

Occupational Employment Statistics Report In Cooperation with the U.S. Department of Labor

Form Approved, O.M.B. No. 1220-0042

Space for State Contact Information

Company Name _____

OES Survey Schedule Number _____

Contact Person _____

Email: _____

Telephone _____ Fax _____

Instructions:

- 1) If your employees are part time workers, please report them at an hourly rate.
- 2) Report each employee by occupational title. Report an employee who works in two or more occupations in the job that requires the highest skill level. If there is no measurable difference in skill, report the employee in the occupation in which they spend the most time.
- 3) If you require additional space, please copy this page and submit it with your fax.
- 4) Please fax form back to the fax number listed above.

		NUMBER OF EMPLOYEES IN SELECTED WAGE RANGES												Total Employment
		(Report Part-time Workers According to an Hourly Rate)												
Occupation Title	Hourly	A	B	C	D	E	F	G	H	I	J	K	L	
	Annual	under \$9.25	\$9.25 - 11.49	\$11.50 - 14.49	\$14.50 - 18.24	\$18.25 - 22.74	\$22.75 - 28.74	\$28.75 - 35.99	\$36.00 - 45.24	\$45.25 - 56.99	\$57.00 - 71.49	\$71.50 - 89.99	\$90.00 and over	
(Example): Registered Nurse							2		1					3