Please Use Black or Blue Ink

Student Name: ____________________________

OSU Banner ID
("A" plus 8 digits)

_________________  ________________

We are requesting the following information because of a change you made to the dislocated worker question on your 2016-2017 Free Application for Federal Student Aid (FAFSA). Please answer the following questions:

Are you (or your spouse) a dislocated worker? YES NO (circle one)

Except for the spouse of an active duty military member of the Armed Forces, if a person quits work, generally he or she is not considered a dislocated worker even if, for example, the person is receiving unemployment benefits.

In general, a person may be considered a dislocated worker if he or she:
• is receiving unemployment benefits due to being laid off or losing a job and is unlikely to return to a previous occupation;
• has been laid off or received a lay-off notice from a job;
• was self-employed but is now unemployed due to economic conditions or natural disaster; or
• is the spouse of an active duty member of the Armed Forces and has experienced a loss of employment because of relocating due to permanent change in duty station; or
• is the spouse of an active duty member of the Armed Forces and is unemployed or underemployed, and is experiencing difficulty in obtaining or upgrading employment; or
• is a displaced homemaker. A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home mom or dad), is no longer supported by the spouse, is unemployed or underemployed, and is having trouble finding or upgrading employment.

When did this change occur? ________________________________________

If this change occurred after the date you signed the FAFSA, please contact our office to schedule an appointment with a Financial Aid Counselor.

Certification/Signature:
By signing this form, I certify that all the information reported to qualify for federal student aid is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

__________________________________________

Student’s Signature (electronic signature not acceptable) Date

Please return to:
Office of Scholarships and Financial Aid
119 Student Union, Stillwater, OK  74078-5061
Email: finaid@okstate.edu
Phone: (405) 744-6604
http://financialaid.okstate.edu
FAX#: (405) 744-6438 (If you fax this form, please don’t mail it)