2023-2024 IL MAP Dislocated Worker Verification

Section A – Student Information (Please print clearly)

Last Name  First Name   M.I.   Email

Instructions:
1. Answer all the questions and SIGN the worksheet.
2. Submit all documents together.
3. Clearly print UIN on every page of 8 ½ x 11 legible copies.

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) indicates that you (student) and/or your spouse are a dislocated worker. Additional information and supporting documentation is needed to determine your eligibility for the Illinois Monetary Award Program (MAP) Dislocated Worker Rule.

Section B – Check any of the boxes that apply to your situation

☐ My spouse is a dislocated worker.  Skip the next section and sign form.
☐ I am NOT a dislocated worker.  Skip the next section and sign form.
☐ I am a dislocated worker.  Complete the next section.

Section C – Complete the following and submit requested documentation

Current Employment Status:
☐ I have been employed since being dislocated or displaced in any field of work.
☐ I am currently trying to find employment.

Current Dislocated Worker Status:
☐ I have been permanently laid off or terminated from previous occupation.
  • Submit copy of separation or termination notice from previous employer with effective dates.
☐ I am receiving unemployment benefits due to lay off or loss of job and am unlikely to return to a previous occupation.
  • Submit current documentation of unemployment compensation benefits showing effective dates.
☐ I was self-employed but am now unemployed due to economic conditions or natural disaster.
  • Submit a 2021 signed IRS Tax Return and all IRS Schedules.
  • Submit proof of income loss.
  • Submit proof of business closing.
☐ I am a displaced homemaker.  A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home parent), is no longer supported by the spouse, is unemployed or underemployed, and is having trouble finding or upgrading employment.
  • Submit a detailed letter describing circumstances with date of change.  Other documents may be requested.

Section D – Student Signature

IMPORTANT:
1. Have legible copies made on 8 ½ x 11 paper.
2. Have UIN clearly printed in the upper right hand corner.

I certify that the information provided on this form and any attachments are true and correct. I authorize Student Financial Aid and Scholarships to verify employment information with the prior employer(s) if necessary.

Student Signature   Date

ENTER YOUR 9-DIGIT UIN

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