

Name (Last, First, Middle):

INSTRUCTIONS: Please use dark ink only. Do not send your logs to us unless we ask for them. You must complete a log for each week you claim unemployment benefits. You must have a combined total of three Employer contacts, approved WorkSource activities or Other approved activities each week. Keep your job-search log for at least 30 days after either the end of your benefit year¹ or when you receive your last payment on a benefit extension², whichever is later. We may verify your Employer contacts, approved WorkSource activities or Other approved activities conducted. Providing false information is fraud that can result in a denial of your unemployment benefits and additional penalties.

You can get more logs at your local WorkSource office or online at esd.wa.gov/job-search-log. Refer to your Handbook for Unemployed Workers for further instructions on completing this log.

EMPLOYER CONTACTS AND JOB SEARCH ACTIVITIES

CONTACT 1 Contact Date (MM/DD/YYYY):

What kind of activity did you do? Choose one: L Employer contact J WorkSource activity J Other activity

If this was an **employer contact**, please provide the following: Job title or job reference number:

Employer or business name:

How did you make the contact? In-person _ Online _ By phone _ By Email _ By mail Other:

Type of contact (Choose one)

_ Application/resume _ Interview _ Inquiry

Employer or business contact information:

Address: _____ City: _____ State:

Website or email address:

Phone number:

If this was an approved WorkSource activity,

please provide the following information: What activity did you complete:

What documentation do you have:

Where did you complete this activity?

Office name:

City: _____

If this was an approved other activity, please provide the following information:

What activity did you complete:

What documentation do you have:

CONTACT 2 Contact Date (MM/DD/YYYY): What kind of activity did you do? Choose one: L Employer contact J WorkSource activity Other activity If this was an **employer contact**, please provide the following: Job title or job reference number: Employer or business name:

> How did you make the contact? □ In-person □ Online □ By phone □ By Email □ By mail

J Other:

Type of contact (Choose one)

→ Application/resume → Interview → Inquiry

Employer or business contact information:

| Address: | | | |
|----------|---|-------|--|
| City: | S | tate: | |

Website or email address:

Phone number:

If this was an approved WorkSource activity, please provide the following information:

What activity did you complete:

What documentation do you have:

Where did you complete this activity?

Office name:

City: _____

If this was an approved other activity, please provide the following information: What activity did you complete:

What documentation do you have:

Keep this log for your records.

CONTACT 3 Contact Date (MM/DD/YYYY):

ID or SSN:

What kind of activity did you do? Choose one: Employer contact WorkSource activity Other activity

If this was an **employer contact**, please provide the following: Job title or job reference number:

Employer or business name:

| How did you make the contact? | | | | | | | | |
|-------------------------------|--------|----------|------------|-----------|--|--|--|--|
| I In-person | Online | By phone | I By Email | I By mail | | | | |
| Other: | | | | | | | | |

Type of contact (Choose one)

Application/resume Interview Inquiry

Employer or business contact information:

Address:

City: _____ State:

Website or email address:

Phone number:

If this was an approved WorkSource activity,

please provide the following information:

What activity did you complete:

| What documente | ation do | you | have: |
|----------------|----------|-----|-------|
|----------------|----------|-----|-------|

Where did you complete this activity?

Office name: _____

State:

City:

State:

If this was an approved other activity, please provide the following information: What activity did you complete:

What documentation do you have:

The Employment Security Department is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Language assistance services for limited English proficient individuals are available free of charge. Washington Relay Service: 711 1. Your benefit year is the 52-week period when you can receive unemployment benefits on your claim. It usually begins the Sunday of the week you first apply for benefits.

2. Benefit extensions, when available, let you get additional benefits after you are no longer eligible to receive regular unemployment benefits.

State:

