



NOTICE OF POTENTIAL AVAILABILITY OF UNEMPLOYMENT INSURANCE BENEFITS

ATTENTION EMPLOYER: You are legally required to provide a form, in hard copy or electronic format, to an employee upon separation. Please complete the form using information that matches your employee payroll records.

ATTENTION EMPLOYEE: Below is information from your previous employer at the time of separation from employment. If you received \$2,500 or more in payroll wages from any employer where taxes were withheld in the last 18 months, you may be eligible to file a claim for unemployment benefits. Before you file a claim, gather your income and related information, such as pay stubs and this form. You can file a claim by visiting the website at <https://cdle.colorado.gov/unemployment> or by calling the Unemployment Insurance Division at 303-318-9000 (Denver Metro) or 1-800-388-5515 (toll free).

Employee Name:	Employee SSN (last four digits only)/ or Individual Taxpayer Identification Number (ITIN):
Employee Address:	
Employee Start Date of Employment:	Employee Last Date Worked:
Employee Year-to-Date Earnings:	Earnings for the Last Week Worked:
Employer Legal Business Name:	Federal Employer Identification Number (FEIN):
Employer Trade Name/Doing Business As Name (if applicable):	Employer Address:
Reason the employee separated from employment (Please select only one option and limit free-form responses to one sentence. If an unemployment claim is filed, the Division will reach out to both parties for additional information about the separation):	
<input type="checkbox"/> Quit Employee's reason for quit: _____	
<input type="checkbox"/> Layoff	
<input type="checkbox"/> Discharge Reason for discharge: _____	
<input type="checkbox"/> Other: _____	