



**FAILURE TO RETURN THIS COMPLETED FORM
WITHIN 10 DAYS OF FILING A CLAIM FOR UI BENEFITS or ENROLLMENT
MAY RESULT IN A LOSS OF BENEFITS.**

SSN: _____

STUDENT'S NAME & ADDRESS:

Phone: _____

RETURN FORM TO:
ADJUDICATION CENTER

P.O. Box 91253
Baton Rouge, La. 70821-1253
FAX: (225) 346-6068

THIS FORM MUST BE COMPLETED BY YOUR SCHOOL.

Louisiana Law (R.S. 23:1602 (2) requires that all individuals claiming unemployment insurance benefits must be available for work and conducting an active search for work unless in training with the approval of the administrator of this agency. **This form is designed to be completed by the school you are attending. The information will be used to determine if your training meets the requirements for approval by the administrator.**

**QUESTIONS LEFT BLANK MAY CAUSE A DELAY IN THE PROCESSING OF
YOUR REQUEST FOR APPROVED TRAINING.**

NAME OF COURSE: _____

1. NAME OF SCHOOL: _____

2. ADDRESS OF SCHOOL: _____

3. TRAINING BEGINNING DATE: _____

4. TRAINING ENDING DATE: _____

Note: Please include projected dates for the completion of associate degrees or in the case of vocationally directed training, the ending date of the course not just through any upcoming breaks for the school.

5. HOW MANY DAYS DURING THE ABOVE REFERENCED PERIOD WILL THE STUDENT BE OFF DUE TO HOLIDAYS? _____

6. WHAT HOURS AND DAYS OF THE WEEK WILL THE STUDENT BE IN CLASS? (INDICATE A.M. OR P.M.)

MON: _____

TUES _____

WED: _____

THURS: _____

FRI: _____

SAT: _____

SUN: _____

7. HAS THE SCHOOL BEEN APPROVED BY THE DEPT OF EDUCATION?

YES NO

THIS FORM MUST BE COMPLETED BY YOUR SCHOOL.
QUESTIONS LEFT BLANK MAY CAUSE A DELAY IN THE PROCESSING OF
YOUR REQUEST FOR APPROVAL.

8. WHAT ARE THE STUDENT'S CURRENT OCCUPATIONAL SKILLS?

9. WHAT IS THE STUDENT'S CURRENT LABOR MARKET AREA?
() LOCAL, () MULTI-PARISH OR COUNTY, () STATEWIDE

10. WHAT ARE THE PRESENT DEMANDS FOR THE ABOVE
OCCUPATIONAL SKILLS IN THE STUDENT'S CURRENT LABOR
MARKET AREA?

() GOOD () FAIR () POOR () NON-EXISTENT

11. AFTER SCHOOLING, WHAT ARE THE PROSPECTS OF EMPLOYMENT?
() GOOD () FAIR () POOR () NON-EXISTENT

12. WHAT IS THE PRESENT HOURLY PAY IN THE AREA FOR THE
OCCUPATION FOR WHICH SCHOOLING IS REQUESTED?

13. DOES THE SCHOOLING REQUESTED LEAD TO A DEGREE?

() YES () NO

IF YES:

() BACCALAUREATE

() ADVANCED

() ASSOCIATE

IF STUDENT IS DEGREED AT PRESENT, WHAT IS THE DEGREE IN?

14. IF STUDENT HAS ANY PARTICULAR REASON FOR NEEDING
TRAINING, SUCH AS MEDICAL, PLANT CLOSURE, OCCUPATION
CANNOT BE USED IN OTHER INDUSTRIES, ETC, PLEASE EXPLAIN.

SCHOOL REPRESENTATIVE

TITLE

PHONE

FAX

DATE