



A petition for Trade Adjustment Assistance (TAA) and Alternative Trade Adjustment Assistance (ATAA) has been filed on behalf of a group of workers employed (or formerly employed) by your firm. Your assistance in expeditiously completing the Non-Production Questionnaire is necessary for the U.S. Department of Labor to determine whether these workers may be eligible for federal benefits. By law, this determination must be made within 40 days of the petition filing date (19 U.S.C. 2273(a)). **Accordingly, please complete and return this form no later than [Insert date here].**

Background – The Trade Act of 1974 (19 USC § 2271 et seq.), as amended, established Trade Adjustment Assistance (TAA) to provide assistance to workers in companies affected by imports from foreign countries, shifts in production to certain foreign countries, and to certain secondary workers. The program provides affected workers with both rapid and early assistance and the opportunity to engage in long-term training while receiving income support. **These benefits are provided at no expense to employers.**

Alternative Trade Adjustment Assistance (ATAA) for older workers is an alternative to TAA for trade affected workers 50 years of age or older. ATAA encourages qualified trade affected workers to quickly obtain full-time employment by providing a wage subsidy in lieu of training and income support.

How this information will be used – The U.S. Department of Labor will use the information you provide on this form to determine whether the group of workers meet the certification criteria established by law for eligibility to apply for TAA and ATAA.

Public Burden Statement – Persons are not required to respond to this collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. Responding is mandatory (19 USC 2321). Public reporting burden for this collection is estimated to average 3.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Division of Trade Adjustment Assistance, Room N-5428, 200 Constitution Ave., N.W., Washington, DC 20210 (Paperwork Reduction Project 1205-0342).

Confidentiality - All information submitted under this request will be used only to determine whether the criteria for certification of the workers covered by the petition have been satisfied. The U.S. Department of Labor will protect the confidentiality of the information you provide to the full extent of the law.

Instructions: Type or print legibly. Complete all sections. Attach additional sheets if necessary. If there is no quantity or value, enter “zero” or “none”. On a separate sheet, please add any relevant information not covered in this form that you would like the U.S. Department of Labor to consider, and attach any supporting documents. If you have any difficulty completing this form or have questions, please contact **[Insert Investigator name and contact information]**



TA-W - : []
Subject Firm: []
Location: []

2. Subject Firm Information:

Official Subject Firm Name _____ Division _____

Address _____

Website (if appropriate) _____

Parent company of subject firm _____

Federal Employer Identification No. (FEIN)	In the past one year, have the workers wages been reported under another FEIN?	Yes	No
_____	_____	_____	_____

If workers' wages at the subject firm were reported under another FEIN,
please explain why, and specify the number and the corporate name: _____

3. Leased Workers:

Identify all contract entities and staffing agencies supplying leased or temporary workers to the subject firm since **[Insert Impact Date]** and describe their functions _____



4. Organizational Structure:

Describe the organizational structure of the subject firm, including, but not limited to, the parent company, affiliates, subsidiaries, and subdivisions. (Please attach any existing diagrams of organizational structure)

5. Employment Information:

Please answer all the questions below for the following time period, unless directed otherwise:

From:[] To:[]

a) How many workers were employed at the subject firm identified above on [enter "To" date]?

b) How many workers were employed at the subject firm identified above one year prior to the date in Question 4a)?

c) Of these workers, how many are age 50 or over?

d) Are further separations planned? Yes No

i) If "Yes", when and how many workers will be separated?

ii) Has a WARN notice been issued? Yes No

e) If separations occurred or are planned, explain the reasons for these separations.



6. Activities of the Worker Group:

a) Describe the activities of the workers at the subject firm location. Please explain thoroughly.

b) Provide the North American Industry Classification System (NAICS) code for the subject firm, if known.

c) Do the workers produce an article (product) of any kind? Yes No

If "Yes", identify the articles (products) manufactured at the subject firm. Include the Harmonized Tariff Schedule classification for the articles produced there, if known.

7. Company-wide Production:

a) Are articles produced at any entity listed in response to Question 3? Yes No

b) If "Yes", in the table below, provide information for any entity you listed in response to Question 3 that produces an article.

	Production Facility 1	Production Facility 2	Production Facility 3
Entity Name			
Address 1			
Address 2			
City			
State, Zip			
Article(s) Produced			
Contact Name			
Contact Title			
Telephone Number			
FAX Number			
E-mail			



c) Describe how the workers' activities are related to or support any of the production facilities you listed under Question 6b.

d) Are any of the entities listed in response to Question 6b certified for TAA?
Unknown

Yes No

If "Yes", please list case numbers. _____



7. Support of Unaffiliated Production Company:

Are the subject workers covered by the petition engaged in activities supporting production under contract to any unaffiliated production company (a production company not listed under Question 6b)? Yes No

- a) If "No", proceed to Section 8.
- b) If "Yes", is work done by the workers performed on-site at this unaffiliated production company? Yes No
- c) If work is performed on-site at an unaffiliated production company, please provide information about the unaffiliated company below.

Unaffiliated Company Name _____

Address _____

Contact Name _____ Title _____

e) Telephone _____ Fax _____ E-mail _____

f) d) To determine whether workers are under the control of an unaffiliated production company please respond to the questions below:

- i) Do the subject workers perform tasks that are part of the unaffiliated production company's core business functions, as opposed to independent, discrete projects that are not part of the unaffiliated production company's core business functions? Yes No
- ii) Does the unaffiliated production company have the discretion to hire, fire, and discipline subject workers? Yes No
- iii) Does the unaffiliated production company exercise the authority to supervise the subject workers' daily work activities, including assigning and managing work, and determining how, where, and when the work of individual workers takes place? (Factors such as the hours of work, the selection of work, and the manner in which the work is to be performed by each individual are relevant.) Yes No
- iv) Are the services of the subject worker group offered on the open market or does the worker group work exclusively for the unaffiliated production company? Yes No
- v) Is the unaffiliated production company responsible for establishing wage rates and the payment of salaries to individual workers of the subject worker group? Yes No
- vi) Does the unaffiliated production company provide skills training to subject workers? Yes No

8. Alternative Trade Adjustment Assistance (ATAA):

Given the current conditions of the job market in the local commuting area, are the skills of the worker group easily transferable to other positions in the local area? Yes No
 Please explain your answer.

"Under penalty of law, I declare that to the best of my knowledge and belief the information I have provided is true, correct, and complete."

TELEPHONE NUMBER	FAX	EMAIL	
TITLE	COMPANY NAME		ADDRESS
COMPANY OFFICIAL NAME	SIGNATURE		DATE

