) and is unlikely to return to a previous occupation.

  **DOCUMENTATION:** Please provide a statement of unemployment benefits, the separation or termination notification from employer, and attach a signed statement from the dislocated worker explaining the change in employment circumstances.

- Someone who is terminated or laid off from employment (or received a termination or layoff notice) because of a permanent closure of, or substantial layoff at, a plant, facility or enterprise.

  **DOCUMENTATION:** Please provide the layoff notification from employer, or notification of facility closure.

- Someone who is self-employed and is unemployed because of a natural disaster or because of the general economic conditions in his or her community.

  **DOCUMENTATION:** Please provide proof of income loss and/or natural disaster, and attach a signed statement from the dislocated worker explaining the change in employment circumstances.

- Someone who is a displaced homemaker.

  **DOCUMENTATION:** Please provide legal divorce papers or death certificate, and attach a signed statement from the dislocated worker explaining both the change in financial circumstances and current employment outlook.

Signature

Date