



Student Information

Name:	ID/SSN:
Phone:	Email:

On your 2015-2016 FAFSA you, your parent (if dependent) or spouse answered “Yes” to being a “dislocated worker”. Please indicate below the circumstances of this status. Documentation must be provided with this form to verify your circumstances.

Dislocated Work Name: _____ **Relationship to student:** ___ Self ___ Parent ___ Spouse

- _____ 1. A person who meets all of the following requirements:
 - They were terminated or laid off from employment or received a notice of termination or layoff;
 - And are eligible for or have exhausted her unemployment compensation, or are not eligible for it because, even though they have been employed long enough to demonstrate attachment to the workforce, they had insufficient earnings or performed services for an employer that weren’t covered under a state’s unemployment compensation law; and
 - They are 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 an 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 who meets all of the following criteria:
 - she has been providing unpaid services to family members in the home;
 - she has been dependent on the income of another family member but is no longer supported by that income; and
 - she 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.
- _____ 7. A 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;
- _____ 8. None of these criteria describe my situation

Student Signature: _____ Date: _____

(Dependent Student’s Only)

Parent Signature: _____ Date: _____

Non-Discrimination Notice: To provide equal employment, advancement and learning opportunities to all individuals, employment and student admission decisions at Barton will be based on merit, qualifications, and abilities. Barton County Community College does not discriminate on the basis of race, color, national origin, sex, disability, age or any characteristic protected by law in all aspects of employment and admission in its education programs or activities. Any person having inquiries concerning Barton County Community College’s non-discrimination compliance policy, including the application of Equal Opportunity Employment, Titles IV, VI, VII, IX, Section 504 and the implementing regulations, is directed to contact the College’s Compliance Officer, Barton County Community College, Room A-123, Great Bend, Kansas 67530 (620) 792-2701. Any person may also contact the Director, Office of Civil Rights, U.S. Department of Education, Washington, DC 20201.