WE ARE YOUR DOL



Initial RESEA Follow-up RESEA

Reemployment Plan

Nan	ne:			
Nev	v York Identification number:			
Ste	os I will take to help my reemployment:			
	Remove potential barrier(s) of employment and/or main			
	I will: Email my resume to the Career Advisor at:		@labor.ny.gov	
 ☐ Revise current resume per feedback from resume review ☐ Expand my work search to other industries or occupations to: 				
	Create or update LinkedIn profile			
	Explore training and educational opportunities: \square English as a second language (ESL) \square High school equivalency \square Apprenticeship \square WIOA Individual training grants			
	Submit 599 application			
	Apply for the Self-Employment Assistance Program (SEAP) prior to claiming 13 weeks of benefits			
	☐ Follow-up with a previous interview or lead			
	, 3 3			
	Email or call Career Advisor when I return to work			
Ш	Other:		· · · · · · · · · · · · · · · · · · ·	
Atte	end the following Career Center appointments:			
	Next mandatory Reemployment Services Appointment:		Date:	
	Workshop:	Date:	Time:	
	Individual career counseling appt with:	Date:	Time:	
	end the following supportive service referral appointr peakers of Other Languages (ESOL), High School Equi		cational rehab, English	
	Agency:	Date:	Time:	
	Contact name:			
Foll	ow-up on job referrals I received: Jobs I will apply to	(business name ar	nd position title):	
		•	•	
	tification			
	ve reviewed the information in my Reemployment Plan. I	agree to attend so	cheduled annointments	
I un	derstand that if I do not comply with the above, I may be irance benefits.			
Signature:		Date:		
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