

**NEW YORK STATE
DEPARTMENT OF LABOR**

**UNEMPLOYMENT INSURANCE
DIVISION**

NOTICE TO EMPLOYEES

EMPLOYER REGISTRATION NUMBER

1-80 ER# 04-55440 1

WILDWOOD PROGRAMS INC
2995B CURRY RD EXT
SCHENECTADY NY 12303

EMPLOYEES OF THIS FIRM ARE COVERED BY THE NEW YORK STATE UNEMPLOYMENT INSURANCE LAW.

NO DEDUCTIONS FROM WAGES MAY BE MADE FOR THIS PURPOSE.

IF YOU ARE LAID OFF, WORK LESS THAN FOUR DAYS A WEEK, OR RESIGN, GET A "RECORD OF EMPLOYMENT" FORM FROM YOUR EMPLOYER. KEEP THIS FORM.

RECORD OF EMPLOYMENT FORMS REQUIRED BY REGULATION WILL CONTAIN YOUR EMPLOYER'S NAME, REGISTRATION NUMBER AND ADDRESS WHERE PAYROLL RECORDS ARE KEPT.

IF YOU WISH TO FILE AN APPLICATION FOR UNEMPLOYMENT INSURANCE

GO TO YOUR NEAREST UNEMPLOYMENT INSURANCE OFFICE OR COMMUNITY SERVICE CENTER, REGISTER FOR WORK AND FILE FOR BENEFITS.

TAKE YOUR SOCIAL SECURITY ACCOUNT CARD AND YOUR "RECORD OF EMPLOYMENT" FORM WITH YOU.

John F. Hudacs
JOHN F. HUDACS

COMMISSIONER OF LABOR

Dominic M. Rotondi

DOMINIC M. ROTONDI, DIRECTOR
UNEMPLOYMENT INSURANCE DIVISION

TO EMPLOYER: POST CONSPICUOUSLY IN EACH WORKPLACE. FOR ADDITIONAL POSTERS WRITE TO:

N.Y.S. DEPARTMENT OF LABOR
LIABILITY AND DETERMINATION SECTION
HARRIMAN STATE OFFICE CAMPUS
ALBANY, NY 12240