Work Search Record

North Carolina Department of Commerce Division of Employment Security

Unemployment Insurance

| Claimant | |
|-----------------|--|
| SSN: XXX – XX – | |
| Review Date: | |
| Interviewer | |
| ☐ PI ☐ ERI | |

Date

Work Search Requirements: The Employment Security Law requires claimants to actively seek work. Regulation 10.25 defines the minimally acceptable work search effort as two in-person contacts with different employers on different days for each week claimed. The Regulation allows agency representatives, based upon their knowledge of the labor market, your experience, and skill level, to increase or decrease the number and frequency of contacts and to approve other contact methods. Failure to meet weekly requirements specified and documented by the agency representative or failure to present your completed Work Search Record upon request may cause a delay or denial of benefits. In addition, repeated contacts with the same employer may cause a delay or denial of benefits.

By signing this acknowledgement you are certifying that you understand your minimum work search requirements and will comply with the weekly work search requirements documented below.

| Weekly | Work | Search | Requi | rem | ents |
|--------|------|--------|-------|-----|------|
| | | | | | |

Beginning Sunday

Date

| • | Different Employer Contacts Required: | Number Days Required to Seek Work |
|---|---------------------------------------|-----------------------------------|
| | | |
| • | Approved Contact Method(S) | |
| • | Types of Work: | |
| | | |

Claimant's Signature

Instructions for completing your work search record

Week 1

Interviewer's Initials

For each week claimed, enter your work search contacts in the appropriate block below. Enter the beginning and ending dates of the week(s) claimed, the name and address of the employers contacted, the date of contacts, the method of contacts, the type work you applied for, and the result of each contact (application accepted, hired, will call, pending, etc). Do not list repeated contacts with the same employer. If you did not seek work, explain why and report to your local office the following week.

and Ending Saturday

| ☐ I did not seek work during this week because: | | | | | |
|---|---------------------------|----------------|-----------------------|---------|--|
| Date of Contact | Employer's Name & Address | Contact Method | Type Work Applied For | Results | |
| | | | VK - See KK - See | | |
| | | | | | |
| | | | | | |
| Week 2 Beginning Sunday and Ending Saturday | | | | | |
| ☐ I did not seek work during this week because: | | | | | |
| Date of Contact | Employer's Name & Address | Contact Method | Type Work Applied For | Results | |
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| Week 3 | Beginning Sunday | and Ending Saturday | | |
|---|---|------------------------------|-----------------------|--------------------|
| ☐ I did not seek wor | k during this week because: | | | |
| | | | | |
| Date of Contact | Employer's Name & Address | Contact Method | Type Work Applied For | Results |
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| Week 4 | Beginning Sunday | and Ending Saturday | | |
| ☐ I did not seek wor | k during this week because: | | | |
| | | | | |
| Date of Contact | Employer's Name & Address | Contact Method | Type Work Applied For | Results |
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| Week 5 | Beginning Sunday | and Ending Saturday | | |
| ☐ I did not seek wor | k during this week because: | | | |
| | | | | |
| Date of Contact | Employer's Name & Address | Contact Method | Type Work Applied For | Results |
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| Week 6 | Beginning Sunday | and Ending Saturday | | |
| ☐ I did not seek wor | k during this week because: | | | |
| | | | | |
| Date of Contact | Employer's Name & Address | Contact Method | Type Work Applied For | Results |
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| Week 7 | Beginning Sunday | and Ending Saturday | | |
| ☐ I did not seek wor | k during this week because: | | | |
| 7 | | | | |
| Date of Contact | Employer's Name & Address | Contact Method | Type Work Applied For | Results |
| | | | | |
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| I haraby soutify that the | a work soorah information antanad shave int- t- th- 1 | my knowledge or 4 to 11 of t | om awara that my re | taata are auhi+ +: |
| I hereby certify that the work search information entered above is accurate to the best of my knowledge and belief. I am aware that my reported contacts are subject to verification. | | | | |
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| | | | | |
| Claimant's Signature Date | | | | |