TAA PETITION

THIS IS THE INFORMATION TAA WILL NEED TO FILE A PETITION FOR YOUR COMPANY.

Employer Information

Name:

Address:

City, State Zip:

Phone:

Website:

What is the product produced?

How many workers have been or will be potentially separated?

Closing or Workforce Reduction?

Date of Layoff Start:

Description of Worker Group:

Why do you believe this is a Trade Affected Layoff?

Company Officials (2)

Name:

Title:

Phone:

Email:

Name:

Title:

Phone:

Email:

Notes or any other information you feel would be relevant:

PLEASE SEND THIS INFORMATION TO DEED.TAA@STATE.MN.US