



2020-2021 Reaffirmation Statement For Renewal of Change in Dependency Status

Student Information

Student's Last Name	First Name	M.I.	Student ID's #
Student's Street Address (include apt. number)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

Information Needed

1. At any time since you turned age 13, were both your parents deceased, were you in foster care or were you a dependent or ward of the court? ☐ Yes ☐ No
2. As determined by a court in your state of legal residence, are you or were you an emancipated minor? ☐ Yes ☐ No
3. Does someone other than your parent or stepparent have legal guardianship of you, as determined by a court in your state of legal residence? ☐ Yes ☐ No
4. At any time on or after July 1, 2019, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless? ☐ Yes ☐ No
5. At any time on or after July 1, 2019, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless? ☐ Yes ☐ No
6. At any time on or after July 1, 2019, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless? ☐ Yes ☐ No
7. With whom do you currently live? (Please provide name(s) and relationship.)

8. How long has this arrangement been going on? _____
9. Do you support anyone other than yourself? ☐ Yes ☐ No

Your Full Name	Age	Relationship to student	College Enrolled in 2020-2021	Enrolled at Least Half Time?
		Self	College of The Albemarle	Yes

10. Write a personal statement which completely and explicitly explains any changes in your relationship with either of your parents. Include any changes that may have occurred in your relationship with your parents from the time you submitted your original request for a dependency override at College of The Albemarle.

11. As of today, are you a dislocated worker? ☐ Yes ☐ No

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.

Except for the spouse of an active duty 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.

Disclosures & Required Signatures

Title IX (1972) protects students from gender bias in educational environments. The 2013 reauthorization of Title IX expands the definitions of gender bias, to include sexual assault, sexual harassment, domestic violence and stalking, and the expectations of colleges and universities handling gender bias incidents. College of The Albemarle is dedicated to providing an educational and work environment that is free from sexual assault, sexual harassment, domestic violence and stalking. As part of College of The Albemarle's efforts to fully comply with the Title IX law, all employees of the college are mandated to report to the Title IX Coordinator any known or suspected violations of Title IX. Your information in this appeal will be treated confidentially, however, if the information you present is suspected of being a Title IX violation, regardless if the occurrence was on or off campus, it will be reported to the college's Title IX Coordinator.

I certify that all information contained in this statement is true and complete. I affirm that I have not knowingly or intentionally provided any false statements or fraudulent information.

Student's Signature

Date