

Record of Employment
FOR UNEMPLOYMENT INSURANCE PURPOSES ONLY

To Be Filled in By Employee					TO EMPLOYEE:				
Social Security Account Number					KEEP THIS CERTIFICATE				
Name of Employee					Have it with you if you apply for Unemployment Insurance. This certificate shows your job was insured. It does not necessarily mean you are qualified to receive benefits. The Claims Center will make that determination if you apply for benefits.				

To Be Filled in By Employer

N.Y. State Employer Registration Number 04 - 51291 Federal Employer Identification Number Firm Name: Columbia University c/o Corporate Cost Control, Inc. Mailing Address Where Payroll Records Are Kept: P.O. Box 1180 Londonderry, NH 03053 Date issued to employee: <input style="width: 150px; height: 20px;" type="text"/>	OPTIONAL IF NEEDED BY EMPLOYER TO LOCATE EMPLOYEE RECORD Payroll or Clock No. Location of Employment or Code	THIS MAY NOT BE USED AS AN IDENTIFICATION CARD
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HOW TO APPLY FOR UNEMPLOYMENT INSURANCE

Unemployment insurance is protection for people who are out of work through no fault of their own. It provides them a weekly benefit to keep them and their families going while they look for new jobs. If you become unemployed and want to apply for unemployment insurance benefits, call 1-888-209-8124 (if you live in NY state) or 1-877-358-5306 (for non-NY state residents). You may also apply online at www.labor.state.ny.us.

Have the following information available when you call:

1. Your Social Security Account Number
2. Your NYS Driver's License or Motor Vehicle ID card, if you have one
3. Your alien registration card, if you have one
4. Any Record of Employment form or other form given to you by an employer in the past 18 months which shows:
 - a. the name of your employer
 - b. the employer's NYS Employer Registration Number
 - c. the mailing address where your employer keeps payroll records
 - d. your payroll or clock number
 - e. the address at which you worked
5. Former federal employees should have all federal separation forms and "Notification of Personnel Action" forms issued in the past 18 months
6. Ex-servicemembers should have Separation Form DD 214 and any DD 215 forms received

FOR COLUMBIA UNIVERSITY USE ONLY

ATTENTION MANAGERS: A copy of this form must be given to all employees, both permanent and casual, who terminate employment with Columbia University. Please tear off the section below and forward it to: Human Resources, Studebaker 5th Floor, MC 8710.

I, _____ (Employee Name), have received the NY State Department of Labor "Record of Employment Form" on _____ (Date).

This form indicates that my job was covered by unemployment insurance. It does not necessarily mean I will receive benefits. The unemployment office will make that determination if I apply for benefits.

Employee's Signature _____ Employee's Social Security No. _____ Employee's Admin. Department _____