

Name: \_\_\_\_\_ ID or SSN: \_\_\_\_\_ **Keep this log for your records\***

**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 or approved job-search activities each week. Keep your logs. \* **We may review them any time up to 60 days past the end of your benefit year or up to 30 days after receiving any benefits, whichever is later.** We may call the employers listed to verify that you contacted them for work. 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 [www.esd.wa.gov/job-search-log](http://www.esd.wa.gov/job-search-log). If you apply online or respond to a newspaper ad, please attach a copy of the confirmation notice or ad if available. Refer to your Handbook for Unemployed Workers for further instructions on completing this log.

Contacts and job-search activities		Keep this log for your records				
<b>CONTACT 1</b> <small>Staff use only</small>	<input type="checkbox"/> SKIES <input type="checkbox"/> SKIES	<b>FOR EMPLOYER CONTACT, check one AND list position or type of work applied for:</b> <input type="checkbox"/> Application/résumé <input type="checkbox"/> Interview <input type="checkbox"/> Inquiry  <b>Position:</b> .....  <b>How contacted:</b> <input type="checkbox"/> Online/email <input type="checkbox"/> Fax <input type="checkbox"/> In person <input type="checkbox"/> Mail <input type="checkbox"/> Kiosk <input type="checkbox"/> Telephone  <input type="checkbox"/> Other (describe):.....  <b>FOR WORKSOURCE ACTIVITY, briefly describe:</b> .....	<b>If employer contact was in person, by kiosk or by telephone, you MUST complete this section.</b> Employer ..... Telephone ( ..... ) ..... Address ..... City ..... State ..... Name or position of person contacted .....			
	<input type="checkbox"/> Employer contact  OR  <input type="checkbox"/> WorkSource activity	<b>If employer contact was made online, by email, by fax or by newspaper, you MUST complete the appropriate information in this section.</b> Employer name (if provided) .....Website or email ..... Job reference number ..... If fax, provide the fax number ( ..... ) ..... Newspaper name ..... Publication date .....				
<b>CONTACT 2</b> <small>Staff use only</small>	<input type="checkbox"/> SKIES <input type="checkbox"/> SKIES	<b>FOR EMPLOYER CONTACT, check one AND list position or type of work applied for:</b> <input type="checkbox"/> Application/ résumé <input type="checkbox"/> Interview <input type="checkbox"/> Inquiry  <b>Position:</b> .....  <b>How contacted:</b> <input type="checkbox"/> Online/email <input type="checkbox"/> Fax <input type="checkbox"/> In person <input type="checkbox"/> Mail <input type="checkbox"/> Kiosk <input type="checkbox"/> Telephone  <input type="checkbox"/> Other (describe):.....  <b>FOR WORKSOURCE ACTIVITY, briefly describe:</b> .....	<b>If employer contact was in person, by kiosk or by telephone, you MUST complete this section.</b> Employer ..... Telephone ( ..... ) ..... Address ..... City ..... State ..... Name or position of person contacted .....			
	<input type="checkbox"/> Employer contact  OR  <input type="checkbox"/> WorkSource activity	<b>If employer contact was made online, by email, by fax or by newspaper, you MUST complete the appropriate information in this section.</b> Employer name (if provided) .....Website or email ..... Job reference number ..... If fax, provide the fax number ( ..... ) ..... Newspaper name ..... Publication date .....				
<b>CONTACT 3</b> <small>Staff use only</small>	<input type="checkbox"/> SKIES <input type="checkbox"/> SKIES	<b>FOR EMPLOYER CONTACT, check one AND list position or type of work applied for:</b> <input type="checkbox"/> Application/ résumé <input type="checkbox"/> Interview <input type="checkbox"/> Inquiry  <b>Position:</b> .....  <b>How contacted:</b> <input type="checkbox"/> Online/email <input type="checkbox"/> Fax <input type="checkbox"/> In person <input type="checkbox"/> Mail <input type="checkbox"/> Kiosk <input type="checkbox"/> Telephone  <input type="checkbox"/> Other (describe):.....  <b>FOR WORKSOURCE ACTIVITY, briefly describe:</b> .....	<b>If employer contact was in person, by kiosk or by telephone, you MUST complete this section.</b> Employer ..... Telephone ( ..... ) ..... Address ..... City ..... State ..... Name or position of person contacted .....			
	<input type="checkbox"/> Employer contact  OR  <input type="checkbox"/> WorkSource activity	<b>If employer contact was made online, by email, by fax or by newspaper, you MUST complete the appropriate information in this section.</b> Employer name (if provided) .....Website or email ..... Job reference number ..... If fax, provide the fax number ( ..... ) ..... Newspaper name ..... Publication date .....				

