



**MiraCosta College  
Financial Aid Office  
2016-2017 Dislocated Worker**

**Dependent Student  
Parent Information**

*Student Name*

*Student ID*

**Dependent Students:** Your parent(s) have indicated on your FAFSA that he/she is a dislocated worker. Please have your parent(s) review the information below and provide documentation to confirm this status.

As defined in the Workforce Investment Act or WIA, a Dislocated Worker is someone who falls into at least one of the following categories:

1. A person who meets all of the following requirements:
  - was terminated or laid off from employment or received a notice of termination or layoff;
  - is eligible for or has exhausted his unemployment compensation, **or** is not eligible for it because, even though he/she has been employed long enough to demonstrate attachment to the workforce, he/she had insufficient earnings or performed services for an employer that weren't covered under a state's unemployment compensation law; **and**
  - is unlikely to return to a previous industry or occupation.
2. A person who was terminated or laid off from employment or received a notice of termination or layoff as a result of any permanent closure of, or any substantial layoff at, a plant, facility, or enterprise.
3. A person who is employed at a facility at which the employer made a general announcement that it will close within 180 days.
4. A person who is employed at a facility at which the employer made a general announcement that it will close.
5. A self-employed person (including farmers, ranchers, or fishermen) who is unemployed because of natural disasters or because of general economic conditions in his community.
6. A Displaced Homemaker is someone who meets all of the following requirements:
  - has been providing unpaid services to family members in the home;
  - has been dependent on the income of another family member but is no longer supported by that income; **and**
  - is unemployed or underemployed and is having difficulty obtaining or upgrading employment.

An "underemployed" person is one who is working part time but wants to work full time or one who is working below the demonstrated level of her education or job skills.

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.

**As of the date you originally completed your 2016-17 FAFSA was your parent a Dislocated Worker?**

\_\_\_\_\_ Yes. Please attach letter explaining your situation and official documentation to support your claim (see below). Skip the rest of the questions below and complete the signature section.

\_\_\_\_\_ No. I made a mistake on the FAFSA. I authorize corrections to be made to my Student Aid Report (SAR).

If you answered No above, please have your parent (s) answer the following questions:

If you filed or will file a 1040 for 2015, were you eligible to file a 1040A or 1040EZ? Yes \_\_\_\_ No \_\_\_\_

In general, a person is eligible to file a 1040A or 1040EZ if he or she makes less than \$100,000, does not itemize deductions, does not receive income from his or her own business or farm and does not receive alimony. A person is not eligible to file a 1040A or 1040EZ if he or she makes \$100,000 or more, itemizes deductions, receives income from his or her own business or farm, is self-employed, receives alimony or is required to file Schedule D for capital gains. If you filed a 1040 only to claim American Opportunity, Hope or Lifetime Learning credits, and you would have otherwise been eligible for a 1040A or 1040EZ, answer "Yes" to this question. If you filed a 1040 and were not required to file a tax return, answer "Yes" to this question.



SCAN: FA VERIF



YR: 16-17



NOTES: PAR DISL WKR

If your parent(s) answered "Yes" to this question, sign, date and return this form to our office.

If your parent(s) answered "No" to this question, please answer the following questions:

Please provide values for each of the following assets for your parent(s) as of the day you filed your original FAFSA.

If the information does not apply, please write \$0 or None.

1. Total cash, savings and checking account balances: \$ \_\_\_\_\_

2. Investments: The net worth of your parent(s) investments. Investments include: money market funds, mutual funds, Certificate of Deposits, stocks, bonds, commodities, etc. \$ \_\_\_\_\_

3. Real Estate Investments: Do not include your parent(s) primary residence. Please provide the current market value, and mortgage debt for each property to determine "net worth." Report what each of the values was as of the date your FAFSA was originally completed. Please attach additional pages if necessary. If this section does not apply, please write \$0 or None.

Real Estate Properties				
<b>Property Address #1:</b> _____				
	Street address	City	State	Zip code
Purchase Date: _____	Purchase Price \$ _____	Unpaid Mortgage \$ _____	Market Value \$ _____	
<b>Property Address #2:</b> _____				
	Street address	City	State	Zip code
Purchase Date: _____	Purchase Price \$ _____	Unpaid Mortgage \$ _____	Market Value \$ _____	
<b>Property Address #3:</b> _____				
	Street address	City	State	Zip code
Purchase Date: _____	Purchase Price \$ _____	Unpaid Mortgage \$ _____	Market Value \$ _____	
<b>Total Current Market Value of all Property \$ _____</b>			<b>Total Debt of all Property \$ _____</b>	

4. Businesses (including self-employment) and/or Investment Farms: Do not include a family farm or family business with 100 or fewer full-time equivalent employees, if your family owns or controls more than 50 percent of that business. Indicate the net worth of your parent(s) current business(es) and/or investment farms. If this section does not apply, please write \$0 or None.

Business	
Business Name: _____	
Business Market Value (what is it worth today): \$ _____	
Business Debt (what is owed): \$ _____	Number of full-time employees: _____
Do you have controlling interest in the business? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does your business involve real estate ownership? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If the business value is less than the unpaid business debt or if the business has been sold, please explain: _____	

**INCLUDE AS DOCUMENTATION:**

Layoff/termination notice from employer; Unemployment Benefits verification, and/or other documents that can support your situation; such as, a copy of the certification that classifies your parent as a Dislocated Worker. You can become certified as eligible at any Work Source Career Center or Employment Security Commission in your state of residence. Your parent must also attach a written letter in his/her own words, explaining the situation.

By signing this form, each person certifies that all of the information reported to qualify for federal student aid is complete and correct. WARNING: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent Signature (required)*

\_\_\_\_\_  
*Date*