

DEMONSTRATION QUARTERLY REPORT REQUIREMENTS

Below is a description of the aggregate data states are expected to report on a quarterly basis for all claimant and employer participants in the demonstration project, as well as trust fund information, and a project narrative. The Department of Labor will negotiate additional quarterly reporting elements that are demonstration specific upon the approval of a state's demonstration project.

Aggregate Claimant Participation Information

1. Total number of participants enrolled in the demonstration to date
2. Number of participants enrolled during the quarter
3. Total number of participants exiting participation to date (reasons to be identified depending on the nature of the demonstration)
4. Number of participants exiting participation during the quarter (reasons to be identified depending on the nature of the demonstration)

Aggregate Employer Participation

1. Total number of employers participating in the demonstration to date
2. Number of employers first participating during the quarter

Aggregate Participant Outcome Information

1. Outcomes - Employment
 - Employed in 1st, 2nd, 3rd, and 4th Quarter After Exit
 - Occupational/Industry Code of Employment
2. Outcomes - Wages
 - Wages 1st and 3rd Quarter Prior to Participation
 - Wages 1st, 2nd, 3rd, and 4th Quarter after Exit
3. Outcomes - Retention
 - Of those Employed in the 1st Quarter after Exit, still employed in 2nd, 3rd, and 4th Quarter
 - Occupational/Industry Code of Employment

Trust Fund Impact Information

1. Actual withdrawals from the UTF above and beyond regular UC payments to fund demonstration project;
2. Actual duration of benefits for demonstration project participants;
3. Placement rates of project participants;
4. Actual weeks of benefit savings due to the faster reemployment of demonstration

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| participants. |
| Demonstration Implementation Narrative |
| States are required to provide a narrative overview of demonstration activities during the quarter, including status of implementation milestones provided in the state’s application. |
| Additional Demonstration Specific Aggregate Information |
| Additional data elements will be identified for the state’s quarterly report based on the structure and design of the state’s demonstration. |

Comments:

OMB No.: 1205-0NEW **OMB Expiration Date:** XX/XX/2012 **Estimated Average Response Time:** 2 Hours

OMB Burden Statement: These reporting instructions have been approved under the Paperwork reduction Act of 1995. Persons are not required to respond to this collection of information unless it displays a valid OMB control number. Public reporting burden for this collection of information includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Submission is required to retain or obtain benefits under SSA 303(a)(6) (42 U.S.C. 503(a)) and Pub. L. 112-96 section 2102. Respondents have no expectation of confidentiality. 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, Office of Workforce Security, Room S-4526, 200 Constitution Ave., NW, Washington, DC, 20210.