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ecretary of Labor Hilda L. Solis Print This Page Text Size E-mail This Page					
		Contact Us			
		Contact Us			
		For answers to general questions about employment laws, workplace issues, or other labor topics, please call our National Contact Center at 1-866-4-USA-DOL(1-866-487-2365) or (TTY)			
		Please do not use this form to submit Freedom of Information Act (FOIA) inquiries. For FOIA inquiries, follow the <u>FOIA</u> instructions.			
		If you wish to correspond with the U.S. Department of Labor by e-mail, please fill out the form below by following 9 easy steps, then clicking the "Submit Your Question/Comment" button at the bottom of the page.			
tep 1:					
tep 1:		Your E-mail Address: (Required)			
tep 1:		Your E-mail Address: (Required)			
tep 1: tep 2:		Your E-mail Address: (Required)			
		Your E-mail Address: (Required) Re-enter Email Address: (Required)			
tep 2:					
tep 2:		Re-enter Email Address: (Required)			
tep 2:		Re-enter Email Address: (Required)			

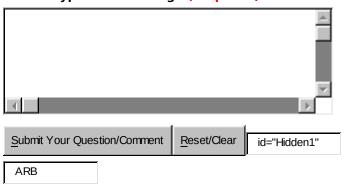
Step 4:

	Your Workplace Zip Code: (Required)		
	If workplace zip code unknown please provide City and Stat		
Step 5:Customer T	⁻ уре		
	(Required - please choose the best option that applies to yo inquiry.)		
	C Employer		
	C Employee		
	C Employee-Unemployed		
Step 6:Inquiry Rela	ated Employment Status		
	(Required - please choose the best option that applies to yo inquiry.)		
	Please note that this may not necessarily be a current employment status		
	C Hiring Process		
	C Ongoing Employment		
	C Termination		
Step 7:Work Secto	or		
	(Required - please choose the best option that applies to you inquiry.)		
Private Sector			
	C Interstate Commerce Occupation		
	C		
Government	Other		
Government	C		
	Federal		
	C Territorial		
	C		
	State & Local		
	C Foreign		

	Q	Military		
	Q	Indian Reservation / Tribal Land		
	C Aut	USPS/Postal Rate Commission/ Tennessee Valley :hority (TVA)		
Contractor Government	_			
	O	Federal Government		
	Q	State & Local Government		
Private Sector				
	O	Independent Contractor		
	Q	Independent Contractor-Employee		
	O	Independent Contractor-Subcontractor		
Step 8:Subject		independent contractor-subcontractor		
(Required Check all that apply)				
		Disability Services		
		Women's Services		
		Employment & Training		
		Worker's Compensation		
		Organized Labor/Unions		
		Workplace Benefits		
		Small Business Services		
		Workplace Safety & Health		
	П	Veterans Services		
	_	Youth Services		
		Wages		
		Other/Unknown/Unsure		

Step 9:

Please Type Your Message (Required)



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