

## ALTERNATIVE TRADE ADJUSTMENT ASSISTANCE (ATAA) INDIVIDUAL APPLICATION

**This application must be submitted within two years of an individual's qualifying re-employment.**

Worker's Name:	Birth Date:	Social Security Number:
Worker's Mailing Address:	<b>NEW</b> Employer(s) Name(s), Address(s), Phone Number(s) and Contact(s):	
Petition Number and Name of Previous Employer:	Date of Re-employment:	
Estimated Annual Separation Wages: 1. Hourly wage last week of full-time work before separation \$ _____. 2. Number of hours worked last week of full-time work before separation _____.	Projected Annual Re-employment Wages: 1. Hourly wage first week of full-time re-employment \$ _____. 2. Number of hours worked first week of full-time re-employment _____.	

**Current Employment:** Signature of the **NEW** employer is only required for those workers who have not provided a pay stub or equivalent documentation of employment as of the date of this application.

I attest that the above named worker is not expected to earn more than \$50,000 in the 12-month period beginning with his or her initial date of employment.

\_\_\_\_\_  
**NEW** Employer Signature and Title

\_\_\_\_\_  
Date

NOTE: Documentation for estimated annual separation wages must also be provided. This may include check stubs, annual earnings statements, W-2 forms, or other official documentation.

**STATEMENT:**

I hereby request consideration for certification of individual eligibility under the Alternative Trade Adjustment Assistance (ATAA) Program. By signing this form, I understand that receipt of my first payment under the ATAA program voids my rights to retraining, job search and TRA benefits.

\_\_\_\_\_  
Signature of Worker

\_\_\_\_\_  
Date

**MAIL COMPLETED APPLICATION TO:**

EDD SCO 850 TAA-ATAA  
P.O. Box 419076  
Rancho Cordova, CA 95741-9076  
Telephone Number: 1-888-697-1760

## **Eligibility/Verification Requirements:**

The following conditions must be met at the time of re-employment. Appropriate verification must be included with this application:

1. Be at least age 50 at time of re-employment (verify with copy of drivers license or other official documentation);
2. Re-employment within 26 weeks of qualifying separation (verify with a copy of the job offer letter or a check stub);
3. Annual earnings from re-employment are not expected to exceed more than \$50,000. (If a paycheck has not been issued at the time of application, then submit a supporting statement from the employer, in a company letterhead, indicating that annual wages are not expected to exceed \$50,000.);
4. Re-employed full-time (verified by pay stub, supporting letter from employer, or other appropriate documentation);
5. Re-employment is new work, the worker cannot return to work from which the worker was separated. This means the worker cannot return to the same job in the same division/facility at the same company. It does not preclude a worker from obtaining a different job with the same employer (verified by pay stub, supporting letter from employer, or other appropriate documentation).