



Voluntary Quit – Distance to Work

Please answer all questions below. Any questions left unanswered will not be considered when determining your eligibility for Unemployment Insurance.

Claimant Name: _____

Last 4 Digits of your Social Security #: _____ Date Completing Questionnaire: _____

Claimant Statement

1. What was your last physical date of work (mm/dd/yyyy)? _____
2. What was your date of separation (if different from your last day of work - mm/dd/yyyy)? _____
3. Did you provide notice to your employer that you were leaving? YES NO

a. If no, why didn't you provide a notice?

b. If yes, whom did you notify? Name: _____
Title: _____

c. When did you provide the notice (mm/dd/yyyy)? _____

d. How much notice did you give your employer? _____

e. Did your employer allow you to work out your notice? YES NO

If no, what reason was given for not allowing you to work out your notice?

If you were not allowed to work out your notice, did your employer pay you for the remainder of your notice? YES NO

If yes, please indicate the amount of money paid to you for the remainder of your notice. \$ _____

4. Why did you leave this job?

5. Did you inform your employer that the reason the reason stated in Answer #4 was the reason for leaving? YES NO

If no, what reason did you give your employer for leaving?

6. How many miles was the job site from your home, one way? ___

7. How long (in time) was your commute? ___

8. How long had you worked at this location? _____

9. Were you aware of the distance from your home when you accepted the job? YES NO

a. If yes, why did you accept the job if the distance was too far from your home?

10. Did you address this issue with your employer? YES NO

a. If no, why not?

b. If yes, please explain what actions you took to address the situation with the employer and the employer's response.

11. Did the company have another location closer to your home where you could have transferred?

YES NO

a. If yes, did you ask for a transfer? YES NO

i. If no, why didn't you ask for a transfer?

ii. If yes, what was the company's response to this request?

12. Please provide any additional information you feel is necessary:

I hereby certify that, to the best of my knowledge and belief, the information I have provided is true.

YES NO

Signature: _____

English

Important! This document contains **important information** about your rights, responsibilities and/or benefits. It is critical that you understand the information in this document, and we will provide the information in your preferred language at no cost to you. **Call (401) 415-6772** for assistance in the translation and understanding of the information in this document.

American Sign Language

Important! Please visit here for ASL version of this document: https://www.youtube.com/channel/UCQuwufqdfDDY3cLU3nyH_w/videos

Spanish / Español

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Chinese - Traditional / 繁體中文

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Vietnamese / Việt

Lưu ý quan trọng! Tài liệu này chứa **thông tin quan trọng** về quyền hạn, trách nhiệm và/ hoặc quyền lợi của quý vị. Việc hiểu rõ thông tin trong tài liệu này là rất quan trọng, và chúng tôi sẽ cung cấp miễn phí cho quý vị thông tin này bằng ngôn ngữ mà quý vị ưa dùng. **Hãy gọi (401) 415-6772** để được hỗ trợ về việc thông dịch và hiểu thông tin trong tài liệu này.

Tagalog / Tagalog

Mahalaga! Naglalaman ang dokumentong ito ng **mahalagang impormasyon** tungkol sa iyong mga karapatan, responsibilidad at/o benepisyo. Napakahalaga na nauunawaan mo ang impormasyong nakapaloob sa dokumentong ito, at ibibigay namin nang libre ang impormasyon sa pinili mong wika. **Tumawag sa (401) 415-6772** upang humingi ng tulong sa pagsasalang-wika at pag-unawa sa impormasyong nasa dokumentong ito.

Arabic / العربية

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French / Français

Important ! Ce document contient **des informations importantes** sur vos droits, vos responsabilités et/ou vos allocations. Il est essentiel que vous compreniez les informations contenues dans ce document, et nous vous fournirons gratuitement ces informations dans la langue de votre choix. **Appelez le (401) 415-6772** pour obtenir de l'aide pour traduire et comprendre les informations contenues dans ce document.

Haitian Creole / Kreyòl Ayisyen

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Portuguese / Português

Importante! Este documento contém **informações importantes** sobre os seus direitos, responsabilidades e/ou benefícios. É essencial que compreenda as informações constantes neste documento, as quais disponibilizaremos, gratuitamente, na língua à sua escolha. **Contacte o número (401) 415-6772** para solicitar ajuda para traduzir e compreender as informações contidas neste documento.

Russian / русский

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Korean / 한국어

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