Reporting Staff Name	Status	Notice No	Entry D	ATTACHMENT Date
		ve; C=Complete)	WARN	
		COMPANY INFORMATION		
Company Name: Click or tap	here to enter tex	κt.		
Site Address/City/Zip: Click on	tap here to ente	er text.		
County: Click or tap here to	enter text. MWA	Name/Region #: Click or ta	p here to enter text	·•
Parent Company/DBA/Known I	<i>Names:</i> Click or t	ap here to enter text.		
Contact Name and Title: Click	or tap here to e	nter text.		
Contact Address: Click or tap	here to enter tex	xt.		
Contact Phone Click or tap he tere to enter text.	ere to enter text.	Contact FaxClick or tap her	re to enter text. Con	tact Email: Click or tap
Type of Business Click or tap	here to enter tex	kt. <i>NAIC code(s)</i> Click or tap	here to enter text	
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Click or tap here to enter te	xt. <i>Total Non-Uni</i>	fon Empl Click or tap here t	to enter text.	er text. Total Union empl
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MERGER/ACQUISITION ☐ INDETERMINABLE ☐ OTHER: _____

First Layoff Date Click or tap to enter a date. Final Layoff Date/Closing Click or tap to enter a date.

Additional Layoff Dates Click or tap here to enter text. Date Employees Notified Click or tap to enter a date.

UNION-RELATED INFORMATION

Union Local Click or tap here to enter text. Union Officer/TitleClick or tap here to enter text.

Address/City/Zip Click or tap here to enter text.

Phone Click or tap here to enter text. **Email** Click or tap here to enter text. **Fax** Click or tap here to enter text. **Union Members Laid Off** Click or tap here to enter text.

RESPONSE & DELIVERY SERVICE INFORMATION

<i>Type of Response:</i> □ UNKI □ No Response □ OTHER		ATE: Click or tap to enter a date. PHONE CO	ONTACT
•		SUB WARN □ TEMP LAYOFFS □ PRIOR RESPON	ISE
	JSE LABOR MGMT. COMMITTEI AGENCY □JAC □MWA □ U	E \square Union Sponsored Task Force \square Onsite F JIA \square Peer Counseling	ESOURCE
<i>Employee Services</i> ☐ Worker Orien	TATION MEETINGS: MEETING D	DATES & TIMES:Click or tap here to enter text.	
☐ TRADE INFORMA	TION MEETINGS JOB SEARCE	CH AND RESUME WRITING WORKSHOPS	
☐ OTHER WORKSH	OPS Click or tap here to enter	r text.	
	de Adjustment Assistance Applied for TAA/ATAA; Applic	ATION DATE: Click or tap to enter a date. □ PETI	TION#:
☐ COMPANY 'AT RISK' ☐ A DENIED	APPLICATION APPROVED; CERTIFIC	CATION DATE: Click or tap to enter a date. □API	PLICATION
Additional Comments/Information	Related to Response & Delivery Service:		
	REGIONAL SITE	VISIT INFORMATION	
Regional Site Visit Date: Cli	ck or tap to enter a date.		
Employer Services: □ SAG	☐ Referral to MMTC	☐ INCUMBENT WORKER TRAINING FUNDS	□ LMI
\square DWG	\square STTF	\square ESOP Pre-Feasibility Funding Study	
☐ REFERRAL TO GLTAA	□ DW SURVEY	☐ OTHER Click or tap here to enter text.	

Additional Comments/Information for entire form:		