2011-2012 DISLOCATED WORKER VERIFICATION FORM Grambling State University Office of Student Financial Aid and Scholarships

Name:	SSN:
Address:	City/State/Zip:
administrators to determine that a stuintended to verify the parent's status a	I, federal guidelines permit financial aid dent's parent is a dislocated worker. This form is as reported on the 2011/12 Free Application for ent who reported their parent is a dislocated worker:
return to previous occupation; Self-employed but unemployed ofDisplaced homemaker (previous	ts due to being laid off, losing job or unlikely to due to economic conditions or natural disaster; or ly provided unpaid services to the family, no longer ed or underemployed, and having trouble finding or
 Submit one original letter of ver An Unemployment A Human Resource Unemployment ber Proof of being self-e Proof of being a dis 	Office; es Office of previous job; nefits statement; employed; or
Student must have a completed on file.Please attach verification information.	Free Application for Federal Student Aid (FAFSA)
the above supporting documentation w	nd complete. I understand that failure to provide rill affect my status to receive federal financial aid. ng information, you may be fined up to \$20,000, sent
Student's signature	Date