

Student's Name \_\_\_\_\_ Student ID# \_\_\_\_\_

On your 2009-10 FAFSA you answered "Yes" or "Don't Know" to question 85 which asked "As of today, is either of your parents a dislocated worker?" or to question 103 which asked "As of today, are you (or your spouse) a dislocated worker?".

NDSU verifies dislocated worker status prior to disbursing federal financial aid. To do so, we ask that you read the statements below and mark all that apply and return this form, along with the requested documentation, to the address at the top of this form. *Your 2009-10 financial aid will be on hold until this form is received.*

**If a person quits work, is fired for unsatisfactory performance, is laid off due to seasonal work (i.e. construction, teacher) or was previously laid off but is now employed, he or she is NOT considered a dislocated worker. Those who qualify as a dislocated worker have generally been laid off or terminated due to the effects of the economy, company downsizing, merger, going out of business, etc.**

Please mark the criteria below that classify you/your family member as a dislocated worker. **If none of the statements apply, please check the box at the bottom, sign and return this form.**

\_\_\_\_\_ Has been laid off or received a lay-off notice and is unlikely to return to the previous occupation

- Attach a letter from the employer stating the date of the lay off and what the likelihood is that the employee will return to the job. If a letter was not originally issued, please contact your previous employer and request one.

\_\_\_\_\_ Was self-employed but is now unemployed due to economic conditions or natural disaster

- Attach a statement explaining the hardship or natural disaster and how it led to or caused unemployment.

\_\_\_\_\_ Is a displaced homemaker who previously provided unpaid services to the family (i.e. 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.

- Attach statement explaining what unpaid services the displaced homemaker provided and why the homemaker is no longer supported by the husband/wife.

***If you checked any of the statements above, complete the information below. Also, if you/your spouse/parent had a reduction of income from 2008 to 2009 and would like your eligibility re-evaluated, please call Bison Connection at 701-231-6200 to request a Special Circumstance Form.***

Name of Dislocated Worker \_\_\_\_\_ Relationship to Student: Self Parent Spouse (Circle one)

Date Person became a Dislocated Worker \_\_\_\_/\_\_\_\_/\_\_\_\_

Has the Person found employment since completing the FAFSA as a Dislocated Worker? YES NO (Circle one)

Does the Dislocated Worker receive unemployment benefits? YES NO (Circle one)

- If yes, date he/she began collecting the benefits \_\_\_\_/\_\_\_\_/\_\_\_\_ Monthly amount received \$ \_\_\_\_\_
- If you answered yes, please attach letter verifying your qualification for unemployment benefits.

Check this box if none of the statements above apply to you/your family members.

Sign, and return this form to Student Financial Services at the address above or drop off at Bison Connection in the Memorial Union.

***I certify that the information provided on this form is complete and true.***

**Student's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_**