<b>For official use only</b>	Week being verified	Entitlement	<input type="checkbox"/> Reschedule	WS office name or #	Claims Center #	Staff initials
------------------------------	---------------------	-------------	-------------------------------------	---------------------	-----------------	----------------

# Job-Search Log for the week ending (Mo/Day/Yr) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Keep this log for your records\*

Name: \_\_\_\_\_ ID or SSN: \_\_\_\_\_

**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 or approved job-search activities each week. Keep your logs. \* **We may review them any time up to 60 days past the end of your benefit year or up to 30 days after receiving any benefits, whichever is later.** We may call the employers listed to verify that you contacted them for work. Providing false information is fraud that can result in a denial of your unemployment benefits and additional penalties.

Contacts and job-search activities		Keep this log for your records				
<b>CONTACT 4</b> <input type="checkbox"/> SKIES Staff use only	Contact date (Mo/Day/Yr) <input type="checkbox"/>	<b>FOR EMPLOYER CONTACT, check one AND list position or type of work applied for:</b> <input type="checkbox"/> Application/ résumé <input type="checkbox"/> Interview <input type="checkbox"/> Inquiry	<b>If employer contact was in person, by kiosk or by telephone, you MUST complete this section.</b> Employer ..... Telephone ( ..... ) ..... Address ..... City ..... State ..... Name or position of person contacted .....			
	<input type="checkbox"/> Employer contact OR <input type="checkbox"/> WorkSource activity	<b>Position:</b> ..... <b>How contacted:</b> <input type="checkbox"/> Online/email <input type="checkbox"/> Fax <input type="checkbox"/> In person <input type="checkbox"/> Mail <input type="checkbox"/> Kiosk <input type="checkbox"/> Telephone <input type="checkbox"/> Other (describe): .....	<b>If employer contact was made online, by email, by fax or by newspaper, you MUST complete the appropriate information in this section.</b> Employer name (if provided) ..... Website or email ..... Job reference number ..... If fax, provide the fax number ( ..... ) ..... Newspaper name ..... Publication date .....			
<b>CONTACT 5</b> <input type="checkbox"/> SKIES Staff use only	Contact date (Mo/Day/Yr) <input type="checkbox"/>	<b>FOR EMPLOYER CONTACT, check one AND list position or type of work applied for:</b> <input type="checkbox"/> Application/ résumé <input type="checkbox"/> Interview <input type="checkbox"/> Inquiry	<b>If employer contact was in person, by kiosk or by telephone, you MUST complete this section.</b> Employer ..... Telephone ( ..... ) ..... Address ..... City ..... State ..... Name or position of person contacted .....			
	<input type="checkbox"/> Employer contact OR <input type="checkbox"/> WorkSource activity	<b>Position:</b> ..... <b>How contacted:</b> <input type="checkbox"/> Online/email <input type="checkbox"/> Fax <input type="checkbox"/> In person <input type="checkbox"/> Mail <input type="checkbox"/> Kiosk <input type="checkbox"/> Telephone <input type="checkbox"/> Other (describe): .....	<b>If employer contact was made online, by email, by fax or by newspaper, you MUST complete the appropriate information in this section.</b> Employer name (if provided) ..... Website or email ..... Job reference number ..... If fax, provide the fax number ( ..... ) ..... Newspaper name ..... Publication date .....			
<b>CONTACT 6</b> <input type="checkbox"/> SKIES Staff use only	Contact date (Mo/Day/Yr) <input type="checkbox"/>	<b>FOR EMPLOYER CONTACT, check one AND list position or type of work applied for:</b> <input type="checkbox"/> Application/ résumé <input type="checkbox"/> Interview <input type="checkbox"/> Inquiry	<b>If employer contact was in person, by kiosk or by telephone, you MUST complete this section.</b> Employer ..... Telephone ( ..... ) ..... Address ..... City ..... State ..... Name or position of person contacted .....			
	<input type="checkbox"/> Employer contact OR <input type="checkbox"/> WorkSource activity	<b>Position:</b> ..... <b>How contacted:</b> <input type="checkbox"/> Online/email <input type="checkbox"/> Fax <input type="checkbox"/> In person <input type="checkbox"/> Mail <input type="checkbox"/> Kiosk <input type="checkbox"/> Telephone <input type="checkbox"/> Other (describe): .....	<b>If employer contact was made online, by email, by fax or by newspaper, you MUST complete the appropriate information in this section.</b> Employer name (if provided) ..... Website or email ..... Job reference number ..... If fax, provide the fax number ( ..... ) ..... Newspaper name ..... Publication date .....			

<b>For official use only</b>	Week being verified	Entitlement	<input type="checkbox"/> Reschedule	WS office name or #	Claims Center #	Staff initials
------------------------------	---------------------	-------------	-------------------------------------	---------------------	-----------------	----------------