CURRENT

| 1. SSA No. | |
|--------------------|--|
| 2. Claimant's Name | |

| DISTRICT OFFICE RECORD OF | | | | | | | | | | |
|--|--|--|--------------------|-------|--|--|----|----------------------|-------------------------------|------------------|
| DETERMINATIONS AS TO VOLUNTARY QUIT | | ERMINATIONS AS TO VOLUNTARY QUIT | 2. Claimant's Name | | | | | | | |
| 3. | Information About Leaving Work | | | | | | | | | |
| | a. | <u>Date left work</u> : | | | | | | | | |
| | b. | Employer: | Occupation: | | | | | | | |
| | C. | Reason for leaving work: | | | | | | | | |
| | | By Claimant: | | | | | | | | |
| | By Employer (If employer statement not obtained, explain why): | | | | | | | | | |
| 4. | Determinations by District Office | | | | | | | | | |
| | a. Leaving was: | | | | | | | | | |
| | 1. Not Voluntary (Provide AIM/FOM reference, explain in full the determination, and go to Item 4.C.): | | | | | | | | | |
| | | 2. Uoluntary | | | | | | | | |
| | | a. With Good Cause (Provide AIM/F b. Without Good Cause (Provide AII | | , | | | | | | |
| b. Entitlement to Other Unemployment Benefits UI-45 shows clearly not qualified. Statement from other agency shows clearly not qualified. Claimant apparently qualified but has exhausted rights. Information that claimant could receive other benefits (Explain source and show the period): | | | | | | | | | | |
| | | | | | | | | Other (Explain): | chenis (Explain source and si | iow the periody. |
| | | | | | | | c. | Determined by: Date: | | |
| | | Reviewed by: | Date: | | | | | | | |
| 5. | Da | te disqualification period ended: | | | | | | | | |
| 6. | 6. Are there qualifying railroad wages after voluntary quit? ☐ Yes ☐ No | | | | | | | | | |
| Determined by: | | | | Date: | | | | | | |
| Reviewed by: | | | | Date: | | | | | | |
| INS | INSTRUCTIONS: Use the next page to record any pertinent information other than called for above. If a determination is | | | | | | | | | |

later reversed or modified, show basis and who made the redetermination.