

2017-2018 Dislocated Worker or Displaced Homemaker

Student's Name (Last) (First) BSU ID # Student's Date of Birth

COMPLETE ALL SECTIONS

According to your FAFSA, you, your spouse, or your parent(s) have identified yourself/themselves as a dislocated worker or displaced homemaker. In general, a person is considered a dislocated worker or displaced homemaker if they meet one of the following conditions:

- They have lost their job.
- They have been laid off or received a lay-off notice from their job.
- They are receiving unemployment benefits due to being laid off or losing a job and are unlikely to return to a previous occupation.
- They are self-employed but are unemployed due to economic conditions or natural disaster.
- They are a displaced homemaker. A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home parent), is no longer supported by a spouse, is unemployed or underemployed, and is having trouble finding or upgrading employment.

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

Complete fields below and return with requested documentation.

A. Dislocated Worker or Displaced Homemaker

Name of Dislocated Worker or Displaced Homemaker: _____

STATUS	DOCUMENTATION REQUIRED:
<input type="checkbox"/> Dislocated Worker	<ul style="list-style-type: none"> • A letter of certification showing that your parent (if a dependent student) or you/your spouse (if an independent student) are classified as a Dislocated Worker. For help in determining your dislocated worker status, contact the Maryland Department of Labor- Workforce Innovation and Opportunity Act (WIOA) or the Workforce Investment Act—Title 1-B Dislocated Worker Program provided for your state. <p align="center">OR</p> <ul style="list-style-type: none"> • A Copy of termination letter or layoff notice from former employer on company letterhead
<input type="checkbox"/> Displaced Homemaker	<ul style="list-style-type: none"> • Verification of your dependence on the income of another family member (i.e.: tax documents). <p align="center">AND</p> <ul style="list-style-type: none"> • Verification of change in living arrangements through court documents, divorce decree, separation agreement, attorney's statement, etc.
<input type="checkbox"/> I am not a Dislocated Worker or Displaced Homemaker	<ul style="list-style-type: none"> • Your records will be updated. No further action or documentation required.

B. Certification Statement & Signatures

By signing below, I acknowledge that I have read and understand the information on this form, that I have appropriately attached all supporting documents, and certify that all information submitted is accurate and true to the best of my knowledge. I understand that submitting this form does not guarantee that my request will be granted.

Printed Name of Dislocated Worker/Displaced Homemaker

Relationship to student (if other than student)

Signature of Dislocated Worker/Displaced Homemaker

Date

Student's Signature

Date