Notice That You Are A Seasonal Worker

Name of Employer ___________________________________  Name of Worker ___________________________________

☐ This is to notify you that you are employed as a “seasonal worker.”

☐ We expect our normal seasonal work period to be __________________ to __________________

(Starting Date) (Ending Date)

☐ Being a “seasonal worker” may cause you to be denied unemployment benefits during the period between our normal seasonal work periods if we give you a “reasonable assurance” at the end of this season that you will be hired back for similar work next season. You may be eligible based on work with other employers.

Notice given to worker by:

___________________________________________

(Signature of person giving notice)

___________________________________________

(Date notice given to worker)

Notice received by:

___________________________________________

(Signature of worker receiving notice)

___________________________________________

(Date notice received by worker)

TED is an equal opportunity employer/program.

___________________________________________

(Signature of person giving notice)

(State of Michigan)

RICK SNYDER

GOVERNOR

DEPARTMENT OF TALENT AND ECONOMIC DEVELOPMENT

TALENT INVESTMENT AGENCY

UNEMPLOYMENT INSURANCE

ROGER CURTIS

DIRECTOR

WANDA M. STOKES

DIRECTOR

Authorized by MCL 421.1 et seq.