|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| TAA-855 (Rev 08/2024) | | | | | | | | | | | | | | |
| **TRADE ADJUSTMENT ASSISTANCE – TRADE READJUSTMENT ALLOWANCES****Request for Entitlement Determination**Connecticut Department of Labor – Employment Security Division Trade Act of 1974, as amended | | | | | | | | | | | | | | |
| **Instructions: Please complete and return this application as soon as possible as there are deadlines associated with certain benefits of the Trade Act and includes a *lifetime training benefit*\*.** (\*One per certification) Make sure to sign the certification section at the bottom of the page. Return to: Connecticut Department of Labor, Trade Adjustment Assistance Unit (TAA), 200 Folly Brook Blvd., Wethersfield, CT 06109 or fax to (860) 263-6631. | | | | | | | | | | | | | | |
| Petition Number: |  | | | | Last 4 digits- Social Security#: | | |  | | | | Phone # | | |
| Applicant’s Name (Last, First, Middle Initial) | | | | | | | | | | | | Email: | | |
| Mailing Address (Number, Street) | | | | | | | | | | | | City, State, Zip | | |
| Alternate Contact’s Name Phone Number: | | | | | | | | | | | | Date of Birth: | | |
| Do you require a language interpreter? Yes  No  If yes, specify your primary language: | | | | | | | | | | | | | | |
| Are you a United States citizen? Yes  No  If no, enter your Alien Registration Number: | | | | | | | | | | | | | | |
| Have you received benefits under a prior TAA Certification in the past ten years?  Yes  No | | | | | | | | | | | | | | |
| Do you have entitlement to unemployment benefits in another state? Yes  No. If yes, paying state: | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **Trade-Impacted Employment** | | | | | | | | | | | | | | |
| Name of firm/subdivision: | | | | | | | | | | | | | | |
| Dates of employment: | | | From: | | | |  | | | To: | |  | | |
| Hourly rate of pay: | | |  | | | | Hours worked per week: | | | |  | | | |
| Last department in which employed | | | | | | | | | | | | | | |
| Most recent job title | | | | | | | | | | | | | | |
| Complete address where work was performed | | | | | | | | | | | | | | |
| Reason for separation: | | Lay-off | | | | Discharge | | | Voluntary leaving | | | | Other | |
| Type of separation: | |  | | Total | | Partial - still employed part-time, working      hours per week. | | | | | | | | |
| If you are currently employed, but have received a notice of *future termination or layoff* due to lack of work:    >Is the separation expected to be total  or partial  (reduction in wages and hours)? | Expected Date: | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **Subsequent Employment** | | | | | | | | | | | | | | |
| Did you perform work after separating from your trade-impacted employment (include self-employment)? Yes  No  >If yes, are you still employed? Yes  No  Name of New Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  >Employment is/was: Full time  Part time | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **Certification** | | | | | | | | | | | | | | |
| By signing or typing my name on the signature line below, I am certifying that the statements made by me on this application are true and complete to the best of my knowledge and are made in good faith. I understand that if I knowingly make any misstatement of fact, I am subject to disqualification and dismissal and to such other penalties as may be prescribed by law or regulations. All statements made on this application are subject to verification. | | | | | | | | | | | | | | |
| Applicant’s Signature: | | | | | | | | | | | | | Date |  |
|  | | | | | | | | | | | | | | |

**NOTE:** **Full registration in** [**CTHires.com**](https://www.cthires.com/vosnet/Default.aspx) **will be required to record all TAA activities. Other workforce development programs and services are also available in this system. You should register as soon as possible.**