

**From:** Occupational Employment and Wage Statistics Program <[oevs.report@bls.gov](mailto:oevs.report@bls.gov)>

**To:** <resp\_email>

**Subject:** Request to complete the Occupational Employment and Wage Statistics (OEWS) Report, IDCF # <sched\_num\_1>, <sched\_num\_2>, <sched\_num\_3>, et al.

Dear Employer,

Your firm has <estab\_count> establishments selected to participate in the Occupational Employment and Wage Statistics (OEWS) program, which is conducted by [state\_agency] in cooperation with the U.S. Bureau of Labor Statistics. Your participation is essential for developing the highest quality employment and wage data for the citizens of your state.

**What information do I need to provide?**

All we need from you is the specific job title, a brief description of duties, and the wage rate for each employee at the locations listed at the end of the email for the pay period that included <refer\_date>.

**Are you reporting for a school?**

Please see the additional school instructions at [www.bls.gov/respondents/oes/instructions.htm#school](http://www.bls.gov/respondents/oes/instructions.htm#school).

**Is this report mandatory?**

Yes, [state\_mandatory]

**Which locations do I report for?**

Please see the list of requested locations that follows the signature.

**How will my information be used?**

The information you provide will be used for statistical purposes only. All identifying information for non-government establishments will be held in strict confidence to the full extent permitted by law. OEWS information is used to support education and training decisions to help build a skilled workforce.

**How do I report my data?**

You may find it easiest to submit a single spreadsheet with data for all employees at the requested locations. Please include the IDCF number or another location identifier for each employee. You can use your own spreadsheet or download our template from <https://www.bls.gov/respondents/oes/template.xlsx>.

Once you have your data file prepared, you have two reporting options.

**Report via email**

1. Reply to this email and include one of your IDCF numbers in the subject line
2. List all IDCF numbers you are reporting for in the body of the email.
3. Attach your completed spreadsheet. BLS encourages respondents to encrypt email attachments and send the password in a separate email. Please do not include sensitive information in the body of the email.

**Report by phone**

- Call us at [state phone].

**How long do I have to respond?**

Please respond within two weeks. Your timely response will help reduce program costs and save taxpayer money by eliminating the need for additional mailings and telephone calls to you.

**What if I have questions or concerns?**

Contact us at [state\_email] or [state\_phone].

**Thank you!**

We know you are busy and appreciate your help providing this important information!

Sincerely,

[state\_signature\_1]

[state\_signature\_2]

[state\_signature\_3]

**Which locations do I report for?**

Please provide occupation and wage data for the employees at the following locations. Include the establishment IDCF number or other location identifier for each employee.

IDCF #	Establishment Name	Reporting Unit Description	Estimated Employment	Establishment Address	Industry(NAICS)
<sched_num_1>	<trade_name_1>	<rpt_unit_descr_1>	<bmk_empl_1>	<addr_line1_1> <city_1> , <state_1><zip>	<naics_code_1> :<naics_title_1>
<sched_num_2>	<trade_name_2>	<rpt_unit_descr_2>	<bmk_empl_2>	<addr_line1_2> <city_2> , <state_2><zip>	<naics_code_2> :<naics_title_2>
<sched_num_3>	<trade_name_3>	<rpt_unit_descr_3>	<bmk_empl_3>	<addr_line1_3> <city_3> , <state_3><zip>	<naics_code_3> :<naics_title_3>

[state\_mandatory]

As a participant in a Bureau of Labor Statistics (BLS) statistical survey, you should be aware that use of electronic transmittal methods in reporting data to the BLS involves certain inherent risks to the confidentiality of those data. Further, you should be aware that responsible electronic transmittal practices employed by the BLS cannot completely eliminate those risks. The BLS is committed to the responsible treatment of confidential information and takes rigorous security measures to protect confidential information in its possession. This email contains confidential information. If you believe you are not the intended recipient of this message, please notify the sender and delete this email without disclosing, copying, or further disseminating its contents.

The Bureau of Labor Statistics, its employees, agents, and partner statistical agencies, will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act (44 USC Section 3572) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent except in the case of state and local governments. The BLS publishes statistical tabulations from this report that may reveal the information

reported by state and local governments. Upon request, however, the BLS will hold the information provided by state and local governments on this report in confidence. Per the Federal Cybersecurity Enhancement Act of 2015, Federal information systems are protected from malicious activities through cybersecurity screening of transmitted data.

We estimate that the time required to complete this report will vary from 10 minutes to 2 hours, depending on factors such as the size of the establishment. This includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this information. If you have any comments regarding these estimates or any other aspects of this report, including suggestions for reducing this burden, send them to the U.S. Bureau of Labor Statistics, Division of Occupational Employment and Wage Statistics (1220-0042), 2 Massachusetts Ave NE, Suite 2135, Washington, DC 20212. This report is authorized by law 29 U.S.C. §2. We request your cooperation to make the results of this report comprehensive, accurate, and timely. You do not have to complete this questionnaire if it does not display a currently valid OMB control number. Form Approved, O.M.B. No. 1220-0042.