

EMPLOYMENT RECORD

NYS Emp. Reg. No: _____

COMPANY NAME: _____

ADDRESS: _____ TELEPHONE NO: () _____

CONTACT PERSON: _____
(Name & Title)

TYPE OF BUSINESS: _____

LOAN/LEASE SIGNATORY: _____

Permanent Full-Time Jobs By Occupation				
Permanent Occupations In Company	Base Annual Salary or Hourly Wage	Number of Employees	Number of Employees Laid Off	Current Number of Employees Working
Professional				
Clerical				
Sales				
Service				
Construction				
Manufacturing				
Skilled				
Semi-Skilled				
Unskilled				
Other (Describe)				
Total				
Total:				

The employees of our firm are not are currently covered by a collective bargaining agreement with (name of International union and Local union number): _____

Union Contract Person (address/phone number): _____

Contract expiration date: _____ Number of employees covered: _____

Prepared by: _____

Title: _____

Signature: _____

Date: _____