



## 2023–24 Independent Student Dislocated Worker Verification Worksheet

On the 2023–24 academic year FAFSA, you indicated that you or your spouse are a dislocated worker. This form is to confirm that you meet the FAFSA criteria for the “dislocated worker” status. You must complete and sign this worksheet, and fax, upload or mail it to the Office of Financial Aid. You may be asked to provide additional information. If you have any questions about this form, contact our office so your financial aid will not be delayed.

|   |                      |                             |
|---|----------------------|-----------------------------|
| _____                                       | _____                | _____                       |
| Student’s last name                         | Student’s first name | Student’s QU ID#            |
| _____                                       |                      | _____                       |
| Student’s street address (include apt. no.) |                      | Student’s home phone number |
| _____                                       | _____                | _____                       |
| City  | State                | Zip                         |
| _____                                       |                      | _____                       |
|   |                      | Student’s cell phone number |

As of the date you filed the FAFSA, who did you indicate as a dislocated worker: \_\_\_\_\_

For FAFSA purposes, check the appropriate box for your situation. Please note supporting documentation may be requested.

- Student or spouse is currently receiving unemployment benefits after being laid off or losing a job and is unlikely to return to a previous occupation.
- Student or spouse was laid off or received notice of a layoff from a job.
- Student or spouse was self-employed but is now unemployed because of economic conditions or natural disaster.
- Student or spouse is a dislocated homemaker looking to return to the workforce but is currently unemployed or underemployed and is having difficulty securing or upgrading employment.
- DOES NOT APPLY – If the individual listed does not meet any of the FAFSA criteria to be considered a dislocated worker, we will correct your FAFSA reporting.

### Certification and Signatures

I certify that all of the information reported on this worksheet is complete and accurate.

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

|                                    |       |
|------------------------------------|-------|
| _____                              | _____ |
| Student’s signature (required)     | Date  |
| _____                              | _____ |
| Spouse’s signature (if applicable) | Date  |

*Please mail, email, upload to our secure document portal, or fax this signed and dated worksheet to the Office of Undergraduate Financial Aid listed above.*