

**APPRENTICE - OOW INFORMATION**  
**AND RE-ASSIGNMENT**

TODAYS DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

SOCIAL SECURITY # (LAST 4): \_\_\_\_\_

PHONE #: \_\_\_\_\_ CELL#: \_\_\_\_\_

CONTRACTOR NAME \_\_\_\_\_ LAY-OFF DATE \_\_\_\_\_

GROUP #: \_\_\_\_\_ CARD # \_\_\_\_\_

WHEN DO YOU RETURN TO SCHOOL \_\_\_\_\_

**REASON FOR REGISTERING**

COVID-19 SELF-REMOVAL \_\_\_\_\_

COVID-19 RECALL \_\_\_\_\_

REDUCTION IN FORCE \_\_\_\_\_

**Please call the school (EJATT) if you have any questions. 708-389-1340**

**OFFICE ONLY: ::**

**NEW CONTRACTOR: \_\_\_\_\_**

**DATE OF HIRE: \_\_\_\_\_**