



Request for Rate Based on Weeks of Employment

To request a benefit rate based on weeks of employment, you must complete this form and return it to the above Department of Labor address with a copy of your proof of employment and earnings for each week of employment for the base period indicated below. It must be received within ten calendar days of the Date Mailed as stated on your most recent Monetary Benefit Determination. Do not send the originals of your supporting payroll documents as they cannot be returned. Your Request for Rate Based on Weeks of Employment cannot be processed until all Requests for Reconsideration have been reviewed and the establishment of your base period has been finalized. You will be notified of the action taken regarding your request within three weeks of receipt.

Complete only the front of this form if you have worked for one employer or you have worked for two or more employers consecutively. If you worked during the same week(s) for two or more employers, complete the worksheet on the back of this form first and transfer the appropriate information to the front of the form. If you have more than seven employers during the base period, list the information on a separate sheet of paper and attach it to this form.

Please print clearly

Last Name: _____ First name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip: _____

Social Security Number: XXX – XX - _____

Base Period: From _____ **Through** _____
(Enter these dates from the previously issued T402, Monetary Benefit Determination)

A. Employer Name and Address	B. Length of Pay Period; i.e. weekly, bi-weekly, etc.	C. Total Weeks Paid During Base Period	D. Total Wages Paid During Base Period
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
6.			\$
7.			\$
E. Total Weeks and Wages Worked During the Base Period			\$
F. Total Weeks Worked from Part 2 (on back)			

G. Recomputation Formula:

1. Divide the total wages by the total weeks (the lesser of **E** or **F**) to calculate the average weekly wage\$
2. Divide the average weekly wage by 2 to arrive at your proposed rate based on weeks and wages. The rate cannot exceed \$504.....\$
3. Enter your current benefit rate from your last T402 Monetary Benefit Determination form\$
4. Subtract line 3 from line 2. The amount must be \$5 or more to receive the recomputed rate based on weeks and wages.....\$

Certification: I certify that all information and records submitted are true and accurate. I understand that this information is subject to verification and penalties can be imposed for false statements.

Signature: _____ Date: ____/____/____ Telephone No.: _____

